

Government of the United States Virgin Islands

Schedule of Expenditures of Federal
Awards and Reports Required by
Government Auditing Standards and
the Uniform Guidance
Year Ended September 30, 2022

The report accompanying these financial statements was issued by
BDO USA, P.C., a Virginia professional corporation, and the U.S. member
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**Government of the
United States Virgin Islands**

Schedule of Expenditures of Federal Awards
and Reports Required by *Government Auditing
Standards* and the Uniform Guidance
Year Ended September 30, 2022

Government of the United States Virgin Islands

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Independent Auditor’s Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*

To the Honorable Governor
of the Government of the United States Virgin Islands

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the financial statements of the Government of the United States Virgin Islands (the Government), which comprise the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund, and the aggregate remaining fund information as of and for the year ended September 30, 2022, and the related notes to the financial statements, and have issued our report thereon dated September 30, 2025. We expressed a disclaimer of opinion on the financial statements of the governmental activities, business-type activities, general fund, federal grants fund, unemployment insurance-enterprise fund, aggregate remaining fund information, and aggregate discretely presented component units opinion units based on the circumstances described in our aforementioned report.

Our aforementioned report includes references to other auditors who audited the financial statements of the Virgin Islands Housing Authority (VIHA), Virgin Islands Economic Development Authority (VIEDA), Virgin Islands Waste Management Authority (VIWMA), Virgin Islands Public Broadcasting System (VIPBS), Virgin Islands Housing Finance Authority (VIHFA), and Government Employees’ Retirement System of the of the U.S. Virgin Islands (GERS), as described in our report on the Government’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. We audited the financial statements of the Virgin Islands Public Finance Authority (PFA), The West Indian Company Limited (WICO), viNGN, INC. d/b/a Virgin Islands Next Generation Network (viNGN), Tobacco Settlement Financing Corporation (TSFC), and Matching Fund Special Purpose Securitization Corporation (MFSPSC). This report does not include the results of our testing of internal control over financial reporting or compliance and other matters for PFA, WICO, viNGN, TSFC, and MFSPSC which is reported on separately by us.

Report on Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Government’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 Government’s internal control. Accordingly, we do not express an opinion on the effectiveness of the Government’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 greater detail in the accompanying schedule of findings and questioned costs, we identified certain deficiencies in internal control that we consider to be material weaknesses and significant deficiencies.

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 Government’s financial statements will not be prevented, or detected and corrected on a timely basis. We consider the deficiencies identified below and described in accompanying schedule of findings and questioned costs to be material weaknesses.

Finding #	Nature of Finding
2022-001	Year-End Close Process
2022-002	Revenue and Receivables
2022-003	Grants Management
2022-004	Capital Assets and Related Expenditures
2022-005	Recording of Liabilities
2022-006	Management of the Medicaid Program
2022-007	Unemployment Insurance Trust Fund
2022-008	Workers Compensation Program
2022-009	Payroll, Related Accruals, and Other Expenditures
2022-010	Bank Accounts
2022-011	Other Postemployment Benefits Obligation
2022-012	Accounting Standards Implementation
2022-013	Irregularities related to Procurement Activities
2022-014	Procurement Regulations

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. We consider the deficiency identified below and described in greater detail in accompanying schedule of findings and questioned costs to be a significant deficiency.

Finding #	Nature of Finding
2022-015	Information Technology (IT) Environment



Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Government’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 auditing procedures disclosed an instance of suspected fraud that is required to be reported in accordance with *Government Auditing Standards* and which is described in the accompanying schedule of findings and questioned costs as items 2022-013 and 2022-042. Our opinion is not modified with respect to these matters. The results of our tests disclosed instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards* as identified below and described in greater detail in the accompanying schedule of findings and questioned costs.

Finding #	Nature of Finding
2022-013	Irregularities related to Procurement Activities
2022-014	Procurement Regulations
2022-016	Collateral of Depository
2022-017	Landfill Consent Decrees
2022-018	Establishment of a Medical Malpractice Trust Fund
2022-019	Casino Control Commission

The Government’s Response to Findings

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

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Government’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 Government’s internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

BDO USA, P.C.

September 30, 2025



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Independent Auditor’s Report on Compliance For Each Major Federal Program; Report on Internal Control Over Compliance; and Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

To the Honorable Governor
of the Government of the United States Virgin Islands

Report on Compliance for Each Major Federal Program

Adverse, Qualified, and Unmodified Opinions

We have audited the Government of the United States Virgin Islands’ (the Government) compliance with the types of compliance requirements identified as subject to audit described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the Government’s major federal programs for the year ended September 30, 2022. The Government’s major federal programs are identified in the summary of auditor’s results section of the accompanying schedule of findings and questioned costs.

The Government’s basic financial statements include the operations of the Virgin Islands Housing Authority (VIHA), Virgin Islands Economic Development Authority (VIEDA), Virgin Islands Waste Management Authority (VIWMA), Magens Bay Authority (MBA), Virgin Islands Government Hospital and Health Facilities Corporation (Roy L. Schneider Hospital and Governor Juan F. Luis Hospital and Medical Center), Virgin Islands Public Broadcasting System (VIPBS), Virgin Islands Housing Finance Authority (VIHFA), Government Employees’ Retirement System of the U.S. Virgin Islands (GERS), Virgin Islands Lottery (VI Lottery), the University of the Virgin Islands (UVI) and The University of the Virgin Islands Research and Technology Park Corporation (RTPark). The accompanying Schedule of Expenditures of Federal Awards and our audit described below do not include the Federal expenditures of these organizational units, as may be applicable. These organizational units of the Government have engaged other auditors to perform a separate independent audit in accordance with Title 2 U.S. *Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*. The accompanying Schedule of Expenditures of Federal Awards and our audit described below also do not include the Federal expenditures of the Tobacco Settlement Financing Corporation (TSFC) and Matching Fund Special Purpose Securitization Corporation (MFSPSC), as may be applicable, as the results of our testing of compliance is reported on separately by us.



Summary of Opinions

Table I - Summary of Opinions		
Major Federal Program or Cluster	Assistance Listing Number (s)	Type of Opinion
Supplemental Nutrition Assistance Program Cluster (SNAP)	10.551, 10.561	Unmodified
Child Nutrition Cluster	10.555, 10.559, 10.582	Unmodified
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	10.557	Unmodified
National Guard Military Operations and Maintenance (O&M) Projects	12.401	Adverse
Economic, Social, and Political Development of the Territories	15.875	Qualified
Unemployment Insurance	17.225	Adverse
Highway Planning and Construction Cluster	20.205	Unmodified
Federal Transit Cluster	20.507	Unmodified
COVID-19 - Coronavirus Relief Fund	21.019	Qualified
COVID-19 - Emergency Rental Assistance Program	21.023	Unmodified
COVID-19 - Homeowner Assistance Fund	21.026	Unmodified
COVID-19 - Coronavirus State and Local Fiscal Recovery Funds	21.027	Qualified
Special Education Cluster (IDEA)	84.027A, 84.027X	Unmodified
Consolidated Grant to the Outlying Areas	84.403A	Unmodified
COVID-19 - Education Stabilization Fund	84.425A, 84.425H, 84.425X	Qualified
Epidemiology and Laboratory Capacity for Infectious Diseases	93.323	Qualified
Head Start Cluster	93.356, 93.600	Qualified
CCDF Cluster	93.489, 93.575	Adverse
Child Support Enforcement	93.563	Unmodified
Social Services Block Grant	93.667	Unmodified
Medicaid Cluster	93.775, 93.778	Adverse
Disaster Grants - Public Assistance (Presidentially Declared Disasters)	97.036	Qualified
Hazard Mitigation Grant Program	97.039	Qualified

Adverse Opinions on Four Major Federal Programs Identified in Table I

In our opinion, because of the significance of the matters discussed in the Basis for Adverse, Qualified, and Unmodified Opinions section of our report, the Government did not comply in all material respects, with the compliance requirements referred to above that could have a direct and material effect on the major federal programs identified in Table I for the year ended September 30, 2022.



Qualified Opinions on Eight Major Federal Programs Identified in Table I

In our opinion, except for the noncompliance described in the Basis for Adverse, Qualified, and Unmodified Opinions section of our report, the Government complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on the major federal program identified in Table I for the year ended September 30, 2022.

Unmodified Opinion on Each of the Other Major Federal Programs

In our opinion, the Government complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its other major federal programs identified in Table I and in the summary of auditor’s results section of the accompanying schedule of findings and questioned costs for the year ended September 30, 2022.

Basis for Adverse, Qualified, and Unmodified Opinions

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; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor’s Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the Government 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 adverse, qualified, and unmodified opinions on compliance for each major federal program. Our audit does not provide a legal determination of the Government’s compliance with the compliance requirements referred to above.

Matters Giving Rise to Adverse Opinion on Four Major Federal Programs Identified in Table I

As described in the accompanying schedule of findings and questioned costs, and as identified in Table II below, the Government did not comply with requirements regarding the following:

Table II - Material Noncompliance Resulting in Adverse Opinions				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Defense	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Allowable Costs/Cost Principles - Payroll Activities and Period of Performance	2022-026



Table II - Material Noncompliance Resulting in Adverse Opinions				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Defense	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Cash Management and Reporting	2022-027
Defense	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Matching, Level of Effort, Earmarking	2022-028
Defense	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Period of Performance	2022-029
Labor	17.225	Unemployment Insurance	Activities Allowed or Unallowed	2022-034
Labor	17.225	Unemployment Insurance	Eligibility	2022-035
Labor	17.225	Unemployment Insurance	Reporting	2022-036
Labor	17.225	Unemployment Insurance	Special Tests and Provisions - Employer Experience Rating	2022-037
Labor	17.225	Unemployment Insurance	Special Tests and Provisions - UI Reemployment Programs (WPRS and RESEA)	2022-038
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Eligibility	2022-064
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Matching, Level of Effort, Earmarking	2022-065
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Reporting	2022-067
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Special Tests and Provisions - Health and Safety Requirements	2022-068
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Special Tests and Provisions - Fraud Detection and Repayment	2022-069
Health and Human Services	93.775, 93.778	Medicaid Cluster	Eligibility	2022-075
Health and Human Services	93.775, 93.778	Medicaid Cluster	Special Tests and Provisions - Utilization Control and Program Integrity	2022-077



Table II - Material Noncompliance Resulting in Adverse Opinions				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Health and Human Services	93.775, 93.778	Medicaid Cluster	Special Tests and Provisions - Inpatient Hospital and Long-Term Care Facility Audits	2022-078
Health and Human Services	93.775, 93.778	Medicaid Cluster	Special Tests and Provisions - ADP Risk Analysis and System Security Review	2022-079
Health and Human Services	93.775, 93.778	Medicaid Cluster	Special Tests and Provisions - Medicaid National Correct Coding Initiative	2022-080

Compliance with such requirements is necessary, in our opinion, for the Government to comply with the requirements applicable to that program.

Matters Giving Rise to Qualified Opinion on Eight Major Federal Programs Identified in Table I

As described in the accompanying schedule of findings and questioned costs, and as identified in Table III below, the Government did not comply with requirements regarding the following:

Table III - Material Noncompliance Resulting in Qualified Opinions				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Interior	15.875	Economic, Social, and Political Development of the Territories	Cash Management	2022-030
Interior	15.875	Economic, Social, and Political Development of the Territories	Equipment and Real Property Management	2022-031
Interior	15.875	Economic, Social, and Political Development of the Territories	Procurement and Suspension and Debarment	2022-032
Interior	15.875	Economic, Social, and Political Development of the Territories	Reporting	2022-033
Treasury	21.019	Coronavirus Relief Fund	Reporting	2022-040
Treasury	21.019	Coronavirus Relief Fund	Subrecipient Monitoring	2022-041
Treasury	21.027	Coronavirus State and Local Fiscal Recovery Funds	Procurement and Suspension and Debarment	2022-043
Treasury	21.027	Coronavirus State and Local Fiscal Recovery Funds	Reporting	2022-044



Table III - Material Noncompliance Resulting in Qualified Opinions				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Treasury	21.027	Coronavirus State and Local Fiscal Recovery Funds	Subrecipient Monitoring	2022-045
Education	84.425A	Education Stabilization Fund	Special Tests and Provisions - Participation of Private School Children	2022-054
Education	84.425A	Education Stabilization Fund	Special Tests and Provisions - Wage Rate Requirements	2022-055
Health and Human Services	93.323	Epidemiology and Laboratory Capacity for Infectious Disease	Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities	2022-056
Health and Human Services	93.323	Epidemiology and Laboratory Capacity for Infectious Disease	Equipment and Real Property Management	2022-057
Health and Human Services	93.356, 93.600	Head Start	Equipment and Real Property Management	2022-058
Homeland Security	97.036	Disaster Grants - Public Assistance (Presidentially Declared Disasters)	Reporting	2022-081
Homeland Security	97.036	Disaster Grants - Public Assistance (Presidentially Declared Disasters)	Subrecipient Monitoring	2022-082
Homeland Security	97.039	Hazard Mitigation Grant	Reporting	2022-083

Compliance with such requirements is necessary, in our opinion, for the Government to comply with the requirements applicable to those programs.

Responsibilities of Management for Compliance

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



Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the Government'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*, and the Uniform Guidance 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 Government's compliance with the requirements of each major federal program as a whole.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the Government'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 Government'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, but not for the purpose of expressing an opinion on the effectiveness of the Government'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 other instances of noncompliance, which are required to be reported in accordance with the Uniform Guidance and which are described in the accompanying schedule of findings and questioned costs, and as identified in Tables IV, V, and VI below. Our opinion on each major Federal program is not modified with respect to these matters.



Table IV - Other Instances of Noncompliance Noted in Programs with Adverse Opinions				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Non-Payroll Activities	2022-062
Health and Human Services	93.775, 93.778	Medicaid Cluster	Allowable Costs/Cost Principles - Non-Payroll Activities	2022-074
Health and Human Services	93.775, 93.778	Medicaid Cluster	Reporting	2022-076

Table V - Other Instances of Noncompliance Noted in Programs with Qualified Opinions				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Treasury	21.019	Coronavirus Relief Fund	Period of Performance	2022-039
Treasury	21.027	Coronavirus State and Local Fiscal Recovery Funds	Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Non-Payroll Activities and Procurement and Suspension and Debarment	2022-042
Education	84.425A	Education Stabilization Fund	Allowable Costs/Cost Principles - Payroll Activities	2022-052
Education	84.425A	Education Stabilization Fund	Reporting	2022-053
Health and Human Services	93.356, 93.600	Head Start	Reporting	2022-059
Health and Human Services	93.356, 93.600	Head Start	Special Tests and Provisions - Protection of Federal Interest in Real Property and Facilities	2022-060
Health and Human Services	93.356, 93.600	Head Start	Special Tests and Provisions - Program Governance	2022-061



Table VI - Other Instances of Noncompliance with Unmodified Opinions				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Agriculture	10.551, 10.561	Supplemental Nutrition Assistance Program Cluster	Allowable Costs/Cost Principles - Payroll Activities	2022-020
Agriculture	10.551, 10.561	Supplemental Nutrition Assistance Program Cluster	Matching, Level of Effort, Earmarking	2022-021
Agriculture	10.551, 10.561	Supplemental Nutrition Assistance Program Cluster	Special Tests and Provisions - EBT Card Security	2022-022
Agriculture	10.555, 10.559 & 10.582	Child Nutrition Cluster	Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities	2022-023
Education	84.027A	Special Education - Grants to States (IDEA)	Equipment and Real Property Management	2022-046
Education	84.027A	Special Education - Grants to States (IDEA)	Matching, Level of Effort, Earmarking	2022-047
Education	84.403A	Consolidated Grant to the Outlying Areas	Cash Management	2022-048
Education	84.403A	Consolidated Grant to the Outlying Areas	Equipment and Real Property Management	2022-049
Education	84.403A	Consolidated Grant to the Outlying Areas	Reporting	2022-050
Education	84.403A	Consolidated Grant to the Outlying Areas	Subrecipient Monitoring	2022-051
Health and Human Services	93.667	Social Services Block Grant	Period of Performance	2022-072
Health and Human Services	93.667	Social Services Block Grant	Reporting	2022-073

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

The Government is responsible for preparing a corrective action plan to address each audit finding included in our auditor’s report. The Government’s corrective action plan was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on it.



The results of our auditing procedures disclosed an instance of suspected fraud that is required to be reported in accordance with *Government Auditing Standards* and which is described in the accompanying schedule of findings and questioned costs as item 2022-042. Our opinion on each major federal program is not modified with respect to this matter.

Report on Internal Control Over Compliance

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

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. We consider the deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs as identified in Table VII below to be material weaknesses.

Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Agriculture	10.551, 10.561	Supplemental Nutrition Assistance Program Cluster	Matching, Level of Effort, Earmarking	2022-021
Agriculture	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	Cash Management	2022-024
Agriculture	10.557	Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	Period of Performance	2022-025
Defense	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Allowable Costs/Cost Principles - Payroll Activities and Period of Performance	2022-026
Defense	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Cash Management and Reporting	2022-027



Table VII - Material Weaknesses in Internal Control over Compliance				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Defense	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Matching, Level of Effort, Earmarking	2022-028
Defense	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Period of Performance	2022-029
Interior	15.875	Economic, Social, and Political Development of the Territories	Cash Management	2022-030
Interior	15.875	Economic, Social, and Political Development of the Territories	Equipment and Real Property Management	2022-031
Interior	15.875	Economic, Social, and Political Development of the Territories	Procurement and Suspension and Debarment	2022-032
Interior	15.875	Economic, Social, and Political Development of the Territories	Reporting	2022-033
Labor	17.225	Unemployment Insurance	Activities Allowed or Unallowed	2022-034
Labor	17.225	Unemployment Insurance	Eligibility	2022-035
Labor	17.225	Unemployment Insurance	Reporting	2022-036
Labor	17.225	Unemployment Insurance	Special Tests and Provisions - Employer Experience Rating	2022-037
Labor	17.225	Unemployment Insurance	Special Tests and Provisions - UI Reemployment Programs (WPRS and RESEA)	2022-038
Treasury	21.019	Coronavirus Relief Fund	Period of Performance	2022-039
Treasury	21.019	Coronavirus Relief Fund	Reporting	2022-040
Treasury	21.019	Coronavirus Relief Fund	Subrecipient Monitoring	2022-041
Treasury	21.027	Coronavirus State and Local Fiscal Recovery Funds	Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Non-Payroll Activities and Procurement and Suspension and Debarment	2022-042
Treasury	21.027	Coronavirus State and Local Fiscal Recovery Funds	Procurement and Suspension and Debarment	2022-043
Treasury	21.027	Coronavirus State and Local Fiscal Recovery Funds	Reporting	2022-044



Table VII - Material Weaknesses in Internal Control over Compliance				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Treasury	21.027	Coronavirus State and Local Fiscal Recovery Funds	Subrecipient Monitoring	2022-045
Education	84.027A	Special Education - Grants to States (IDEA)	Equipment and Real Property Management	2022-046
Education	84.027A	Special Education - Grants to States (IDEA)	Matching, Level of Effort, Earmarking	2022-047
Education	84.403A	Consolidated Grant to the Outlying Areas	Equipment and Real Property Management	2022-049
Education	84.403A	Consolidated Grant to the Outlying Areas	Subrecipient Monitoring	2022-051
Education	84.425A	Education Stabilization Fund	Reporting	2022-053
Education	84.425A	Education Stabilization Fund	Special Tests and Provisions - Participation of Private School Children	2022-054
Education	84.425A	Education Stabilization Fund	Special Tests and Provisions - Wage Rate Requirements	2022-055
Health and Human Services	93.323	Epidemiology and Laboratory Capacity for Infectious Disease	Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities	2022-056
Health and Human Services	93.323	Epidemiology and Laboratory Capacity for Infectious Disease	Equipment and Real Property Management	2022-057
Health and Human Services	93.356, 93.600	Head Start	Equipment and Real Property Management	2022-058
Health and Human Services	93.356, 93.600	Head Start	Reporting	2022-059
Health and Human Services	93.356, 93.600	Head Start	Special Tests and Provisions - Protection of Federal Interest in Real Property and Facilities	2022-060
Health and Human Services	93.356, 93.600	Head Start	Special Tests and Provisions - Program Governance	2022-061
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Non-Payroll Activities	2022-062



Table VII - Material Weaknesses in Internal Control over Compliance				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities	2022-063
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Eligibility	2022-064
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Matching, Level of Effort, Earmarking	2022-065
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Reporting	2022-067
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Special Tests and Provisions - Health and Safety Requirements	2022-068
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Special Tests and Provisions - Fraud Detection and Repayment	2022-069
Health and Human Services	93.667	Social Services Block Grant	Period of Performance	2022-072
Health and Human Services	93.667	Social Services Block Grant	Reporting	2022-073
Health and Human Services	93.775, 93.778	Medicaid Cluster	Eligibility	2022-075
Health and Human Services	93.775, 93.778	Medicaid Cluster	Reporting	2022-076
Health and Human Services	93.775, 93.778	Medicaid Cluster	Special Tests and Provisions - Utilization Control and Program Integrity	2022-077
Health and Human Services	93.775, 93.778	Medicaid Cluster	Special Tests and Provisions - Inpatient Hospital and Long-Term Care Facility Audits	2022-078
Health and Human Services	93.775, 93.778	Medicaid Cluster	Special Tests and Provisions - ADP Risk Analysis and System Security Review	2022-079



Table VII - Material Weaknesses in Internal Control over Compliance				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Health and Human Services	93.775, 93.778	Medicaid Cluster	Special Tests and Provisions - Medicaid National Correct Coding Initiative	2022-080
Homeland Security	97.036	Disaster Grants - Public Assistance (Presidentially Declared Disasters)	Reporting	2022-081
Homeland Security	97.036	Disaster Grants - Public Assistance (Presidentially Declared Disasters)	Subrecipient Monitoring	2022-082
Homeland Security	97.039	Hazard Mitigation Grant	Reporting	2022-083

A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance. We consider the deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs and as identified in Table VIII below, to be significant deficiencies:

Table VIII - Significant Deficiencies in Internal Control over Compliance				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Agriculture	10.551, 10.561	Supplemental Nutrition Assistance Program Cluster	Allowable Costs/Cost Principles - Payroll Activities	2022-020
Agriculture	10.551, 10.561	Supplemental Nutrition Assistance Program Cluster	Special Tests and Provisions - EBT Card Security	2022-022
Agriculture	10.555, 10.559 & 10.582	Child Nutrition Cluster	Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities	2022-023
Education	84.403A	Consolidated Grant to the Outlying Areas	Cash Management	2022-048
Education	84.403A	Consolidated Grant to the Outlying Areas	Reporting	2022-050
Education	84.425A	Education Stabilization Fund	Allowable Costs/Cost Principles - Payroll Activities	2022-052



Table VIII - Significant Deficiencies in Internal Control over Compliance				
Federal Awarding Agency	Assistance Listing Number (s)	Major Federal Program	Compliance Requirement	Finding Number
Health and Human Services	93.575, 93.489	Child Care Development Block Grant	Period of Performance	2022-066
Health and Human Services	93.563	Child Support Enforcement	Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities	2022-070
Health and Human Services	93.667	Social Services Block Grant	Activities Allowed or Unallowed and Allowable Costs/Cost Principles	2022-071
Health and Human Services	93.775, 93.778	Medicaid Cluster	Allowable Costs/Cost Principles - Non-Payroll Activities	2022-074

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

The Government is responsible for preparing a corrective action plan to address each audit finding included in our auditor’s report. The Government’s corrective action plan was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on it.

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



Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

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 Government of the United States Virgin Islands (the Government) as of and for the year ended September 30, 2022, and the related notes to the financial statements, which collectively comprise the Government's basic financial statements. We have issued our report thereon dated September 30, 2025, which contained a disclaimer of opinion on the financial statements of the governmental activities, business-type activities, general fund, federal grants fund, unemployment insurance-enterprise fund, aggregate remaining fund information, and aggregate discretely-presented component units opinion units based on the circumstances noted in our aforementioned report.

Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements as a whole. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the basic financial statements as a whole.

BDO USA, P.C.

September 30, 2025

**Schedule of Expenditures
of Federal Awards**

Government of the United States Virgin Islands

Schedule of Expenditures of Federal Awards

Year ended September 30, 2022

<i>Federal Grantor/Pass-Through Grantor/Program or Cluster Title</i>	<i>Federal Assistance Listing Number</i>	<i>Pass-Through Entity Identifying Number</i>	<i>Passed Through to Subrecipients</i>	<i>Total Federal Expenditures</i>
U.S. Department of Agriculture				
Plant and Animal Disease, Pest Control, and Animal Care	10.025			\$ 103,182
Specialty Crop Block Grant Program - Farm Bill	10.170	001561211	\$ 14,403	167,016
Micro-Grants for Food Security Program	10.179			3,428
<u>SNAP Cluster</u>				
Supplemental Nutrition Assistance Program (SNAP)	10.551			59,094,602
COVID-19 - Supplemental Nutrition Assistance Program (SNAP)	10.551			38,473,184
				97,567,786
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	10.561			3,885,658
<i>Total SNAP Cluster</i>				101,453,444
<u>Child Nutrition Cluster</u>				
National School Lunch Program (NSLP)	10.555			3,116,890
Summer Food Service Program for Children (SFSPC)	10.559			26,929
Fresh Fruit and Vegetable Program (FFVP)	10.582			12,398
<i>Total Child Nutrition Cluster</i>				3,156,217
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	10.557			4,821,889
Child and Adult Care Food Program	10.558			455,541
State Administrative Expenses for Child Nutrition	10.560			386,096
<u>Food Distribution Cluster</u>				
Emergency Food Assistance Program (Administrative Costs)	10.568			58,875
COVID-19 - Emergency Food Assistance Program (Administrative Costs)	10.568			58,321
<i>Total Food Distribution Cluster</i>				117,196
WIC Grants to States (WGS)	10.578			557,708
Child Nutrition Discretionary Grants Limited Availability	10.579			35,982
Cooperative Forestry Assistance	10.664			62,013
Urban and Community Forestry Program	10.675	001561211	6,500	60,806
Forest Legacy Program	10.676			8,475
Forest Stewardship Program	10.678			32,088

Government of the United States Virgin Islands

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<i>Federal Grantor/Pass-Through Grantor/Program or Cluster Title</i>	<i>Federal Assistance Listing Number</i>	<i>Pass-Through Entity Identifying Number</i>	<i>Passed Through to Subrecipients</i>	<i>Total Federal Expenditures</i>
U.S. Department of Agriculture (continued)				
Distance Learning and Telemedicine Loans and Grants	10.855			628,301
Soil and Water Conservation	10.902			49,350
Environmental Quality Incentives Program	10.912			69,576
Total U.S. Department of Agriculture			20,903	112,168,308
U.S. Department of Commerce				
Bipartisan Budget Act of 2018	11.022	0169363814	786,128	2,514,562
<i>Economic Development Cluster</i>				
Economic Adjustment Assistance	11.307			122,583
Interjurisdictional Fisheries Act of 1986	11.407			456
Coastal Zone Management Administration Awards	11.419	0169363814	181,906	1,021,009
Cooperative Fishery Statistics	11.434			295,020
Southeast Area Monitoring and Assessment Program	11.435			189,211
COVID-19 - Unallied Management Projects	11.454	0169363814	80,042	166,692
Meteorologic and Hydrologic Modernization Development	11.467			289,782
Unallied Science Program	11.472	0169363814	160,000	172,599
Coral Reef Conservation Program	11.482			512,895
Total U.S. Department of Commerce			1,208,076	5,284,809
U.S. Department of Defense				
National Guard Military Operations and Maintenance (O&M) Projects	12.401		-	3,994,234
U.S. Department of the Interior				
<i>Fish and Wildlife Cluster</i>				
Sport Fish Restoration Program	15.605			867,895
Wildlife Restoration and Basic Hunter Education	15.611			1,332,235
<i>Total Fish and Wildlife Cluster</i>				2,200,130
Cooperative Endangered Species Conservation Fund	15.615			36,530
Sportfishing and Boating Safety Act	15.622			1,775
Coastal	15.630			342
State Wildlife Grants	15.634			95,443
Economic, Social, and Political Development of the Territories	15.875	160342882	109,053	6,451,211
COVID-19 - Economic, Social, and Political Development of the Territories	15.875			3,750,972
				10,202,183

Government of the United States Virgin Islands

Schedule of Expenditures of Federal Awards

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<i>Federal Grantor / Pass-Through Grantor / Program or Cluster Title</i>	<i>Federal Assistance Listing Number</i>	<i>Pass-Through Entity Identifying Number</i>	<i>Passed Through to Subrecipients</i>	<i>Total Federal Expenditures</i>
U.S. Department of Interior (continued)				
Historic Preservation Fund Grants-In-Aid	15.904	160342882	82,112	437,764
Emergency Supplemental Historic Preservation Fund	15.957	160342882	248,165	666,231
Total U.S. Department of the Interior			439,330	13,640,398
U.S. Department of Justice				
Coronavirus Emergency Supplemental Funding	16.034			39,555
Juvenile Justice and Delinquency Prevention	16.540			1,125
Crime Victim Assistance	16.575	829924047	549,183	597,923
Violence Against Women Formula Grants	16.588	829924047	270,506	325,507
Residential Substance Abuse Treatment for State Prisoners	16.593			255
State Criminal Alien Assistance Program	16.606			61,542
Public Safety Partnership and Community Policing Grants	16.710			292,536
Edward Byrne Memorial Justice Assistance Grant Program	16.738	829924047	136,587	272,484
Paul Coverdell Forensic Sciences Improvement Grant Program	16.742			55,427
Support for Adam Walsh Act Implementation Grant Program	16.750			241,663
Body Worn Camera Policy and Implementation	16.835			300,000
Total U.S. Department of Justice			956,276	2,188,017
U.S. Department of Labor				
Labor Force Statistics	17.002			392,348
Compensation and Working Conditions	17.005			41,566
<i>Employment Service Cluster</i>				
Employment Service/Wagner-Peyser Funded Activities	17.207			983,447
Jobs for Veterans State Grant	17.801			48,590
<i>Total Employment Service Cluster</i>				1,032,037
Unemployment Insurance	17.225			16,988,176
COVID-19 - Unemployment Insurance	17.225			21,717,489
				38,705,665
Senior Community Service Employment Program	17.235			831,341
<i>WIOA Cluster</i>				
WIOA Adult Program	17.258			742,011
WIOA Youth Activities	17.259			978,168
WIOA Dislocated Worker Formula Grants	17.278			585,239
<i>Total WIOA Cluster</i>				2,305,418

Government of the United States Virgin Islands

Schedule of Expenditures of Federal Awards

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<i>Federal Grantor/Pass-Through Grantor/Program or Cluster Title</i>	<i>Federal Assistance Listing Number</i>	<i>Pass-Through Entity Identifying Number</i>	<i>Passed Through to Subrecipients</i>	<i>Total Federal Expenditures</i>
U.S. Department of Labor (continued)				
Work Opportunity Tax Credit Program (WOTC)	17.271			36,663
Temporary Labor Certification for Foreign Workers	17.273			478
COVID-19 - WIOA National Dislocated Worker Grants/WIA National Emergency Grants	17.277			362,677
Apprenticeship USA Grants	17.285			125,000
Occupational Safety and Health State Program	17.503			156,928
Total U.S. Department of Labor			-	43,990,121
U.S. Department of Transportation				
<i>Highway Planning and Construction Cluster</i>				
Highway Planning and Construction	20.205			34,307,039
<i>FMCSA Cluster</i>				
Motor Carrier Safety Assistance Program	20.218			267,208
<i>Federal Transit Cluster</i>				
Federal Transit Formula Grants	20.507			2,715,093
COVID -19 - Federal Transit Formula Grants	20.507			1,557,851
<i>Total Federal Transit Cluster</i>				4,272,944
Public Transportation Emergency Relief Program	20.527			8,295
<i>Highway Safety Cluster</i>				
State and Community Highway Safety	20.600	147287705	41,606	1,579,291
Total U.S. Department of Transportation			41,606	40,434,777
U.S. Department of the Treasury				
COVID-19 - Coronavirus Relief Fund	21.019		4,500,000	5,459,183
COVID-19 - Emergency Rental Assistance Program	21.023		7,349,583	7,349,583
COVID-19 - Homeowner Assistance Fund Program	21.026		8,521,959	8,521,959
COVID-19 - Coronavirus State and Local Fiscal Recovery Funds	21.027		56,490,165	113,360,275
Total U.S. Department of Treasury			76,861,707	134,691,000
National Endowment for the Humanities				
Promotion of the Arts Partnership Agreements	45.025	135962475	524,935	524,935
Promotion of the Humanities Division of Preservation and Access	45.149			28,436
Grants to States	45.310			182,306
Total National Endowment for the Humanities			524,935	735,677

Government of the United States Virgin Islands

Schedule of Expenditures of Federal Awards

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<i>Federal Grantor / Pass-Through Grantor / Program or Cluster Title</i>	<i>Federal Assistance Listing Number</i>	<i>Pass-Through Entity Identifying Number</i>	<i>Passed Through to Subrecipients</i>	<i>Total Federal Expenditures</i>
U.S. Environmental Protection Agency				
Surveys, Studies, Research, Investigations, Demonstrations, and Special Purpose Activities Relating to the Clean Air Act	66.034			3,561
Construction Grants for Wastewater Treatment Works	66.418	138919282	812,150	2,111,963
Water Infrastructure Improvements for the Nation Small and Underserved Communities Emerging Contaminants Grant Program	66.442			104,589
Water Quality Management Planning	66.454			25,701
Nonpoint Source Implementation Grants	66.460			22,978
National Wetland Program Development Grants and Five-Star Restoration Training Grant	66.461			15
<u><i>Drinking Water State Revolving Fund Cluster</i></u>				
Capitalization Grants for Drinking Water State Revolving Funds	66.468	138919282	660,406	801,343
Beach Monitoring and Notification Program Implementation Grants	66.472			180,436
Performance Partnership Grants	66.605			966,014
Hazardous Waste Management State Program Support	66.801			230,288
Underground Storage Tank (UST) Prevention, Detection, and Compliance Program	66.804			56
Leaking Underground Storage Tank Trust Fund Corrective Action Program	66.805			3,371
State and Tribal Response Program Grants	66.817			5,063
Total U.S. Environmental Protection Agency			1,472,556	4,455,378
U.S. Department of Energy				
State Energy Program	81.041			307,920
Weatherization Assistance for Low-Income Persons	81.042			96,308
Total U.S. Department of Energy			-	404,228
U.S. Department of Education				
Adult Education - Basic Grants to States	84.002			823,374
COVID-19 - American Rescue Plan - Adult Education - Basic Grants to States	84.002A			903
				824,277
<u><i>Special Education Cluster (IDEA)</i></u>				
Special Education - Grants to States (IDEA, Part B)	84.027A			8,085,843
COVID-19 - American Rescue Plan - Individuals with Disabilities Education Act	84.027X			76,448
<i>Total Special Education Cluster (IDEA)</i>				8,162,291
Impact Aid	84.041			139,329
Impact Aid Section 7003 - Payments for Federally Connected Children	84.041B			77,824
				217,153

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Schedule of Expenditures of Federal Awards

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<i>Federal Grantor/Pass-Through Grantor/Program or Cluster Title</i>	<i>Federal Assistance Listing Number</i>	<i>Pass-Through Entity Identifying Number</i>	<i>Passed Through to Subrecipients</i>	<i>Total Federal Expenditures</i>
U.S. Department of Education (continued)				
Rehabilitation Services - Vocational Rehabilitation Grants to States	84.126			21,193
State Vocational Rehabilitation Services	84.126A			1,367,776
				1,388,969
Independent Living Services for Older Individuals Who are Blind	84.177B			17,698
Special Education - Grants for Infants and Families	84.181			(12,336)
Special Education - Grants for Infants and Families - Infant & Toddlers/Families (Part C)	84.181A			241,919
				229,583
Comprehensive Literacy State Development	84.371C			137,636
Consolidated Grant to the Insular Areas	84.403A		1,051,727	14,412,480
<u>COVID-19 - Education Stabilization Fund</u>				
COVID-19 - Education Stabilization Fund - State Educational Agency (Outlying Areas) (ESF-SEA)	84.425A			18,570,751
COVID-19 - Education Stabilization Fund - Governors (Outlying Areas) (ESF-Governor)	84.425H		208,796	1,098,109
COVID-19 - American Rescue Plan - State Educational Agency (Outlying Areas) (ARP-OA SEA)	84.425X			1,041,438
<i>Total COVID-19 - Education Stabilization Fund</i>				20,710,298
Hurricane Education Recovery	84.938			283,468
Total U.S. Department of Education			1,260,523	46,383,853
U.S. Department of Health and Human Services				
COVID-19 - Special Programs for the Aging-Title VII, Chapter 2, Long Term Care Ombudsman Services for Older Individuals	93.042			12,359

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<i>Federal Grantor/Pass-Through Grantor/Program or Cluster Title</i>	<i>Federal Assistance Listing Number</i>	<i>Pass-Through Entity Identifying Number</i>	<i>Passed Through to Subrecipients</i>	<i>Total Federal Expenditures</i>
U.S. Department of Health and Human Services (continued)				
<i>Aging Cluster</i>				
COVID-19 - Special Programs for the Aging-Title III, Part B-Grants for Supportive Services and Senior Centers, CARES Act for Supportive Services Under Title III-B of the Older Americans Act, and American Rescue Plan for Supportive Services Under Title III-B of the Older Americans Act	93.044			21,096
Nutrition Services and CARES Act for Nutrition Services under Title III-C of the Older Americans Act, CARES Act for Nutrition Services Under Title III-C of the Older Americans Act, and American Recue Plan for Nutrition Services Under Title III-C of the Old Americans Act	93.045			27,709
COVID-19 - Nutrition Services and CARES Act for Nutrition Services under Title III-C of the Older Americans Act, CARES Act for Nutrition Services Under Title III-C of the Older Americans Act, and American Recue Plan for Nutrition Services Under Title III-C of the Old Americans Act	93.045			474,537
<i>Total Aging Cluster</i>				523,342
COVID-19 - National Family Caregiver Support, Title III, Part E	93.052			110,369
Public Health Emergency Preparedness	93.069			335,999
Affordable Care Act (ACA) Personal Responsibility Education Program	93.092			52,608
Maternal and Child Health Federal Consolidated Programs	93.110			254,644
Project Grants and Cooperative Agreements for Tuberculosis Control Programs	93.116			97,080
Emergency Medical Services for Children	93.127			131,521
Cooperative Agreements to States/Territories for the Coordination and Development of Primary Care Offices	93.130			206,640
Injury Prevention and Control Research and State and Community Based Programs	93.136			69,081
Projects for Assistance in Transition from Homelessness (PATH)	93.150			50,000
Family Planning-Services	93.217			999,956
Substance Abuse and Mental Health Services Projects of Regional and National Significance	93.243			416,019
Early Hearing Detection and Intervention	93.251			217,059
Immunization Cooperative Agreements	93.268			1,035,703
COVID-19 - Immunization Cooperative Agreements	93.268			260,693
				1,296,396

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<i>Federal Grantor/Pass-Through Grantor/Program or Cluster Title</i>	<i>Federal Assistance Listing Number</i>	<i>Pass-Through Entity Identifying Number</i>	<i>Passed Through to Subrecipients</i>	<i>Total Federal Expenditures</i>
U.S. Department of Health and Human Services (continued)				
Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	93.323			1,211,033
COVID-19 - Epidemiology and Laboratory Capacity for Infectious Disease (ELC)	93.323			10,292,308
				11,503,341
Behavioral Risk Factor Surveillance System	93.336			125,733
COVID-19 - Behavioral Risk Factor Surveillance System	93.336			25,000
				150,733
Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis Response	93.354			155,393
<u>Head Start Cluster</u>				
Head Start Disaster Recovery from Hurricanes Harvey, Irma, and Maria	93.356			2,802,588
Head Start	93.600			8,985,821
COVID-19 - Headstart	93.600			358,893
<i>Total Head Start Cluster</i>				12,147,302
Prevention and Control of Chronic Disease and Associated Risk Factors in the U.S. Affiliated Pacific Islands, U.S. Virgin Islands, and P. R.	93.377			304,543
COVID-19 - Activities to Support State, Tribal, Local and Territorial (STLT) Health Department Response to Public Health or Healthcare Crises	93.391			696,863
<u>CCDF Cluster</u>				
Child Care Disaster Relief	93.489			70,049
Child Care and Development Block Grant	93.575			2,194,939
COVID-19 - Child Care and Development Block Grant	93.575			1,381,179
<i>Total CCDF Cluster</i>				3,646,167
Promoting Safe and Stable Families	93.556			10,797
Temporary Assistance for Needy Families (TANF)	93.558			1,112,728
COVID-19 - Temporary Assistance for Needy Families (TANF)	93.558			798,230
				1,910,958
Payments to Territories - Adults	93.560			1,207,457
Child Support Enforcement	93.563			5,529,867
COVID-19 - Community Services Block Grant	93.569			1,459,041
State Court Improvement Program	93.586			65,529
Grants to States for Access and Visitation Programs	93.597			75,177
Social Services Block Grant	93.667			5,725,807
Family Violence Prevention and Services/ Domestic Violence Shelter and Supportive Services	93.671			43,594
John H. Chafee Foster Care Program for Successful Transition to Adulthood	93.674			8,652

Government of the United States Virgin Islands

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<i>Federal Grantor/Pass-Through Grantor/Program or Cluster Title</i>	<i>Federal Assistance Listing Number</i>	<i>Pass-Through Entity Identifying Number</i>	<i>Passed Through to Subrecipients</i>	<i>Total Federal Expenditures</i>
U.S. Department of Health and Human Services (continued)				
Elder Abuse Prevention Interventions Program	93.747			7,760
Children's Health Insurance Program	93.767			1,946,603
Medicare Prescription Drug Coverage	93.770			1,347,619
<i>Medicaid Cluster</i>				
State Medicaid Fraud Control Units	93.775			490,024
Medical Assistance Program (Medicaid; Title XIX)	93.778			127,649,324
<i>Total Medicaid Cluster</i>				128,139,348
Opioid STR	93.788			62,692
Maternal, Infant, and Early Childhood Home Visiting Grant Program	93.870			992,399
COVID-19 - Maternal, Infant, and Early Childhood Home Visiting Grant Program	93.870			15,777
				1,008,176
National Bioterrorism Hospital Preparedness Program	93.889			198,501
Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations	93.898			156,639
HIV Care Formula Grants (Ryan White HIV/AIDS Program Part B)	93.917			1,035,951
COVID-19 - HIV Care Formula Grants (Ryan White HIV/AIDS Program Part B)	93.917			650
				1,036,601
HIV Prevention Activities Health Department Based	93.940			846,611
Block Grants for Community Mental Health Services	93.958			213,629
COVID-19 - Block Grants for Community Mental Health Services	93.958			108,282
				321,911
Block Grants for Prevention and Treatment of Substance Abuse	93.959			284,711
COVID-19 - Block Grants for Prevention and Treatment of Substance Abuse	93.959			197,649
				482,360
The Zika Health Care Services Program	93.966			38,090
Sexually Transmitted Diseases (STD) Prevention and Control Grants	93.977			229,356
COVID-19 - Sexually Transmitted Diseases (STD) Prevention and Control Grants	93.977			17,160
				246,516
Mental Health Disaster Assistance and Emergency Mental Health	93.982			1,210,947
Preventive Health and Health Services Block Grant	93.991			224,435
Maternal and Child Health Services Block Grant to the States	93.994			1,521,540
				1,521,540
Total U.S. Department of Health and Human Services			-	188,210,643

Government of the United States Virgin Islands

Schedule of Expenditures of Federal Awards

Year ended September 30, 2022

<i>Federal Grantor/Pass-Through Grantor/Program or Cluster Title</i>	<i>Federal Assistance Listing Number</i>	<i>Pass-Through Entity Identifying Number</i>	<i>Passed Through to Subrecipients</i>	<i>Total Federal Expenditures</i>
Corporation for National and Community Service				
AmeriCorps Seniors Retired and Senior Volunteer Program (RSVP)	94.002			7,902
<i>Foster Grandparent/Senior Companion Cluster</i>				
Foster Grandparent Program	94.011			101,638
Total Corporation for National and Community Service			-	109,540
U.S. Department of Homeland Security				
Non-Profit Security Program	97.008	825544042	72,797	72,797
Boating Safety Financial Assistance	97.012			826,459
Disaster Grants - Public Assistance (Presidentially Declared Disasters)	97.036	825544042	205,717,573	424,337,491
Hazard Mitigation Grant Program (HMGP)	97.039	825544042	921,235	6,209,258
Emergency Management Performance Grants	97.042			1,021,110
COVID-19 - Emergency Management Performance Grants	97.042			118,282
				1,139,392
COVID-19 - Presidential Declared Disaster Assistance to Individuals and Households - Other Needs	97.050			5,000
Homeland Security Grant Program (HSGP)	97.067	825544042	45,218	1,956,798
Earthquake State Assistance	97.082			49,133
Staffing for Adequate Fire and Emergency Response (SAFER)	97.083			675,725
Total U.S. Department of Homeland Security			206,756,823	435,272,053
Total Expenditures of Federal Awards			\$ 289,542,735	\$ 1,031,963,036

See accompanying notes to the Schedule of Expenditures of Federal Awards.

Government of the United States Virgin Islands

Notes to Schedule of Expenditures of Federal Awards

1. Reporting Entity

The Schedule of Expenditures of Federal Awards (the Schedule) includes the activity of all Federal award programs administered by the Government of the United States Virgin Islands (the Government), the Virgin Islands Public Finance Authority (a blended component unit), The West Indian Company Limited (WICO), and viNGN, INC. d/b/a Virgin Islands Next Generation Network (viNGN) as of and for the year ended September 30, 2022, except that certain organizational units (as defined previously) are excluded as they contract for separate audits 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).

Further, because the Schedule presents only a selected portion of the operations of the Government, it is not intended to and does not present the financial position and changes in net position of the Government.

2. Basis of Presentation

Federal award programs include direct expenditures, monies passed through to nonstate agencies (i.e., payments to subrecipients) and nonmonetary assistance. The Schedule presents total Federal awards expended for each individual Federal program in accordance with the Uniform Guidance. Federal award program titles are reported as presented in the Assistance Listing Number (ALN). Federal award program titles not presented in the Assistance Listing are identified by the Federal awarding agency's two-digit prefix (or 99) followed by (contract number or UNKNOWN).

3. Basis of Accounting

The expenditures for each of the Federal award programs are presented in the Schedule on a modified accrual basis, except for nonmonetary programs, which are presented based on the fair value of the food stamps (ALN 10.551 in the amount of \$97,567,787) and the food cost (ALN 10.557 in the amount of \$2,806,035) distributed during the year. The modified accrual basis of accounting incorporates an estimation approach to determine the amount of expenditures incurred if not yet billed by a vendor. The Government's accounting system provides the primary information from which the Schedule is prepared.

4. Matching Costs

Matching costs, such as the non-federal share of certain program costs, are not included in the accompanying Schedule, except Unemployment Insurance (ALN 17.225), as indicated in Note 8.

5. Indirect Cost Rate

The Government has not elected to use the 10 percent de minimis indirect cost rate allowed under the Uniform Guidance.

Government of the United States Virgin Islands

Notes to Schedule of Expenditures of Federal Awards

6. Relationship to Federal Financial Reports

The regulations and guidelines governing the preparation of Federal financial reports vary by Federal agency and among programs administered by the same agency. Accordingly, the amounts reported in the Federal financial reports do not necessarily agree with the amounts reported in the accompanying Schedule, which is prepared on the basis explained in Note 3.

7. Rebates from the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

During fiscal year 2022, the Government received cash rebates from infant formula manufacturers in the amount of approximately \$693,707 on sales of formula to participants in the WIC program (ALN 10.557), which are netted against total expenditures included in the Schedule. Rebate contracts with infant formula manufacturers are authorized by 7 CFR 246.16(m) as a cost containment measure. Rebates represent a reduction of expenditures previously incurred for WIC food benefit costs.

8. Unemployment Insurance

The U.S. Department of Labor in consultation with the U.S. Office of Management and Budget officials has determined that for the purpose of audits and reporting under the Uniform Guidance, State or Territory Unemployment Insurance (UI) funds as well as Federal funds should be considered Federal awards for determining Type A programs. A State or Territory receives Federal funds for administrative purposes. State or Territory unemployment taxes must be deposited to a state (territory) account in the Federal Unemployment Trust Fund, used only to pay benefits under the Federally approved state law. State or Territory UI funds as well as Federal funds are included on the Schedule. The following table provides a breakdown of the Territory and Federal portions of the total amount expended under ALN 17.225.

Territory UI Benefits (Trust Fund)	\$ 36,406,302
Federal UI Benefits (Administration)	2,299,363
<hr/>	
Total	\$ 38,705,665

9. Outstanding Loan

The Government received proceeds from the Community Disaster Loans program (ALN No. 97.030) as administered by the Federal Emergency Management Agency (FEMA). There is a provision in the FEMA regulations that permits FEMA to cancel all or a portion of this loan. The cumulative balance of the Community Disaster Loans program was \$206,295,675, of which \$61,295,675 was passed-through to the Government's component units. On September 30, 2021, repayments of the Community Disaster Loans issued by FEMA were cancelled when Congress passed the Extending Government Funding and Delivering Emergency Assistance Act (P.L. 117-43) and on October 8, 2021, FEMA notified the Government of such cancellation and closure of the loans program.

Government of the United States Virgin Islands

Notes to Schedule of Expenditures of Federal Awards

10. Research and Development Programs

The Government may receive and expend Federal funding for various research and development programs. The aggregate amount of such expenditures for the year ended September 30, 2022, did not equal an amount that would constitute a major program under the guidelines of the Uniform Guidance.

11. Contingencies

The Government is subject to audit examination by funding sources to determine compliance with grant conditions. In the event that expenditures would be disallowed, repayment could be required. Management believes that the impact of any disallowed grant expenditures would not have a material adverse effect on the Government's financial position, changes in net position, or liquidity. Also see Note 12.

12. Subsequent Events

Hurricane Recovery

The Government is making significant progress towards restoring its facilities which were damaged by Hurricanes Irma and Maria in September 2017. The Government continues the process of tabulating the associated costs and expenses with respect to remediation, clean-up, mitigation, and the restoration of services.

To close potential shortfalls and to serve returning citizens, the Government continues to work closely with federal agencies, such as FEMA, HUD, SBA, etc. to maximize its recovery from all available sources, subject to any sub-limits and retentions. Through August 2025, federal assistance awarded to the Territory included \$21.5 billion in FEMA Public Assistance grants, \$77.0 million in Federal Highway grants, \$199.5 million in FEMA Hazard Mitigation grants, \$1.1 billion in Community Development Block Grants and \$215.0 million in other grants for a total of \$23.0 billion dollars.

The Government has received notices from FEMA of potential debt as a result of audits related to the Public Assistance Grant Program awards for fiscal years 2018 and 2019. In response to the notices, both in February 2021 and January 2023, the Government exercised its option to appeal and provided additional clarification and documentation. As of March 2023, FEMA has questioned costs of \$42.1 million.

The questioned costs are in the process of being reviewed by FEMA and until the appeal review is completed, questioned costs identified do not represent final monies owed to FEMA. Management believes that any such claims or actions by FEMA will be resolved and will not have a material impact to the awards or the financial position of the Government.

In February 2024, President Biden agreed to raise the cost share of all FEMA assistance grants for hurricane recovery in the Territory from 90.0 to 95.0 percent, including retroactively. In addition, President Biden agreed to raise the federal cost share to 98.0 percent in the case of larger critical infrastructure rebuilding projects approved before September 30, 2024, and completed before 2026.

Government of the United States Virgin Islands

Notes to Schedule of Expenditures of Federal Awards

Global Pandemic and Economic Relief Legislation

Through September 2025, federal grants and assistance received by the PG related to COVID-19 amounted to \$729.4 million. Federal grants and assistance received by component units of the Government amounted to \$84.8 million.

Improper Procurement Activities and Irregularities

In 2024, an inquiry was conducted by the United States Department of Justice into potential criminal activities associated with three members of the management team of the Government and formal indictments followed. Management has evaluated the matter based on the scope in the indictments and concluded that the September 30, 2022 financial statements are fairly presented. This evaluation of the matter is subject to adjustment as facts and circumstances change or develop.

Schedule of Findings and Questioned Costs

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Section I - Summary of Auditor's Results

Financial Statements

Type of auditor's report issued on whether the financial statements audited were prepared in accordance with generally accepted accounting principles:

Governmental Activities	Disclaimer
Business-Type Activities	Disclaimer
General Fund	Disclaimer
Debt Service Fund	Unmodified
Capital Projects Fund	Unmodified
Matching Fund Special Purpose Securitization Corporation	
Debt Service Fund and Opinion	Unmodified
Federal Grants Fund	Disclaimer
The West Indian Company Limited-Enterprise Fund	Unmodified
Unemployment Insurance-Enterprise Fund	Disclaimer
viNGN, INC.-Enterprise Fund	Unmodified
Aggregate Remaining Fund Information	Disclaimer
Aggregate Discretely-Presented Component Units	Disclaimer

Internal control over financial reporting:

- Material weakness(es) identified? X Yes No
- Significant deficiency(ies) identified? X Yes None reported
- Noncompliance material to financial statements noted? X Yes No

Federal Awards

Internal control over major federal programs:

- Material weakness(es) identified? X Yes No
- Significant deficiency(ies) identified? X Yes None reported

Type of auditor's report issued on compliance for major federal programs:

<u>Assistance Listing</u> <u>Number(s)</u>	<u>Major Federal Program or Cluster</u>	<u>Opinion</u>
10.551, 10.561	Supplemental Nutrition Assistance Program Cluster (SNAP)	Unmodified
10.555, 10.559, 10.582	Child Nutrition Cluster	Unmodified
10.557	Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	Unmodified

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

<u>Assistance Listing Number(s)</u>	<u>Major Federal Program or Cluster</u>	<u>Opinion</u>
12.401	National Guard Military Operations and Maintenance (O&M) Projects	Adverse
15.875	Economic, Social, and Political Development of the Territories	Qualified
17.225	Unemployment Insurance	Adverse
20.205	Highway Planning and Construction Cluster	Unmodified
20.507	Federal Transit Cluster	Unmodified
21.019	COVID-19 - Coronavirus Relief Fund	Qualified
21.023	COVID-19 - Emergency Rental Assistance Program	Unmodified
21.026	COVID-19 - Homeowner Assistance Fund	Unmodified
21.027	COVID-19 - Coronavirus State and Local Fiscal Recovery Funds	Qualified
84.027A, 84.027X	Special Education Cluster (IDEA)	Unmodified
84.403A	Consolidated Grant to the Outlying Areas	Unmodified
84.425A, 84.425H, 84.425X	COVID-19 - Education Stabilization Fund	Qualified
93.323	Epidemiology and Laboratory Capacity for Infectious Diseases	Qualified
93.356, 93.600	Head Start Cluster	Qualified
93.489, 93.575	CCDF Cluster	Adverse
93.563	Child Support Enforcement	Unmodified
93.667	Social Services Block Grant	Unmodified
93.775, 93.778	Medicaid Cluster	Adverse
97.036	Disaster Grants - Public Assistance (Presidentially Declared Disasters)	Qualified
97.039	Hazard Mitigation Grant Program	Qualified

Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)? X Yes No

Identification of major federal programs:

<u>Assistance Listing Number(s)</u>	<u>Major Federal Program or Cluster</u>
10.551, 10.561 10.555, 10.559, 10.582 10.557	Supplemental Nutrition Assistance Program Cluster (SNAP) Child Nutrition Cluster Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
12.401	National Guard Military Operations and Maintenance (O&M) Projects
15.875	Economic, Social, and Political Development of the Territories
17.225	Unemployment Insurance
20.205	Highway Planning and Construction Cluster
20.507	Federal Transit Cluster

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Assistance Listing

<u>Number(s)</u>	<u>Major Federal Program or Cluster</u>
21.019	COVID-19 - Coronavirus Relief Fund
21.023	COVID-19 - Emergency Rental Assistance Program
21.026	COVID-19 - Homeowner Assistance Fund
21.027	COVID-19 - Coronavirus State and Local Fiscal Recovery Funds
84.027A, 84.027X	Special Education Cluster (IDEA)
84.403A	Consolidated Grant to the Outlying Areas
84.425A, 84.425H, 84.425X	COVID-19 - Education Stabilization Fund
93.323	Epidemiology and Laboratory Capacity for Infectious Diseases
93.356, 93.600	Head Start Cluster
93.489, 93.575	CCDF Cluster
93.563	Child Support Enforcement
93.667	Social Services Block Grant
93.775, 93.778	Medicaid Cluster
97.036	Disaster Grants - Public Assistance (Presidentially Declared Disasters)
97.039	Hazard Mitigation Grant Program

Dollar threshold used to distinguish.

between Type A and Type B programs:

\$3,095,889

Auditee qualified as low-risk auditee?

Yes No

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Section II - Financial Statement Findings

Finding 2022-001: Year-End Close Process and Financial Deficit

A. Timeliness and Methodology of Close Process

Criteria - Accounting tasks, such as periodic reconciliations, play a key role in proving the accuracy of accounting data and information included in various interim financial statements and/or reports.

Condition - We observed a significant delay in both the year-end closing process and the preparation of year-end financial statements. In numerous instances, account reconciliations were not finalized until the audit process was underway, resulting in a substantial lag relative to the Government's fiscal year-end. As a consequence, detailed schedules supporting general ledger accounts did not consistently reconcile with the respective general ledger balances.

During the audit process, significant post-closing adjustments were identified and provided. It was further noted that these post-closing adjustments were not recorded in the accounting system, but instead were maintained in a manual Excel working trial balance.

During financial reporting walkthrough, we noted the absence of evidence indicating that the Major Fund Calculation worksheet had been formally reviewed and approved. Similarly, during the revenue walkthrough, there was no evidence that year-end closing adjustments had been formally reviewed and approved.

Furthermore, our review of the Government's draft financial statements revealed inconsistencies and/or omissions in the incorporation of disclosures within the footnotes, as well as inconsistencies in the classification and reporting of account balances for component units. Many of the Government components do not have audited financial statements as of September 30, 2022, to include Virgin Islands Port Authority, Virgin Islands Water and Power Authority, Virgin Islands Government Hospital and Health Facilities Corporation (Roy L. Schneider Hospital and Governor Juan F. Luis Hospital and Medical Center), University of the Virgin Islands, Megan's Bay Authority, and University of the Virgin Islands Research and Technology Park Corporation.

Cause - The adjustments, omissions and errors found appear to be the result of internal controls not being performed at the appropriate level of precision to prevent, or detect and correct, financial statements misstatements and limited resources of financial personnel.

Effect or Potential Effect - Delays in the year-end closing process and the preparation of financial statements increase the risk that errors may remain undetected, thereby compromising the accuracy of financial reporting. When account reconciliations are not completed prior to the audit, stakeholders may be presented with incomplete or inaccurate information, which can adversely affect decision-making. Maintaining post-closing adjustments in a manual Excel file, rather than within the accounting system, elevates the risk of errors and diminishes transparency. The absence of formal review and approval of key financial reporting documents further increases the likelihood that errors will go unnoticed. Inconsistencies and omissions in footnote disclosures and the reporting of component unit account balances may result in misleading financial statements. Collectively, these issues may hinder the Government's ability to comply with applicable accounting standards and may undermine stakeholder confidence in the integrity of its financial statements.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that management implement and adhere to a comprehensive year-end closing calendar to ensure the timely completion of all closing activities and the preparation of financial statements. All account reconciliations, accruals, and schedules should be prepared and reviewed in a timely manner.

The review process should include tests of mechanical accuracy and tracing of items on the reconciliations to relevant source documents, including confirmation with departments independent of Accounting. The composition of any unreconciled differences should be identified and followed up on, and any necessary journal entries should be recorded as a result. Reconciliation mechanisms should be enhanced to prevent the recurrence of such errors.

Post-closing adjustments should be promptly recorded in the accounting system, to enhance accuracy, transparency, and auditability. Management should establish formal review and approval procedures for all key financial reporting documents, including the Major Fund Calculation worksheet and year-end closing adjustments, with appropriate documentation retained to evidence such reviews.

Furthermore, strict adherence to the year-end closing schedule for the Government and all component units should be required. This will enable the Government and its component units to comply with financial reporting covenants and will make the year-end work and audit preparation process significantly less time-consuming and arduous, without compromising the quality of the accounting records or diminishing existing internal controls. The Government should implement internal controls, policies, and procedures to ensure all components report timely audited information for inclusion in the Government's financial statements in accordance with generally accepted accounting principles.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Finance (DOF) is establishing aggressive timelines and standardizing reporting to ensure a timely year-end process and successful audit. Accountability measures will be implemented to address ineffective employees and recruit accounting talent. DOF aims to achieve uniformity across agencies by assessing needs and resources and providing a dedicated position to monitor success. Additionally, a formal review and approval process for the Major Funds Calculation will be established. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

B. Deficits in Unrestricted Net Position

Criteria - A sound financial position is essential for the effective day-to-day operations of the Government. In accordance with generally accepted accounting principles (GAAP) and Governmental Accounting Standards Board (GASB) requirements, the unrestricted net position should be sufficient to meet the Government's operational needs and provide a buffer for unforeseen expenditures.

Condition - Our review of the Government's financial position indicates that it is facing significant financial challenges. The deficit in unrestricted net position is primarily attributable to ongoing operating losses, a substantial level of outstanding debt, and recent bond downgrades, each of which has materially and adversely affected the Government's financial stability.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Cause - The significant recovery costs following the 2017 hurricanes have further strained the Government's resources. Additionally, unfunded pension and other postemployment benefit obligations have placed considerable pressure on the Government's finances. The global coronavirus pandemic (COVID-19) has further exacerbated these challenges by disrupting government operations and revenue streams, resulting in additional fiscal constraints.

Effect or Potential Effect - Over the past several years, the unrestricted net position has experienced substantial operational losses. This financial condition has necessitated the inclusion of an emphasis of matter paragraph in the audit opinion. Improvement is critical if the Government is to meet its obligations related to debt, pension, and other postemployment benefits, and to maintain access to future bond markets. Continued negative financial results could significantly impact the Government's overall financial position and cash flows.

Recommendation - Management has undertaken efforts to stabilize and strengthen the Government's financial position through the implementation of a comprehensive, multi-faceted plan. This plan includes legislative actions to enhance revenue, cost-reduction initiatives, and proposed increases in employee contributions to pension plans. The Government has also received substantial federal assistance in response to the 2017 hurricanes and the COVID-19 pandemic.

We further recommend that management develop future plans and budgets aimed at generating operating income, avoiding ongoing deficits, and rebuilding equity.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government is continuing with its recovery efforts of working with federal partners, attracting new industries, improving financial controls, monitoring cash flows, and rebuilding equity. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

C. Journal Entries

Criteria - Implementing role-based access controls for recording of journal entries play a crucial role in ensuring the accuracy of accounting data and information included in various interim financial statements and/or reports.

Condition - We noted that several individuals possess access rights to create, approve, and post journal entries. Additionally, there were five (5) instances where journal entries are prepared and approved by same person and noted one (1) instance where adequate supporting documentation was not available for review.

Cause - The lack of segregation of duties and insufficient oversight in the journal entry process may have resulted from inadequate access control policies and a lack of formalized procedures for review and approval.

Effect or Potential Effect - Errors or fraudulent entries may be recorded in the financial records.

Recommendation - We recommend that management implement enhanced access controls to ensure segregation of duties in the journal entry process. Additionally, a formal review and approval procedure should be established, requiring documented evidence of oversight by the Department of Finance to ensure the integrity and accuracy of financial records.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Finance has recognized the need for more personnel to approve journals and has implemented training to increase the number of staff available to assist, especially during absences. Additionally, some journals are systematically generated, leading to the same individual acting as both creator and approver, particularly for year-end closing journals. To address this, the Department of Finance will ensure that proper documentation is maintained within the system. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding 2022-002: Revenue and Receivables

A. Reconciliation of Subsidiary Registers

Criteria - The Bureau of Internal Revenue (the Bureau) administers the U.S. Virgin Islands' tax laws, managing income, gross receipts, excise, highway users', hotel room, entertainment, and fuel taxes. The Division of Real Property Tax assesses all taxable properties, prepares and mails tax bills, and collects property taxes. The Government maintains subsidiary registers from its tax systems. A systematic process should be established to regularly reconcile these registers with tax receivable general ledger balances, ensuring consistency, accuracy, and completeness in financial records, in line with best practices.

Condition - We noted the following:

- The Government does not reconcile its subsidiary registers with its tax receivable general ledger account balances.
- During our review of the gross receipts tax receivable schedule prepared under the modified accrual basis, we observed that the schedule incorrectly utilized the collection amount from September 2022 instead of October 2022. Furthermore, for the schedules related to income tax, gross receipts, and hotel receivables, we identified that the underlying data supporting these schedules was as of April 2023, rather than September 30, 2022.

Cause - The Government does not appear to adhere to established written policies and procedures regarding the proper reconciliation and reporting of revenue and receivables.

Effect or Potential Effect - This could lead to improper recording of revenue and receivables, ultimately leading to a potential misstatement in financial statements.

Recommendation - To prevent the need for major adjustments to the impacted tax receivable and revenue accounts at the end of each year, we recommend that the general ledger accounts be reconciled to the detailed records on a quarterly basis. A strong control system over receivables, which includes an accurate accounting system that maintains agreement between the receivables ledger and the general ledger, will prevent audit adjustments at year-end.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. To improve interim financial reporting, the Bureau of Internal Revenue, Office of the Lieutenant Governor, and the Department of Finance have initiated quarterly reconciliation meetings. These meetings aim to reduce end-of-year adjustments, reconcile NSF checks promptly, and implement internal safeguards for more efficient reconciliation. Additionally, the Government will adopt a policy of reconciling tax receivables on a quarterly basis. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

B. Tax Return Processing Method

Criteria - The Government uses a manual process to batch tax returns by type and tax year before entering them into the VITAX system. Best practices and internal control standards require that all data entered into financial systems be thoroughly reviewed and verified for accuracy and completeness. Manual data entry should be regularly checked and validated, to reduce errors and protect the integrity of financial information.

Condition - The tax returns' manual data entry is being reviewed on a random sample basis and the Bureau is relying on the system's automated edit check to capture any errors. While the system's automated edit check identifies many errors, it does not guarantee the complete accuracy of the entered information. Relying primarily on automated edit checks and random sample reviews does not fully ensure the accuracy and reliability of the information entered.

Cause - The reliance on random sampling and automated edit checks for manual data entry review may result from limited resources and a lack of comprehensive review procedures. This approach may lead to potential inaccuracies, as the system's checks do not ensure complete data accuracy.

Effect or Potential Effect - This poses a continued risk of data omissions, typographical errors, entry of information to incorrect fields, as well, as fraudulent data entry.

Recommendation - We recommend the Bureau consider an evaluation of its current review procedures around the tax return processing method in an effort to minimize associated risks.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Bureau has launched its online gross receipts filing system and is in the final testing stage of implementing the online income tax filing system. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

C. Real Property Tax

Criteria - Timely preparation of comprehensive and accurate real property receivable aging schedule is key to maintaining adequate control over the Real Property Tax receivables.

Condition - We noted the following:

- Tax billings were issued to non-taxable properties owned by the Government and its component units.
- During our testing of real property tax receivables, we sampled and selected five (5) transactions and were unable to recalculate the interest for three (3) of the samples. The Government was unable to determine the cause of the variances.

Cause - The issuance of tax billings to non-taxable properties and the incorrect calculation of penalty interest may be due to inadequate system controls and oversight. These issues could result from outdated property records, insufficient training, or a lack of detailed review processes, leading to errors in billing and interest calculations.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Effect or Potential Effect - The issuance of tax billings to non-taxable properties and the incorrect calculation of penalty interest may lead to financial inaccuracies and potential disputes. This could result in overstatement of receivables, misallocation of resources, and diminished trust in the Government's financial management practices.

Recommendation - Management should perform a review and identification of the Government's and component units' properties in the tax roll listing to ensure proper tax credits are applied. Management should also implement enhanced controls to ensure tax billings are accurately issued only to taxable properties. Additionally, the calculation process for penalty interest should be reviewed and corrected to reflect the accurate time period. Regular audits and staff training should be conducted to prevent future discrepancies.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. LGO will continue collaborating with appropriate agencies to review and remove exempt entities from its tax rolls. It notes that government agencies are generally not exempt from paying sewer fees, which are collected via the tax bill for the Virgin Islands Waste Management Authority, so these entities will receive tax bills for sewer fees only. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

D. Other Revenues

Criteria - Internal control policies and procedures should clearly outline the methods for storing supporting documentation for all transactions within the Enterprise Resource Planning System (Munis).

Condition - The Government was unable to provide readily available supporting documentation for eleven (11) out of thirty-four (34) sampled transactions for charges for services, and twelve (12) out of thirty-six (36) sampled transactions for interest and other revenues.

Cause - This condition appears to be the result of inadequate internal control procedures regarding the retention and organization of supporting documentation.

Effect or Potential Effect - The inability to provide readily available supporting documentation for sampled transactions increases the risk of errors or irregularities going undetected, which may result in inaccurate financial reporting. This deficiency may also hinder the Government's ability to substantiate the validity and completeness of recorded revenues, potentially leading to audit adjustments or findings.

Recommendation - We recommend that the Government establish and enforce standardized procedures for the retention and organization of supporting documentation for all transactions. All relevant documentation should be stored in a centralized and easily accessible location, preferably within the Enterprise Resource Planning System (Munis). Regular reviews should be conducted to ensure compliance with these procedures and to facilitate timely retrieval of supporting documentation during audits or other reviews.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. To ensure adequate supporting documentation for sampled items, the Government will enforce procedures for attaching documents and conduct spot checks to ensure employees adhere to the process. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding 2022-003: Grants Management

A. Control Systems Over the Schedule of Expenditures of Federal Awards

Criteria - The Government receives grant and contract funds from various funding agencies, necessitating a robust accounting system to record specific grant and contract activities. The flow of accounting transactions into the ERP system is crucial for designing and maintaining strong controls over the Schedule of Expenditures of Federal Awards (SEFA). It is essential that SEFA expenditures between the Government's ERP system and individual agency or departmental records, where the respective Federal programs are managed and administered, are reconciled consistently. Additionally, compliance with laws and regulations associated with any accepted grant or contract must be ensured.

Condition - We noted the following:

- Expenses had been charged to grants without sufficient grant award funding availability.
- Significant transactions paid to or transferred to various departments of the Government were erroneously reported as subrecipient transactions.
- Approximately \$13.87 million in expenditures had erroneously been recorded in SEFA, pertaining to fiscal year 2023, requiring an adjustment in Assistance Listing Numbers (ALN) 21.027, *Coronavirus State and Local Fiscal Recovery Funds*.
- Approximately \$0.8 million in expenditures had erroneously been recorded as expenditures in ALN 84.027, *Special Education Grants to States*, requiring adjustment.
- Approximately \$4.7 million in expenditures had erroneously been recorded as expenditures in ALN 84.403, *Consolidated Grant to the Outlying Areas*, requiring adjustment.
- Approximately \$1.6 million in expenditures had erroneously been recorded as expenditures in ALN 84.425, *Education Stabilization Fund (ESF)*, requiring adjustment.
- For ALN 93.563, *Child Support Enforcement*, the drawdown details from the payment management system do not align with the cash receipts details for the program. This discrepancy is due to duplicate receipts being recorded in the cash receipts detail, which were not corrected during the fiscal year.

Cause - It appears that internal controls over the SEFA were not properly designed and implemented.

Effect or Potential Effect - Expenditures are being charged to incorrect projects, codes, and ALN, resulting in incorrect financial reporting. These issues also impact the roll-forward schedule for the general ledger account titled "Due from Federal Government." These deficiencies may result in inaccurate reporting of grant expenditures, improper allocation of federal funds, and potential noncompliance with grant requirements and federal regulations. Such errors could lead to audit findings, questioned costs, or disallowed expenditures, and may jeopardize future funding opportunities.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - The Government should implement regular reconciliations of the SEFA to underlying accounting records and grant documentation to prevent misclassification and erroneous reporting of expenditures. Any discrepancies identified should be promptly investigated and corrected. Additionally, communication and reconciliation mechanisms should continue to be enhanced between the centralized government agency responsible for collecting SEFA information and each individual agency managing federal grant programs, in order to prevent the recurrence of such errors and misclassifications.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The review of ALN, expenditures, and cash receipts postings to grants will be conducted during quarterly system closings. Additionally, continuous reconciliations of the SEFA with departments and agencies will be implemented. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

B. Federal Grants and Contributions

Criteria - The Government receives grant and contract funds from various funding agencies. These situations necessitate a strong accounting system to record specific grant and contract activities. Consideration must also be given to compliance with laws and regulations that are a component of any grant or contract accepted.

Condition - Based on our review of the schedule of grants and contracts, we noted that the Government is not monitoring its outstanding federal receivables on a periodic basis. We observed an improvement in record-keeping, as the Government has implemented a process for establishing discrete and separate receivable balance on a per grant/project basis. However, the following key components are lacking:

- There is no readily verifiable identification regarding the aging and collection of prior-year receivables, nor is there an assessment of the impact on the adequacy of the allowance for uncollectible accounts. Specifically, there is no documentation matching each cash receipt to the related expenses and indicating the period in which the expense was incurred.
- The Government was unable to provide supporting documentation for any of the seventeen (17) sampled transactions to verify the existence and accuracy of the subsequent cash receipts recorded as federal receivable for the fiscal year.
- The Government was unable to provide readily available supporting documentation for eight (8) out of sixty-three (63) sampled transactions for federal grant revenues.

Cause - The Government does not appear to have a process in place to adequately monitor federal receivables and does not maintain proper accounting records for financial transactions.

Effect or Potential Effect - This leads to difficulty in establishing individual balances for both receivables and deferrals from grants and contracts may obscure items that have been inactive for many years, and can cause confusion regarding the true level of activity. Additional time and effort were required during the audit process to rectify and reconcile the balances and to locate or identify alternative methods. This also poses an increased risk of fraudulent transactions.

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Recommendation - We recommend that receivables be tracked by each individual Government agency by performing the following:

- Maintain a drawdown schedule that notes the expenses comprising each drawdown for each federal program, as well as the period in which the expenses were incurred.
- Attach a copy of each drawdown, including evidence of proper approvals, in the ERP system, along with the corresponding bank statement showing the receipt of funds from the federal government.
- Include a listing of expenses supporting the amount drawn down in the ERP system. This detail should include the invoice date, payroll period, and check date.

Produce and maintain detailed reports and records at specified time intervals for potential analysis by users such as management, independent auditors, or governmental bodies. Management should consider strict adherence to, or revision of, its records retention policy.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Finance monitors federal receivables and provides agencies with reports on outstanding drawdowns. Additionally, a private firm has been contracted to work directly with the agencies to reconcile the Government's federal receivables. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

C. Federal Grants Accounting

Criteria - The Government's Treasury Division is responsible for managing grant and contract cash receipts. A strong control system over grants management includes an accurate accounting system that performs timely reconciliations to ensure proper financial reporting.

Condition - Based on our review and testing of the schedule of grant revenues, we noted the following:

- Local reimbursements totaling approximately \$10.3 million into the Asset Recovery Fund were improperly reported as federal grant revenue.
- Approximately \$15.9 million of federal cash receipts had been received in advance for American Rescue Plan Act programs and were recorded as revenues. During the fiscal year, the Government did not incur allowable expenditures for the full amount received and did not properly reclassify the excess amounts to refundable advances.

Cause - The Government does not appear to have a process in place to adequately monitor federal revenues and federal cash receipts received in advance.

Effect or Potential Effect - Grant revenues could be overstated and liabilities understated due to a lack of timely reconciliations, leading to inaccuracies in the reported financial position.

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Recommendation - Management should ensure strict adherence to its reconciliation and review policies and procedures and establish a process for regular monitoring of federal cash receipts and expenditures.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government has implemented measures to ensure strict adherence to its reconciliation and review policies and procedures. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

D. Report Submission

Criteria - 2 CFR 200.512, *Report Submission*, establishes that the audit shall be completed and the data collection form and reporting package shall be submitted to the Federal Audit Clearinghouse (FAC) within the earlier of 30 days after receipt of the auditor's report or nine (9) months after the end of the audit period, unless a longer period is agreed to in advance by the cognizant or oversight agency for audit.

Condition - We noted that the Government did not comply with the required submission date of the data collection form and reporting package to the FAC for the fiscal year ended September 30, 2022.

Cause - This appears to be the result of a lack of design and implementation of internal controls to ensure compliance with the reporting requirement.

Effect or Potential Effect - Non-compliance can jeopardize the Government's eligibility for current and future Federal funding.

Recommendation - We recommend that the Government establish controls to ensure the reporting package is submitted to the FAC annually within the required timeframe.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government has implemented a plan, in coordination with external auditor, to achieve current audits by Fiscal Year 2025. Once audits are up to date, the Government will provide current submissions to the FAC. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-004: Capital Assets and Related Expenditures

A. Record Keeping

Criteria - Governmental Accounting Standards Board (GASB) Statement No. 34 requires capital asset transactions reporting in the government-wide financial statements. The Government's policies and procedures require the timely reporting of all transactions in the ERP system.

Condition -

- During our sampling procedures over capital asset additions, we noted that the Government was unable to provide readily available supporting documentation for the two (2) out of two (2) sampled capital asset additions during the year.
- We performed completeness testing procedures for capital asset and construction in progress (CIP) additions during the year; however, the Government was unable to provide supporting documentation for the expenditure databases being analyzed.
- The Government's process for maintaining capital asset records identified expenses that needed to be reclassified as capital outlays in the fund financial statements. However, supporting documentation for these adjustments was not available.

Cause - Supervisory reviews and other checks and balances may not be timely or effective in all instances due to manual processes. The Government does not maintain proper accounting records for financial transactions, which may be attributable to insufficient internal controls or oversight of the documentation process for capital asset additions.

Effect or Potential Effect - Without proper documentation, the reported values of capital assets may be inaccurate, which could result in potential misstatements in the financial statements.

Recommendation - We recommend the following:

- Conduct regular reconciliations and reviews of capital asset and construction in progress records to ensure that all expenditures are properly documented and accurately accounted for.
- Strengthen oversight and approval processes for reclassifying expenses, ensuring that all reclassifications are reviewed and approved by authorized personnel.
- Produce and maintain detailed reports and records at specified intervals to facilitate analysis by management, independent auditors, or governmental bodies. Management should strictly adhere to, or consider revising, its records retention policy to support these practices.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Finance will review its existing controls and update the necessary manuals to address all the recommendations provided. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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B. Reconciliation and Review of Subsidiary Registers

Criteria - The Government maintains a subsidiary asset register for the purpose of calculating depreciation for all assets. A systematic process should be established to regularly reconcile subsidiary asset register to ensure consistency, accuracy, and completeness of records in line with best practices.

Condition - Based on our review of the subsidiary asset registers, we noted the following:

- Subsidiary registers for land contained a significant number of properties that are grouped into only few asset numbers instead of being recorded as individual properties.
- Due to the lack of supporting documentation to verify capital asset additions and construction in progress transfers recorded during the fiscal year, we were unable to verify the depreciation expense recorded in the subsidiary ledger.

Cause - The Government does not maintain proper supporting documentation to verify the accuracy of the capital asset subsidiary register.

Effect or Potential Effect - The practice of grouping a significant number of properties under only a few asset numbers, rather than recording them individually, may result in inaccuracies in asset management and financial reporting. This can lead to difficulties in tracking and valuing individual properties, increasing the risk of misstatements in the financial statements. Additionally, the lack of supporting documentation for capital asset additions and construction in progress transfers impedes the ability to verify depreciation expenses, further compromising the reliability and completeness of the subsidiary ledger.

Recommendation - We recommend that the Government reconcile general ledger accounts to detailed records on a quarterly basis to avoid major year-end adjustments. This process should include a review of acquisition dates, depreciation calculations, and asset descriptions. Unique asset numbers and sufficient tagging information should be assigned to all separately identifiable assets. Routine physical counts should be performed and reconciled with asset registers.

Additionally, asset transfers to and from the Government should be monitored promptly, and asset custodians should be regularly reviewed to ensure that all central Government assets are properly accounted for and that formal title transfers have occurred, as applicable.

Detailed reports and records should be produced and maintained at specified intervals for analysis by management, independent auditors, or governmental bodies. Management should strictly adhere to, or revise, its records retention policy as necessary.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Capital Assets team, led by the Department of Property and Procurement and the Lieutenant Governor's Office, is working to verify and update asset records, including descriptions, acquisition dates, and depreciation. They will revise policies and procedures to ensure regular updates and reconciliation sessions. Collaboration continues among the Department of Finance, Department of Property and Procurement, and Department of Public Works to develop the Capital Assets team and update the Asset Policy and Procedural Manual. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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C. Construction in Progress (CIP) Monitoring

Criteria - Effective internal control standards and best practices require that construction in progress be monitored on a regular and systematic basis to ensure that projects are completed on time, within budget, and in accordance with established specifications. Timely analysis and review of project status, as well as the prompt recording of necessary adjustments, are essential to maintaining accurate financial records and supporting sound project management.

Condition - During our sampling procedures over construction in progress activity, we noted that the Government was unable to provide readily available supporting documentation for the following:

- Fifteen (15) out of fifteen (15) CIP projects selected for review to assess their status at the year-end.
- Nine (9) out of nine (9) CIP additions selected to verify proper recording during the year.
- Three (3) out of three (3) CIP transfers selected to verify proper recording during the year.

Cause - The Government does not maintain proper supporting documentation to verify CIP activity during the fiscal year. Additionally, confirmation procedures were not performed in a timely manner, resulting in outdated or inaccurate CIP information.

Effect or Potential Effect - The lack of supporting documentation may result in inaccurate CIP project records, with additions and transfers either not properly capitalized or incorrectly capitalized, leading to potential misstatements in the financial statements.

Recommendation: With the increase in the number of CIP projects, it is imperative to maintain an effective system for recording project costs accurately and timely, and for consistently monitoring project status with the respective project owners. It is critical that the Government reconcile these costs with the reports and records of the respective project managers, related invoices, contracts, and amendments, ensuring agreement with contract costs and capital expenditure budgets. A consistent method should be applied for determining project completion and transferring assets to the appropriate depreciable asset class. Additionally, management should strictly adhere to, or consider revising, its records retention policy.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Property and Procurement, in collaboration with key individuals from other agencies, will internally report findings for areas where step was missed and include accountability. The Capital Assets team is deliberating on capturing asset information at the time of final payment and will review and update the policy accordingly. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

D. Capital Assets Impairment Process

Criteria - Governments are required to evaluate prominent events or changes in circumstances affecting capital assets to determine whether impairment of a capital asset has occurred. Such events or changes in circumstances that may be indicative of impairment include amongst others, evidence of physical damage.

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Condition - We noted the following regarding the Government's capital assets impairment process:

- While an annual impairment assessment was performed by DPP, the process to ensure completeness of the impairment assessments across the asset classes was not readily addressed. Moreover, conclusions reached by DPP should be processed and accounted for by the Department of Finance and adjustments recorded in the asset registers, as necessary.
- We noted that some damage assessments for the departments and agencies were informally done, or were not performed at all, until the accounting team requested them. Further, each division or department seemed to have its own separate process or methodology.

Cause - Each division or department appeared to have its own separate process or methodology for conducting damage assessments, leading to inconsistencies.

Effect or Potential Effect - The lack of coordination between departments may cause delays in processing and accounting for impairment conclusions, resulting in untimely adjustments in the asset registers. Additionally, the use of different processes or methodologies by various divisions or departments can lead to inconsistent impairment data, complicating the comparison and consolidation of information across the organization.

Recommendation - We recommend that the Government implement a standardized, formal process for conducting annual impairment assessments, independent of the external audit. Furthermore, the results of periodic physical counts should be readily available for analysis by external parties and should be compared to the detailed capital asset subsidiary ledger. These results should be communicated to the Department of Finance so that necessary adjustments can be recorded. This will improve the tracking of assets for disposal and impairment purposes. It should also be noted that, as a recipient of federal grant funds, the Government is required to have an inventory management system in place to track items purchased with federal funds.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. To establish a formal process for periodic impairment assessments and ensure consistent processing of disposals and retirements, the Government will form a Capital Assets team comprising key personnel from various departments and agencies. This effort will be complemented by the full implementation of the fixed assets module within the ERP system. Project management software will be used to house all CIP information. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

E. Capital Assets - Business-Type Activities

Criteria - Capital assets constitute an investment of substantial amounts, thereby, requiring an excellent system of controls for the maintenance and safeguarding of these assets.

Condition - The Government is currently utilizing an excel worksheet to monitor capital assets within its business-type activities. The Government began the process of uploading additions into the ERP asset registers in fiscal year 2017. However, the asset register for the beginning balances has yet to be uploaded.

Cause - There may be resource constraints, such as insufficient staffing, budget limitations, or lack of technical expertise, hindering the complete transition to the ERP system.

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Effect or Potential Effect - Manual data entry and maintenance in separate spreadsheets heightens the risk of errors, such as data entry mistakes, formula inaccuracies, and inconsistencies.

Recommendation - We recommend the completion of the automation process for these assets and implementation of subsequent review and reconciliation procedures in order to ensure that accurate and timely information is available.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government will review the recommendations and work with relevant parties. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-005: Recording of Liabilities

A. Retroactive Pay Liability

Criteria - An effective control system for liability calculation requires an accounting system that performs timely reviews to ensure accurate financial reporting and that all liability transactions are properly recorded and adequately supported. For union employees in various Government departments, salaries are negotiated and agreed upon through Collective Bargaining Agreements (CBAs). The Government is responsible for accurately calculating and recording liabilities arising from unpaid salary increases that have been collectively bargained but not paid to employees. As new and existing contracts are negotiated or renegotiated and signed, it is essential that the accounting system reflects these obligations to ensure the completeness and accuracy of reported liabilities.

Condition - We noted that there is currently a \$150.0 million retroactive pay liability reflected in the books and records; however, the supporting schedules can only confirm \$138.3 million, which is based on an analysis of CBAs from the initial retroactive pay wage commission findings. Additionally, approximately 66% of the Government's employees are paid at varying rates based on different CBAs. We also noted that several CBAs have not been evaluated, implemented, ratified, or accrued for.

Cause - This discrepancy between recorded and confirmed retroactive pay liabilities may be attributable to errors in calculation, incomplete data, or a lack of proper reconciliation. Additionally, the Government lacks adequate controls and a formalized process for implementing negotiated CBAs.

Effect or Potential Effect - The lack of evaluation, implementation, ratification, and accrual for several CBAs may result in further inaccuracies in the Government's financial records. This situation could adversely impact budget planning, financial reporting, and compliance with contractual obligations.

Recommendation - We recommend that management conduct a comprehensive review and reconciliation of all retroactive pay liabilities to ensure that amounts recorded in the books and records are fully supported by detailed schedules and analyses. Management should evaluate, implement, ratify, and accrue for all outstanding CBAs to ensure that employee pay rates and related liabilities are accurately reflected. Additionally, management should establish and maintain a centralized master file summarizing pay rates and relevant factors from each CBA, and periodically review this file against authorized rates in personnel records to confirm the appropriateness and accuracy of rates in use. These actions will improve the accuracy of financial reporting, support compliance with contractual obligations, and enhance budget planning.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Division of Personnel (DOP) and the Office of Collective Bargaining (OCB) are collaborating to develop a master file for collective bargaining agreements and pay rates for unionized public sector workers, led by the Government's Chief Negotiator. This includes establishing the Government's retroactive obligation and creating a central repository portal for tracking obligations and payments. Bi-annual meetings will compare negotiated salary rates with ERP system records. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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B. Medical Malpractice Liability

Criteria - A fundamental element of a sound system of internal controls is an effective liability calculation process. This process should ensure that all liability transactions are properly recorded, adequately supported, and subjected to supervisory review. Specifically, for the Reciprocal Insurance Fund, all disbursements related to payments of medical malpractice claims must be accurately recorded and supported by appropriate documentation, with oversight to confirm compliance with established policies and procedures.

Condition - The Government has not completed the necessary analysis to determine and record a quantifiable and estimated liability for medical malpractice claims, as required by generally accepted accounting principles.

Cause - Lack of controls and procedures around the Government's claims data process.

Effect or Potential Effect - The Government's inability to gather and generate the necessary information for an actuary to compile an estimated liability at year-end has resulted in records that do not permit, or make it practical to extend, audit procedures sufficiently to determine the extent of impact on Business-Type Activities and Aggregate Remaining Fund Information as of, and for the year ended, September 30, 2022. This oversight may lead to underreported liabilities, adversely affecting the Government's financial position and increasing the risk of noncompliance with accounting standards.

Recommendation - We recommend that the Government undertake a comprehensive analysis to identify, quantify, and record an estimated liability for medical malpractice claims in accordance with generally accepted accounting principles. Management should ensure that all relevant data is collected and maintained to facilitate actuarial assessments and accurate financial reporting. Additionally, procedures should be established to regularly review and update the estimated liability to reflect changes in claim activity and ensure ongoing compliance with applicable accounting standards.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Health is in the process of submitting a Request for Proposal (RFP) to solicit an actuary to perform the evaluation. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

C. Health Insurance Accrual

Criteria - A fundamental element of a sound system of internal controls is an effective liability calculation process. This process should ensure that all liability transactions are properly recorded, adequately supported, and subjected to supervisory review.

Condition - The Government was unable to provide readily available supporting documentation for the health insurance accrual.

Cause - Lack of robust internal controls and oversight over the documentation process for health insurance accruals has resulted in the unavailability of necessary records.

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Effect or Potential Effect - The Government's health insurance accrual may be misstated, leading to incorrect financial liabilities and affecting the accuracy of the financial statements.

Recommendation - We recommend that the Government establish and enforce robust internal controls and procedures to ensure that supporting documentation for health insurance accruals is properly maintained and readily accessible.

Management should conduct regular reviews of the accrual process and documentation to verify accuracy and completeness. Additionally, management should strictly adhere to, or consider revising, its records retention policy.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government will maintain supporting documentation for the health insurance accrual to facilitate possible analysis by users. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

D. Accounts Payable

Criteria - A fundamental element of a sound system of internal controls is an effective liability calculation process. This process should ensure that all liability transactions are properly recorded, adequately supported, and subjected to supervisory review.

Condition - At present, the Government's general ledger control account for accounts payable does not agree with the subsidiary ledger balances throughout the entire fiscal year. This discrepancy also impacts the accuracy of capital asset recordation, as accruals for goods and services received are not properly and timely recorded in the capital asset register, resulting in capital assets being reflected in incorrect periods. Additionally, during our review and inquiry of subsequent disbursements, we noted that accounts payable did not include the accrual of invoices totaling \$5.6 million for services performed as of year-end.

Cause - This is due to the fact that management establishes its accounts payable subsidiary ledger through a manually intensive process, which relies solely on subsequent events during the yearly financial statement close process. This practice is based on a system functionality in which the accounting system does not allow for the recording or accrual of invoices when the obligation is incurred, but only when the corresponding allotment has been approved by OMB.

Effect or Potential Effect - These practices result in significant adjustments during the annual financial statement close process and necessitate manual reconciliation of capital expenditures and accounts payable. Furthermore, supervisory review of the accounts payable reconciliation process and the estimation of accrued liabilities may not be timely or effective in all instances, increasing the risk of inaccuracies in financial reporting and potential misstatements in the financial statements.

Recommendation - Management should consider utilizing the ERP Accounts Payable module more consistently to reduce the manual efforts currently involved in establishing accounts payable. We recommend that controls be enhanced to ensure that all invoices for services performed as of year-end are properly accrued.

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Additionally, the Government should strengthen supervisory review of the accounts payable reconciliation process and the estimation of accrued liabilities to improve the accuracy and timeliness of financial reporting.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Finance will collaborate with Tyler Munis to utilize the Accounts Payable Module and work with the Office of Management and Budget to hire an Accounts Payable Analyst. This analyst will be dedicated to making necessary monthly updates and adjustments and will work with D&A to ensure timely invoice entry. The Accounting Analysts will ensure that invoices are entered in accordance with Standard of Operating Procedures and Policies (SOPP) 130. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

E. Landfill Closure and Post Closure Costs Liability

Criteria - The U.S. Virgin Islands landfill closure and post-closure costs liability is recorded as part of the year-end process. A fundamental element of a sound system of internal controls is an effective liability calculation process, which helps ensure that all liability costs are properly calculated and recorded.

Condition - The Government obtains various reports regarding its closure and post-closure cost estimates for the three landfills in the U.S. Virgin Islands. During our review, we noted an additional penalty of \$4.5 million related to the 30-year post-closure period for the Turf landfill in 2022. Furthermore, the post-closure cost estimates for all three landfills for fiscal year 2022 were updated by applying an inflation rate.

Cause - Lack of review of the landfill reports and calculations to ensure the accuracy of the included assumptions.

Effect or Potential Effect - Relying solely on inflation rates to update post-closure cost estimates for the three landfills may result in inaccurate financial projections. This approach could lead to the underestimation or overestimation of future liabilities, affecting budget allocations and financial planning. Inaccurate estimates may also impact compliance with environmental regulations and the Government's ability to adequately fund closure and post-closure activities.

Recommendation - The Government should collaborate closely with the Virgin Islands Waste Management Authority and the third-party engineering firm responsible for calculating the closure and post-closure landfill liability. A report should be prepared to implement monitoring controls and ensure the timely review of all calculations.

While updating landfill closure and post-closure cost estimates using an inflation factor is acceptable, we recommend that the Government conduct a comprehensive review of all reports and calculations to ensure the accuracy of the included assumptions.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government is collaborating with its consultants to review the work and prepare a report to implement monitoring controls, ensuring that all calculations are reviewed in a timely manner. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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F. Quality of Census Data

Criteria - Maintaining current and accurate records and statistics is an important control for participant data, as well as for compliance with employment laws and regulations. Ensuring the quality of census data is crucial for accurate analysis, decision-making, and reporting.

Condition - We noted that the Government's pension census data, submitted to various actuarial service providers, contains significant discrepancies when compared to employee records maintained by the Government and requires substantial adjustments and assumptions before it can be utilized for necessary calculations. We sampled and selected twenty-five (25) individuals from the census data, including both active employees and retirees, and noted the following:

- For three (3) employees, we identified discrepancies between the hire dates listed in the census data and those recorded in the most recent Notice of Personnel Action (NOPA) records.
- For four (4) employees, there were inconsistencies in both hire dates and salary information when comparing the census data to the latest details in the NOPA records.
- For four (4) retirees, detailed NOPA records were not available. However, we conducted alternative procedures by verifying their hire and employment status in Munis, which confirmed that these individuals were former employees who have since retired.

Cause - There may be a lack of standardized processes, formats and controls for collecting and submitting census data, resulting in inconsistencies and errors.

Effect or Potential Effect - This introduces a greater level of uncertainty to the actuarial calculations. The time required to make significant adjustments and assumptions may lead to delays in the completion of actuarial reports and the submission of financial statements.

Recommendation - We recommend that internal controls be developed to ensure the accuracy of all active employee and retiree census data before submission for future valuations, calculations, or analysis. Additionally, adequate resources should be allocated to properly evaluate all census information provided to various actuarial service providers, as this data is essential for calculating related liabilities. It is imperative that employee data in the census information be accurate.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. A request for proposal is currently being advertised to secure a vendor who will provide a census data management system to help maintain current and accurate records. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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G. Income Tax Refunds Payable

Criteria - Paragraph 102 of GASB Statement No. 62, as amended, requires that a loss contingency be accrued when (a) information available prior to the issuance of the financial statements indicates it is probable that an asset has been impaired or a liability has been incurred as of the date of the financial statements (with the implicit condition that it is probable one or more future events will occur confirming the fact of the loss), and (b) the amount of the loss can be reasonably estimated. Loss contingencies may include pending, threatened, or unasserted litigation, claims, or assessments as of the financial statement date. Governmental funds should recognize expenditures and related fund liabilities for claims and judgments arising from loss contingencies.

The Government establishes its year-end liability for income tax refunds through a manually intensive process, which consolidates two sets of reports: (1) tax returns from various refund batches that exist but have not been processed or paid as of year-end, and (2) tax returns that were processed and paid subsequent to year-end.

Condition - We observed that the income tax liability has been accrued for tax returns that have been processed but not yet paid as of September 30, 2022. However, the tax liability for returns processed and paid subsequently, specifically those for fiscal years 2022 and prior, was excluded from the accrual of tax refunds payable, amounting to \$60.6 million.

Cause - The Government currently does not have a formalized procedure in place to determine the income tax refund payable at the end of the fiscal year.

Effect or Potential Effect - This absence of a structured process can lead to inconsistencies and potential inaccuracies in calculating the amounts owed to taxpayers and may lead to misstated financial liabilities, affecting the accuracy of the financial statements.

Recommendation - We recommend that the Government implement a formal procedure for calculating its year-end liability for income tax refunds. This can be achieved by using subsequent payments made after the year-end or by developing reliable estimation methods.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. Returning to current audits will allow income tax refunds payable to be evaluated through April 30th, consistent with practices in prior years when audits were up to date. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

H. Plan Funding Considerations

Criteria - The Government Employees' Retirement System of the U.S. Virgin Islands (GERS or the Retirement System) is a defined benefit pension plan established to provide retirement, death, and disability benefits for government employees. In addition to pension benefits, the Government is obligated to provide other postemployment benefits (OPEB), including healthcare, prescription drug coverage, dental care, and life insurance for retired employees and their eligible dependents. The Government's responsibilities encompass maintaining adequate funding, ensuring proper administration, and complying with all relevant accounting standards and legal requirements.

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Condition - We noted that the Government has not adequately funded the Retirement System and the OPEB plan for several years.

- As per the GERS actuarial valuation report as of October 1, 2021, the Retirement System is 9.81% funded for the year ended September 30, 2022. The same report also disclosed a net pension liability of \$4.36 billion which represents a long-term obligation the Government has to fund.
- As per the OPEB actuarial valuation report as of October 1, 2021, the OPEB plan reflects a total OPEB obligation of \$976.61 million which represents the long-term medical, dental, and other obligations that the Government has to fund.

Cause - Over multiple years, the Government has not allocated sufficient resources to meet the funding requirements of these plans, resulting in significant unfunded liabilities. Contributing factors include budgetary constraints, competing fiscal priorities, and limited revenue growth, which have restricted the Government's ability to make the necessary annual contributions.

Effect or Potential Effect - Insufficient funding of the Retirement System and OPEB plan weakens the Government's overall financial position, reduces net assets, and may adversely affect credit ratings, thereby increasing the difficulty or cost of future borrowing. Additionally, inadequate funding raises concerns regarding the Government's ability to fulfill future benefit commitments to retirees and employees, potentially resulting in benefit reductions, delayed payments, or increased financial pressure on current and future budgets.

Recommendation - We recommend that the Government develop and implement a comprehensive funding strategy. This strategy should include increasing annual contributions to meet or exceed actuarially determined requirements, exploring additional revenue sources, and prioritizing pension and OPEB funding within the budget process. The Government should also conduct regular actuarial valuations to monitor funding status and adjust contribution levels as necessary. Furthermore, consideration should be given to establishing an OPEB Trust Fund to accumulate assets and meet future obligations.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Virgin Islands Public Finance Authority created the Matching Fund Special Purpose Securitization Corporation to refund and restructure the Government's matching fund bonds. The Corporation also issued a funding note to GERS, secured by a subordinate lien on matching funds, with an expected payout of \$3.8 billion to GERS by 2051. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding 2022-006: Management of the Medicaid Program

Cost Report Audits, System Security Review, and Approvals

Criteria - Each State or Territory establishes systems for administering and providing Medicaid benefits. The Medicaid program is jointly funded by the Federal and the respective local government. The Virgin Islands Department of Human Services (the Department) is the primary agency responsible for administering the Government's Medicaid program.

Condition -

- Two Government-owned and operated hospitals, the Governor Juan F. Luis Hospital & Medical Center and the Roy Lester Schneider Hospital, provide Medicaid services to eligible Territory residents. Both hospitals function on a non-DRG platform, meaning that they charge through daily per diem rates based upon the number of patients serviced. The costs incurred by the hospitals, long-term care facilities, and/or Federally Qualified Health Centers (FQHC) participating in the Medicaid program are to be summarized in a cost report, which, in turn, is to be submitted to the Department. The cost reports are then required to be audited per the Government's Medicaid State Plan. Based on audits of the cost reports, a receivable or a payable should be recorded for the difference between costs submitted for reimbursement and the costs actually reimbursed. We noted that the Department has not audited cost reports for fiscal year 2022.
- The Department did not perform a risk analysis and system security review for the Virgin Islands Benefit Eligibility System (VIBES) when it was implemented in July 2017.

Cause - The Government's records do not permit a determination of the sufficiency of the design and operation of key controls surrounding the environment in which the Government's Medicaid claims reside.

Effect or Potential Effect - The Government was unable to determine how the Governmental Activities and the General Fund information may have been impacted as of, and for the year ended, September 30, 2022, thereby affecting the auditor's ability to opine on these opinion units. As a result, there is no assurance that the system is functioning as intended, which exposes the program to possible unauthorized activity and payments to ineligible participants.

Recommendation - We recommend that management evaluate and develop policies and procedures to obtain and audit the cost reports. This will allow the Government to reduce the time between Medicaid expenditures being incurred and the ultimate reimbursement from the federal government.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Medicaid Assistance Program is collaborating with the selected vendor to complete the requirements for cost report audits. For the Eligibility System, a vendor has been chosen, and the contract is underway. Additionally, the Medicaid Program will work closely to ensure all necessary information is provided regarding the claims environment. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-007: Unemployment Insurance Trust Fund

Account Reconciliation Process

Criteria - Accounting tasks, such as periodic reconciliations, play a key role in proving the accuracy of accounting data and information included in various interim financial statements and/or reports. Timely preparation of complete and accurate reconciliations is also key to maintaining adequate control over both cash receipts and disbursements.

Condition - We noted that the majority of account reconciliations were not available during the audit process, while others contained incomplete information and/or were not in accordance with required accounting practices.

Cause - The Government does not have policies and procedures in place to ensure timely completion of reconciliations supporting the Unemployment Insurance Trust Fund balances.

Effect or Potential Effect - The Government's records do not permit, nor is it practical to extend, audit procedures sufficiently to determine the extent to which the Business-Type Activities and the Unemployment Insurance Trust Fund may have been impacted as of, and for the year ended, September 30, 2022, thereby affecting the auditor's ability to opine on these opinion units.

Recommendation - To prevent significant errors and possible irregularities, including fraud, from occurring and remaining undetected in the financial records and statements, we recommend that all accounts, accruals, and reconciliations be prepared and reviewed on a periodic basis. Additionally, we recommend that the Government consider allocating adequate resources to properly evaluate and maintain the necessary information to accurately reflect the Fund's activity at each fiscal year-end.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Virgin Islands Department of Labor (VIDOL) has hired a Financial Analyst to reconcile the Unemployment Insurance Trust Fund, ensuring compliance with CMIA and Social Security Act regulations. The Trust Fund is in good standing and is reconciled daily. VIDOL's policies and procedures manual, approved by the U.S. Department of Labor in October 2021, addresses ineffective internal controls and outlines fiscal and administrative requirements for managing the Unemployment Insurance Trust Fund accounts. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-008: Workers Compensation Program

Plan Valuation Methodology

Criteria - The workers compensation program provides for medical costs, death benefits, and lost wages arising from work-related accidents. The program is administered by the Division of Workers' Compensation within the Virgin Islands Department of Labor (VIDOL).

The preferred actuarial approach to determine loss and loss expense reserves is to employ a variety of reserving methods to estimate ultimate losses by accident year. Each method has advantages and disadvantages dependent on such items as the claim's environment, the age of the accident year, and stability of the method. From within this range of indicated ultimate losses, a selection is made based on a review of the various methods and actuarial judgment.

Condition - We noted that there are delays in the payments of current and prior-year claims. Since loss development factors are determined based on the assumption that a percentage of the total reported losses are paid at any given point in time, the application of the paid patterns underlying the Government's loss triangles to the paid losses impacts the accuracy of the ultimate value.

As a result, and in an effort to improve the predictive value in the recent past, the actuary modified the methodology to also include the accounts payables of the two major hospitals in the U.S. Virgin Islands. Based on hindsight comparisons and other calculations derived from claim counts, we were able to conclude that the actuary's ultimate loss projections are within a range of reasonable estimates. However, actuarial estimates improve as more information becomes available at each maturity.

Additionally, we noted that the actuary expressed concerns regarding the underlying data used in the Government's workers' compensation analysis, as detailed in the actuarial study. Furthermore, the Government recorded an adjustment of approximately \$4.3 million for Workers' Compensation Liability to reconcile with the actuarial report as of September 30, 2022. We also noted that the Government did not record the required adjustment to align the actuarial report with the confirmed outstanding hospital invoices of approximately \$1.0 million as of September 30, 2022.

Cause - Absence of structured process for calculating and reporting liabilities in financial statements, including inadequate review, control, and completeness of underlying data.

Effect or Potential Effect - The Government's workers' compensation liabilities may be inaccurately reported, affecting the accuracy of the financial statements .

Recommendation - We recommend that the Government consider the following:

- Develop a formal document describing the processes used to compute and report these liabilities in the financial statements. The Government and its actuary should consider incorporating open claims and severity models in their projections.
- Provide clear reasoning for the establishment of any subjective assumptions.
- Include explicit explanations for any changes made to methodologies or programs in the current period that were not present in the prior-period valuation.

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- Monitor and reconcile the accounts payable balances for the major hospitals to ensure that any relevant matters are reflected in future analyses.
- For completeness, construct a formal Risk Control Matrix and a visual flow chart related to the valuation processes.
- Institute sufficient controls over the production of input data prior to submission to an actuarial service provider.
- Monitor and adhere to established policies and procedures related to record retention.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Finance (DOF) will collaborate with VIDOL to consider the issues provided. The newly implemented software, Ventiv, will help address the mentioned issues. Additionally, the Government Insurance Fund (GIF) will initiate a monthly Hospital Payables Inquiry request form for completion by the WCA. This form will provide a baseline for tracking increases and decreases in payables and inform the GIF of any "special payment projects" at the WCA. This document will supplement the information provided to the actuary. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-009: Payroll, Related Accruals, and Other Expenditures

A. Payroll Expenditures

Criteria - A strong and efficient system of controls over the payroll process is critically important. An effective internal control system can generally be implemented with reasonable effort to address potential threats of error and misappropriation. Key elements include proper supervision, regular review, and the separation of duties or functions.

Condition - We noted the following:

- The Department of Human Services transitioned to a manual timesheet process in lieu of system-generated timesheets after the September 2017 hurricanes caused damage to its ADI Time payroll system, which had not been adequately backed up. The Department continued to use the manual timesheet process for the year under review.
- During analysis of the hiring process, we observed that agency Commissioners have the authority to sign offer letters for new employees. However, Government policies still mandate that the Governor must sign all appointment letters.
- We noted that the compensated absences schedule includes some redundant data. For instance, there are employees who should not be on the schedule but have accrued balances, negative balances, or zero balances. In addition, we sampled and selected fifty (50) employees and noted the following:
 - Six (6) instances where employees had accrued hours, but no pay rate or liability listed in the report.
 - One (1) instance where an active employee who should have been included was excluded from the report.
 - One (1) instance where the employee's pay rate in the report did not agree with the pay rate per the employee's notice of personnel action.
- During our sampled procedures of fifty (50) payroll transactions, we noted the following:
 - One (1) instance where management did not maintain evidence of approval for a pay rate correction.
 - One (1) instance where fringe benefits owed as part of a retroactive wage paycheck were not paid in a timely manner.
- We noted several instances where employees in certain labor categories received overtime payments exceeding their annual salaries, attributed to staffing shortages. Although this was approved, it remains an area prone to mishandling given the volume and amounts involved. Additionally, during our sampled procedures of fifty-nine (59) transactions for overtime expense, we noted the following:
 - Two (2) transactions where evidence of approval for retroactive overtime hours was not available for review.
 - Two (2) transactions where approval for the pay rate used to calculate overtime was not provided.

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Cause - The Government fails to comply with its established payroll policies and procedures.

Effect or Potential Effect - Lack of inadequate documentation could lead to audit issues, potential financial discrepancies, and questions regarding the legitimacy of the payments.

Recommendation - We recommend that the Government consider the following:

- Transition the Department to the STATS timesheet system, which is currently utilized by various other agencies and departments.
- Conduct a thorough review and cleanup of the compensated absences schedule to remove redundant data and correct inaccuracies.
- Ensure adequate arrangements are made for the protection of files and the use of backup storage.
- Monitor and adhere to established written policies and procedures related to the proper review, recording, reporting, and retention of payroll expenditure records.
- Update policies and procedures to reflect any changes in processes.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Finance will collaborate with the Department of Human Services and the Payroll Division to evaluate and consider the recommendations provided. Additionally, the Department of Finance's Payroll Division will monitor overtime and work with various agencies to ensure it complies with laws and collective bargaining agreements. In certain cases, a state of emergency may appropriately override normal overtime regulations. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

B. Transactions with Personnel

Criteria - The Government has policies regarding executive and other employee expense reimbursements, indicating that every business expense incurred through credit cards or advance payments must be substantiated with adequate documentation. This includes a statement of expense, purchase order, approved Government Travel Request, travel voucher, and receipts, which collectively are sufficient to verify each element of the expenditure.

Condition - The Government did not provide a list of executives, making it impossible to verify the existence of adequate independent review or approval of expenses incurred by executives.

Cause - The Government does not maintain the necessary supporting documentation to verify compliance with its policies concerning transactions with personnel.

Effect or Potential Effect - Inadequate documentation may result in financial inaccuracies, unauthorized transactions, and potential misuse of funds.

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Recommendation - We recommend that the Government consider instituting a stricter monitoring process to ensure compliance with stated policies and the implementation of an independent review process.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Finance has implemented a government credit card program that includes training and requires an active purchase order for card issuance. The Department will work with the Office of the Governor to strengthen, recommunicate, and monitor the program to ensure all reimbursements comply with established policies. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

C. Reporting for Expenditures

Criteria - A strong and efficient system of controls over purchasing and expenditures is critically important. An effective internal control system can generally be implemented with reasonable effort to address potential threats of error and misappropriation. Key elements include proper supervision, regular review, and the separation of duties or functions.

Condition - During our sampled procedures of expenses, we noted the following:

- Supporting documentation was not available for twenty-three (20) out of one hundred and thirty-one (131) general expense transactions.
- Twenty-one (21) out of one hundred and seventy-nine (179) expense transactions indicated that the expenditures were not recorded in the proper period.

Cause - Lack on adherence to government's established written policies and procedures related to the proper recording and reporting of expenditures.

Effect or Potential Effect - Sufficient audit evidence was not obtained to support conclusions on general expenses. As a result, additional time and effort were required during the audit process to locate and/or identify alternative methods.

Recommendation - We recommend that the Government adhere to its established written policies and procedures related to the proper recording and reporting of expenditures. Timely review and reconciliation of expenditures will ensure that expenditures are recorded in the correct period.

It is important to produce detailed reports and records at specified intervals and to maintain these for possible analysis by users such as management, independent auditors, or governmental bodies. Management should strictly adhere to, or consider revising, its records retention policy.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government will continue to enforce the Standard Operating Procedures and Policies (SOPP) requiring all invoices to be attached in the ERP system and will closely examine the invoice approval process. As part of this process, invoices will be thoroughly reviewed to ensure expenditures are recorded in the correct period and are properly supported in the Accounts Payable module. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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D. Formalize Emergency Payroll Procedures

Criteria - A robust and efficient system of payroll controls is essential to ensure the timely and accurate processing of payroll, particularly during unexpected events or disruptions. Formal emergency payroll procedures should be established to clearly define roles, responsibilities, and the steps to be taken in the event of emergencies such as natural disasters, system outages, or other crises.

Condition - Payroll processing begins with timesheets approved by department heads in the STATS system, which then serve as the basis for payroll calculations in the Payroll Division. In 2017, hurricanes caused significant power outages and displacement of personnel, rendering roads inaccessible and preventing employees from attending work for several days. Consequently, the recording of timesheets in the STATS system was temporarily suspended.

Cause - The Government does not have formalized emergency payroll procedures to guide payroll operations during emergencies, such as natural disasters or other significant disruptions.

Effect or Potential Effect - In the absence of proper documentation and approval of employee work hours, there is an increased risk of errors, omissions, or inconsistencies in payroll calculations. This may result in misstated personnel costs, adversely affecting the accuracy of financial reporting and the reliability of financial statements.

Recommendation - We recommend that the Government develop and implement a formal, written emergency payroll procedures manual to be utilized in the event of major operational disruptions, such as those experienced during the 2017 hurricanes. This manual should outline the necessary processes, identify key contacts and personnel, and specify required reconciliations to ensure the integrity of payroll operations during emergencies.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government has enhanced its infrastructure for climate resilience and remote operations, driven by the global pandemic, resulting in stronger controls to maintain continuity during adverse conditions. Emergency payroll processing protocols are regularly reviewed and updated to support these efforts. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding 2022-010: Bank Accounts

A. Strengthen Controls Over Bank Reconciliations

Criteria - Cash is the most liquid of assets and has the highest risk for theft, embezzlement, and misappropriation. Timely preparation of complete and accurate bank reconciliations is key to maintaining adequate control over both cash receipts and disbursements.

Condition - We noted the following:

- A substantial number of outstanding checks, some issued as far back as 1998, are still being carried on the reconciliations and were eventually reclassified to accounts payable at year-end.
- A substantial number of outstanding checks in the bank reconciliations, amounting to \$5.0 million, were recorded as voided during fiscal year 2022. However, we were unable to obtain or trace the entries made when voiding the checks. This lack of traceable entries raises concerns about the completeness and accuracy of the voiding process and related financial records.
- There were instances where bank reconciliation variances were not properly explained or investigated. Additionally, there was insufficient documentation to confirm that the reconciliation and related journal entries had been reviewed and approved.
- Outstanding checks totaling \$1.6 million were not included in either the outstanding check listing or the voided check listing.
- During our review of the bank reconciliations and the outstanding check analysis, we noted that \$0.9 million in checks was reported as outstanding. Of this amount, the status of the \$0.8 million in outstanding checks remains unknown.
- The outstanding check analysis indicated a total of \$16.8 million in outstanding checks. However, the supporting outstanding check listing totaled only \$15.3 million, resulting in a variance of \$1.4 million.
- During our review of the bank reconciliations, we selected a specific last outstanding check of fiscal year 2022 for testing to verify its proper inclusion or exclusion from the outstanding check listing. However, we were unable to obtain a supporting copy of the check, preventing us from confirming its status.
- Four (4) imprest cash accounts, confirmed by the bank(s), were not listed in the imprest cash account report at year-end.
- The Government's bank listing included an account that had been closed. Despite its closure, the account still showed a balance as of September 30, 2022. This balance was incorrectly reported and required an adjustment.

Cause - There accounting system lacks the functionality to formally approve or indicate review of the bank reconciliations. Additionally, the failure to update the bank listing and remove closed account in the financial records is caused by lack of regular reviews.

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Effect or Potential Effect - Uncertainty regarding the status of outstanding checks may result in the inaccurate presentation of cash balances, while unresolved outstanding checks could lead to stale-dated checks and undetected errors. Additionally, the inclusion of a closed account and the exclusion of imprest accounts in the bank listing have resulted in inaccurate cash balances, potentially misleading users of the financial statements.

Recommendation - We recommend that bank reconciliations be prepared and reviewed for accuracy and completeness on a timely basis. We recommend that management implement a process to track when bank reconciliations are reviewed and approved. Additionally, we recommend the following:

- Outstanding checks and other uncleared reconciling items that are over one year old should be investigated and removed from the bank reconciliations, and the original transactions should be reversed. Periodic research should be conducted to eliminate large numbers of old items being carried forward from month to month and year to year. As an auxiliary step, consideration should also be given to the Government's unclaimed property laws.
- Regular and thorough reviews of bank reconciliations should be conducted to identify any discrepancies and ensure the accuracy of reported balances. Management should establish a process for investigating and clearing stale-dated checks and verifying the status of all listed accounts.
- Management should establish more robust controls and review procedures to ensure that all imprest accounts are listed and reconciled at year-end.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Commissioner of Finance will enforce Title 33, Subtitle 3, Chapter 115, Subchapter III, Subsection 3261, which outlines procedures for unpaid checks. Additionally, the Director of Treasury will ensure that bank reconciliations are prepared and reviewed promptly. The Government will collaborate with Munis consultants to implement a process for tracking the review and approval of bank reconciliations. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

B. Cash Pooling and Allocation(s)

Criteria - Cash is the most liquid of assets and has the highest risk for theft, embezzlement, and misappropriation. Cash pooling and allocations should be conducted in a manner that ensures transparency, proper allocation of funds, and accurate reporting.

Condition - Throughout the year, all expenditures are charged against each fund's cash account. Due to the nature of operations, the Government's Treasury Department does not maintain a separate bank account for each fund or for each cash account in the general ledger. As a result, each bank account includes activity for multiple funds. In some instances, funds "borrow" from the General Fund. At year-end, an entry is prepared to correct or "true-up" the cash balances for each fund.

Cause - There is a lack of efficient documentation to support the pooling and subsequent allocation of cash accounts.

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Effect or Potential Effect - The centralized cash management approach results in all expenditures being charged to a pooled cash account without proper allocation to individual funds. This practice creates difficulty in accurately tracking and reporting the financial position of each fund.

Recommendation - We recommend that management enhance the documentation supporting the pooling and subsequent allocation of cash accounts. Specifically, there should be a clear and auditable link between the confirmed cash account balances and the cash balances per fund as presented in the year-end financial statements.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Director of Treasury, with oversight of the Assistant Commissioner, will improve documentation supporting the pooling and allocation of cash accounts. Additional human resources have been allocated to ensure timely preparation of bank reconciliations, as the Government aims to enhance the connection between confirmed cash account balances and the cash balance per fund in year-end financial statements. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

C. Check Sequences

Criteria - A strong system of internal controls should be implemented over check runs and unused checks to ensure consistency, accuracy, and completeness of financial records. Such controls are essential for safeguarding assets, preventing unauthorized transactions, and supporting reliable financial reporting.

Condition - During procedures performed over the subsequent check registers, we noted several large gaps in the check sequences.

Cause - The Government's ERP system does not automatically generate check numbers; instead, check numbers are entered and tracked manually by Government personnel.

Effect or Potential Effect - A lack of control over unused checks could lead to unauthorized transactions, potentially resulting in fraudulent activities that affect financial reporting.

Recommendation - We recommend that a process be implemented whereby personnel responsible for check runs review prior and current manual check entries to detect gaps before processing.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government is implementing measures to ensure proper management of check sequences within the ERP system. This includes monitoring both used and unused check sequences, as the system automatically generates check numbers. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding 2022-011: Other Post Employment Benefit Valuation

A. Actuarial Valuation

Criteria - Generally Accepted Accounting Principles (GAAP) for *Accounting and Financial Reporting for Postemployment Benefits Other Than Pensions* require an actuarial valuation to be performed at least every two years, with more frequent valuations or calculations encouraged. If an actuarial valuation is not performed as of the measurement date, the total Other Post-Employment Benefits (OPEB) liability is required to be based on update procedures that roll forward amounts from an earlier actuarial valuation performed as of a date no more than 30 months and 1 day prior to the employer's most recent fiscal year-end.

Condition - We noted that the Government has not performed a full actuarial valuation of OPEB in accordance with GAAP as of October 1, 2021, applicable for fiscal year 2022. The most recent full actuarial valuation was completed as of October 1, 2019, and liabilities for fiscal years 2020 and 2021 were determined by rolling forward the previous valuation.

Cause - An actuarial valuation for OPEB was not performed for the respective year.

Effect or Potential Effect - GAAP requires governments to obtain an actuarial valuation of their benefit plans to properly measure and report the related liabilities, deferred outflows/inflows of resources and expenses in the financial statements. In the absence of an actuarial report, the Government is unable to accurately determine and disclose its OPEB liability and related financial statement elements.

Recommendation - We recommend that the Government implement controls and procedures to compile the necessary information and engage a qualified actuary to perform a comprehensive actuarial valuation of the OPEB plan in accordance with GAAP. The actuarial valuation should be completed on a timely basis and updated as required to ensure that the OPEB liability, related deferred outflows/inflows of resources, and expense are accurately measured and reported in the financial statements.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government has implemented a new census data management system that allows for easy updates by the component unit, which will help alleviate delays in submitting data to the actuary. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

B. Administration and Recordkeeping

Criteria - The Government follows the provisions of GASB Statement No. 75, *Accounting and Financial Reporting for Postemployment Benefits Other Than Pensions*. This standard requires the reporting and disclosure of costs and liabilities associated with postemployment benefits provided to retirees.

Condition - The Division of Personnel, through the Virgin Islands Health Insurance Board, is responsible for administering health insurance and related benefits for retirees.

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The Virgin Islands (V.I.) Code stipulates that the Government, the University of the Virgin Islands, the Virgin Islands Waste Management Authority, the Virgin Islands Port Authority, and any not-for-profit corporation funded at least 75% annually by federal or local government funds, are legally responsible for providing health benefits to active and retired service personnel. However, it has been observed that the component units and organizations referenced above have paid these benefit costs for active employees only, while the Government has assumed responsibility for the payment of benefit costs for retirees.

Additionally, the accounting requirements for postemployment retirement plans are increasingly complex and demand specialized expertise to ensure accurate accounting and reporting in accordance with applicable standards.

Cause - The V.I. Code explicitly designates legal responsibility for these benefits. The current condition appears to result from noncompliance with the arrangement outlined in the V.I. Code, whereby the Government has assumed the responsibility for retiree benefit payments instead of the component units and organizations.

Effect or Potential Effect - This arrangement results in the Government recognizing substantial long-term liabilities for retiree health benefits on its financial statements, which can significantly reduce net assets and adversely affect overall financial health. Furthermore, the complexity of accounting for postemployment benefits increases the risk of misstatements or incomplete disclosures, potentially compromising the accuracy and transparency of the financial statements.

Recommendation - We recommend that the Government formalize the current practice or ensure that benefit payments by the component units and organizations referenced above also include retirees, in accordance with the V.I. Code. Additionally, we recommend that the Government and/or Division of Personnel consider hiring or contracting an individual with specialized knowledge in accounting and plan administration, even on a part-time basis, to consistently provide higher-level accounting support throughout the year. This enhancement within the Division of Personnel will help clarify transactions, strengthen internal controls, reduce confusion regarding transfers and transactions between funds and component units, and improve communication with actuaries and insurers.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Finance and the Division of Personnel have started working together to address the findings. With the hiring of a dedicated employee in January 2020, the Division of Personnel can now effectively monitor and track the receivables and payables of the Health Insurance Retiree Fund for the Group Health Insurance Unit and will continue to establish processes to resolve noted issues. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

C. Update of Mortality Tables

Criteria - Mortality tables used for actuarial valuations and financial reporting should be regularly updated to reflect the most current demographic data and trends, ensuring accuracy in the measurement of postemployment benefit obligations.

Condition - It was noted that the generational mortality tables and related assumptions currently in use are based on a review performed as of September 30, 2015.

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Cause - This condition has arisen due to limited resources, insufficient prioritization of actuarial updates, and the absence of established procedures for the periodic review and revision of actuarial assumptions.

Effect or Potential Effect - As a result, actuarial valuations may not accurately reflect current life expectancy or mortality rates, potentially leading to misstatements in the measurement of postemployment benefit obligations.

Recommendation - Although the current rates appear reasonable, it is important to note that the Society of Actuaries updates the generational mortality improvement scales annually. Utilizing a more recent scale or implementing annual updates would enhance the accuracy and relevance of actuarial valuations.

Views of Responsible Officials - To maintain consistency, the mortality and demographic assumptions used in the valuation match those in GERS pension valuations. These assumptions will be updated following the next GERS experience study. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-012: Accounting Standards Implementation

Criteria - Effective for reporting periods beginning after December 15, 2015, the Government is required to implement GASB Statement No. 77, *Tax Abatement Disclosures*. Adoption of GASB 77 provides essential information about the nature and magnitude of reductions in tax revenues resulting from tax abatement programs.

Effective for the fiscal year ended September 30, 2022, the Government is required to implement GASB Statement No. 87, *Leases*. Under this Statement, a lessee is required to recognize a lease liability and an intangible right-to-use lease asset, while a lessor is required to recognize a lease receivable and a deferred inflow of resources.

Condition - The Government did not adopt or conduct an assessment to analyze the impact that implementing GASB 77 and GASB 87 would have on its financial statements.

Cause - There is an absence of a formal process or oversight mechanism to ensure the timely assessment and analysis of the impact of new accounting standards, specifically GASB 77 and GASB 87, on the Government's financial statements.

Effect or Potential Effect - This oversight could result in unpreparedness for compliance with new accounting standards and may lead to potential inaccuracies in financial reporting. Such deficiencies may adversely affect the reliability of the Government's financial statements and its ability to meet regulatory requirements.

Recommendation - We recommend that the Government conduct a comprehensive assessment to evaluate the impact of implementing GASB 77 and GASB 87 on its financial statements. This assessment should include a detailed analysis of the requirements and implications of these standards to ensure accurate and compliant financial reporting.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government is initiating the process of soliciting a professional services contract to implement GASB 87. However, disclosures related to GASB 77 cannot be made due to confidentiality restrictions on the underlying contracts. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-013: Irregularities related to Procurement Activities

Criteria - As defined by Government Auditing Standards, which are issued by the U.S. Government Accountability Office (GAO), Management should design control activities to achieve objective and respond to risks, including proper authorization and segregation of duties. Through the implementation of control activities by adopting appropriate policies and procedures that define expectations and guide operations to safeguard government assets to mitigate potential fraud and irregularities.

As outlined in auditing standards issued by the American Institute of Certified Public Accounts (AICPA) AU-C 250, *Considerations of laws and Regulations in an Audit of Financial Statements*, Management is responsible for ensuring that the government's operations comply with all applicable laws and regulations and have established and maintain policies and procedures designed to prevent and detect noncompliance. Management should be aware of which laws and regulations are relevant and applicable to the government's operations especially those that have a direct and material effect on the financial statements.

Procurement is governed by Title 31, Chapter 23, Sections 231 - 251, of the Virgin Islands Code which states the various types and requirements for procuring goods and services. The Department of Property and Procurement is the agency primarily responsible for all acquisitions of goods and services.

Procurement regulations and procedures state that contract files must be maintained documenting the history of the procurement, including requisitions, purchase orders, and solicitations. Per the Procurement Manual, all requisitions must be created following the regulatory guidelines of the Department of Property and Procurement (DPP), then in effect. When creating a requisition or purchase order, all necessary supporting documentation must be attached in the ERP system; this includes the required quotes and a justification letter signed by the User Agency head and approved by the Commissioner of Property and Procurement, if required.

The government has established comprehensive policies and procedures for the processing of expenditures, including purchase orders, invoice processing, approvals, segregation of duties, and documentation of transactions. These internal controls are designed to safeguard assets and reduce the risk of errors and misappropriation.

Condition - In 2024, an inquiry was conducted by the United States Department of Justice into potential criminal activities associated with three members of the management team members of the government and formal indictments followed. Management performed an investigation into the matter and, we observed the following:

- Invoice were dated prior to the purchase order approval date for seventy-seven (77) out of hundred-seventy-five (175) transactions.
- No evidence was available that a request for proposal (RFP) was initiated for twenty-seven (27) out of thirty-one (31) purchase orders over the \$50,000 policy threshold.
- A single individual approved multiple levels for payment remittance for ten (10) out of hundred-seventy-five (175) transactions.

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- As required by the procurement policy, no evidence was available to show that three quotes were requested and obtained prior to the awards for thirteen (13) out of thirteen (13) purchase orders above \$10,000.
- Same invoice was used to support two (2) out of hundred-seventy-five (175) transactions.
- No evidence that a payment remittance was fully approved for one (1) out of hundred-seventy-five (175) transactions.
- No documentation was available to clarify and understand purpose of transaction outside the invoice. The contract, bid, RFP information and grants requests were not available to support compliance with procurement and/or payment policies and processes for eight-eight (88) out of hundred-seventy-five (175) transactions.
- Purchase of good and/or services for no documented business purpose for three (3) out of hundred-seventy-five (175) transactions.

Cause - The Government did not retain all necessary supporting documentation for purchase orders, contracts, and vendor profiles to ensure adherence to internal policies and procedures to support the transactions and limitation on the availability of finance personnel.

Effect or Potential Effect - Failure to retain necessary supporting documentation and adhere to established procurement laws, regulations, policies and procedures may result in noncompliance with procurement regulations. This deficiency increases the risk of improper or unauthorized purchases, reduces transparency and accountability in the procurement process, and may lead to audit findings or other regulatory noncompliance.

Recommendation - We recommend that the Government evaluate its policies and procedures to ensure all necessary supporting documentation are retained such as: purchase orders, contracts, and vendor profiles which will support adherence to internal policies and regulatory requirements. Management should implement procedures to regularly review and verify that all procurement activities are properly documented and compliant with applicable regulations.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government is finalizing its policies and procedures to ensure all necessary supporting documentation are retained, which will support adherence to internal policies and regulatory requirements. The Government will review regularly to verify that all procurement activities are properly documented and compliant with applicable regulations. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Finding 2022-014: Procurement Regulations

Criteria - Procurement is governed by *Title 31, Chapter 23, Sections 231 - 251*, of the Virgin Islands Code, which states the various types and requirements for procuring goods and services. The Department of Property and Procurement is the agency primarily responsible for all acquisitions of goods and services.

Procurement regulations and procedures state that contract files must be maintained documenting the history of the procurement, including requisitions, purchase orders, and solicitations. Per the Procurement Manual, all requisitions must be created following the regulatory guidelines of the Department of Property and Procurement (DPP), then in effect. When creating a requisition or purchase order, all necessary supporting documentation must be attached in the ERP system; this includes the required quotes and a justification letter signed by the User Agency head and approved by the Commissioner of Property and Procurement, if required.

Condition - We sampled and selected one hundred and twenty-nine (129) purchase orders and sixty-four (64) contract files and noted the following:

- The DPP was unable to provide evidence that the controls process regarding the evaluation committee for supply contracts, which confirms understanding of the policies and procedures, was operating effectively.
- Thirty-five (35) purchase orders from nineteen (19) different vendors did not contain the requisite documentation to provide evidence that the purchase order met the stated requirements.
- Forty-one (41) purchase orders from seven (7) different vendors appeared to be split purchase orders, and adequate supporting documentation was not available to determine if purchase order splitting occurred.
- Two (2) purchase orders from two (2) different vendors were not in line with Government policies regarding purchase orders and contracts.
- Forty-one (41) executed contract files did not contain the requisite documentation to provide evidence that the respective procurement met stated requirements.
- Sixty-four (64) instances lacked adequate supporting documentation to determine whether the first invoice was generated before the date of contract execution

Cause - The Government did not retain all necessary supporting documentation for purchase orders, contracts, and vendor profiles to ensure adherence to internal policies and procedures.

Effect or Potential Effect - Failure to retain necessary supporting documentation and adhere to established policies and procedures may result in noncompliance with procurement regulations. This deficiency increases the risk of improper or unauthorized purchases, reduces transparency and accountability in the procurement process, and may lead to audit findings or other regulatory consequences.

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Recommendation - We recommend that the Government retain all necessary supporting documentation for purchase orders, contracts, and vendor profiles to ensure adherence to internal policies and regulatory requirements. Management should implement procedures to regularly review and verify that all procurement activities are properly documented and compliant with applicable regulations.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government will continue to implement necessary measures to address noncompliance and conduct periodic reviews of purchase orders, contracts, and profiles to ensure adherence to internal policies and regulations. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-015: Information Technology (IT) Environment

A. User Access and Administration

Criteria - Logical security for user access and user administration are critical components of an effective information security strategy. These controls are designed to ensure that only authorized individuals have access to information systems and data, thereby safeguarding sensitive information from unauthorized access, misuse, or breaches.

Condition - We noted the following during our procedures over user access and change management:

- There are no formal re-certifications of user access security rights performed for the following applications:

Applications:

- Timeforce
- MUNIS
- VIDOLA\$
- VITAX
- ScanOptics
- MMIS
- Capture
- RawData
- CARIBS
- VIBES

- The password and account lockout configurations have not been implemented to enforce strong passwords on the following applications and operating systems:

Applications:

- VIDOLA\$

Operating Systems:

- Department of Finance
- Bureau of Internal Revenue
- Lieutenant Governor's Office
- Department of Labor (including Red Hat)
- Department of Human Services

- Evidence was not available to demonstrate that users with access to database is restricted and appropriate based on job responsibilities for the VITAX application.
- Evidence was not available to demonstrate that there is a formal change management policy on the Munis application.

Cause - These conditions appear to be the result of insufficient oversight and a lack of established policies and procedures for user access management, password security, and change management across key operating systems and applications.

Effect or Potential Effect - The absence of formal re-certifications of user access security rights, lack of strong password and account lockout configurations, and insufficient evidence of formal change management policies significantly increase the risk of unauthorized access to sensitive systems and data. These deficiencies may result in the exposure of confidential information, potential misuse or alteration of critical data, and increased vulnerability to security breaches.

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Recommendation - The Government should evaluate its documentation process to mitigate the risk of changes being implemented without appropriate approvals. Additionally, the Government should assess its user access and administration controls, including user addition, modification, and removal, to ensure that appropriate access is granted and that there is strict adherence to record retention policies.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Lieutenant Governor's Office has upgraded systems for re-certifying user access security rights, and the MIS Director is working with the Bureau of Information Technology on a government-wide framework. The Bureau of Internal Revenue has implemented a password lockout and complexity policy, with annual training for users. The IT department is developing a recertification policy and forms for supervisors, ready by next fiscal year, and plans to implement a password lockout policy with Oracle Forms. VIDOL IT is working on standardizing change management systems for the next fiscal year. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-016: Collateral of Depository

Criteria - Collateralization provides an avenue of recovery in the unlikely event of the failure of a bank or financial institution holding government deposits. Collateralization of public deposits through the pledging of appropriate securities or other instruments (i.e., surety bonds or letters of credit) by depositories is an important safeguard for government deposits. Further, in the event of a failure of a bank, the Federal Deposit Insurance Corporation (FDIC) will honor the collateralization agreement if the agreement is valid and enforceable under applicable law.

Virgin Islands Code Section 3304, *Collateral of Depository*, requires depositories to pledge collateral that is satisfactory to the Commissioner of Finance, to secure governmental deposits held with that institution. It is recommended that margin levels should be at least 102%, depending on the liquidity and volatility of the collateral pledged.

Condition - During our review of the Government's collateral of depository reports, we noted that not all cash accounts of the Government and its component units are included in the report to be collateralized.

Cause - The Government does not appear to have adequate policies and procedures to ensure compliance with stated requirements.

Effect or Potential Effect - Failure to meet the required margin levels constitutes non-compliance with regulatory requirements and internal policies, potentially leading to penalties or sanctions. Also, under collateralization of all cash accounts with depositories can cause a violation of the code and potential loss of the Government assets if a financial institution were to fail.

Recommendation - We recommend that the Government implement policies and procedures to ensure all cash accounts for the Government and its component units are in compliance with the stated requirements.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. Collateral reports are specific to financial institutions and may not include all quasi-governmental or component unit accounts unless identified as government accounts when established. The Government will collaborate with its banks to ensure that any identified accounts are included in the collateral report of the related institution. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-017: Landfill Consent Decrees

Criteria - Closure and post-closure directives related to landfills are regulated by various Federal laws, including requirements by the United States Environmental Protection Agency (EPA). As such, the Government is required to construct and operate certain environmental control systems and otherwise comply with certain requirements during operation of each of its landfill sites, properly close the site (including placement of a final landfill cover) when the landfill (or portion thereof) stops accepting waste, and perform certain post-closure maintenance and monitoring functions at the site for 30 years following closure.

Condition - During our procedures, we noted several instances of noncompliance with EPA decrees concerning the Anguilla and Bovoni landfills. These matters include various health and safety risks, failure to submit required reports, and incomplete installation of the groundwater monitoring system around the perimeter of the Anguilla landfill.

Cause - The Government does not appear to have adequate policies and procedures to comply with EPA decrees concerning the Anguilla and Bovoni landfills.

Effect or Potential Effect - Noncompliance with the consent decree timetables can result in the accrual of penalties at specified rates.

Recommendation - We recommend that the Government allocate budgetary funds to pay any penalties that have already accrued. Additionally, the Government should implement necessary measures to promptly address current noncompliance with the consent decree timetables in order to avoid incurring future penalties.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government of the Virgin Islands is seeking funding from the Virgin Islands Legislature to address funding concerns and organize the workflow to complete reports in a timely manner, in order to meet EPA decrees related to various issues. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-018: Establishment of a Medical Malpractice Trust Fund

Criteria - In accordance with subsection (a) of Virgin Islands Code (V.I. Code) Section 27, in lieu of procuring a group insurance policy, the Commissioner of Health is authorized to self-insure health care providers against claims arising from the rendering or failure to render medical care or services, as well as claims for injury or death to patients resulting from the activities of health care providers.

Additionally, the establishment of a Medical Malpractice Risk Management Trust Fund (the Fund) is required to provide coverage against professional medical malpractice liability. This Fund must be managed by a licensed broker or brokerage firm, with the investment plan subject to the approval of the Medical Malpractice Action Review Committee. A maximum of 1% of the proceeds from the Fund may be used by the Territorial Office of Risk Management for administrative purposes, as defined within the V.I. Code. Interest accruing on the Fund must be retained or redeposited into the Fund.

Condition - We noted that the Government has not established a separate trust fund.

Cause - The Government does not appear to have adequate policies and procedures in place to ensure compliance with the requirement to establish a Medical Malpractice Trust Fund.

Effect or Potential Effect - The failure to set up a separate trust fund may lead to non-compliance with legal or regulatory requirements, potentially resulting in penalties or sanctions.

Recommendation - We recommend that the Government establish a separate Medical Malpractice Trust Fund in accordance with applicable legal and regulatory requirements. Management should develop and implement policies and procedures to ensure proper administration, oversight, and compliance with all statutory provisions related to the Fund.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Health has established a Medical Malpractice fund known as the Reciprocal Insurance Fund. The planned corrective actions are presented in the Government's Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Finding 2022-019: Casino Control Commission

Criteria - Title 32, Chapter 21, Section 514 of the Virgin Islands Code states that the Chairman of the Casino Control Commission “shall submit to the Department of Finance by the 30th day of the month following the end of each quarter a report detailing the amount, nature, and the justification for each item of expenditure in the previous quarter. The report shall be accompanied by receipts and any other documentation required by the Department of Finance’s rules and regulations or other laws of the Virgin Islands. An annual financial report of the fiscal year’s expenditures from the special checking account shall be compiled by the Chairman of the Commission and submitted to the Legislature and the Department of Finance by the 30th of the month following the end of the fiscal year.”

Condition - We noted that the Casino Commission is not submitting all requisite reports to the Department of Finance.

Cause - The Government does not appear to have adequate policies and procedures in place to ensure compliance with applicable requirements.

Effect or Potential Effect - The Government is not in compliance with stated provisions, which could lead to inaccurate reporting.

Recommendation - We recommend that the Department of Finance maintain proper oversight of the Casino Control Commission by obtaining and reviewing all required reports. These reviews should include supporting documentation for all financial transactions and an assessment of compliance with Virgin Islands policies and procedures.

Views of Responsible Officials - The Government concurs with the auditor’s findings and recommendations. The Government has requested and is receiving the required quarterly reports from the Casino Control Commission, as covered by the V.I. Code. The planned corrective actions are presented in the Government’s Corrective Action Plan attached in Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Section III - Federal Award Findings and Questioned Costs

Finding Number: 2022-020
Prior Year Finding Number: 2021-019
Compliance Requirement: Allowable Costs/Cost Principles - Payroll Activities

Program: U.S. Department of Agriculture
Government Department/Agency: Department of Human Services (DHS)

Supplemental Nutrition Assistance Program Cluster
(SNAP)

ALN: 10.551, 10.561

Award #: 4VI400408

Award Year: 10/01/20 - 09/30/21
10/01/21 - 09/30/22

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires the non-federal entities receiving Federal awards (1.e., auditee management) establish and maintain internal control designed to reasonable ensure compliance with Federal statutes, regulations, and other terms and conditions of the Federal Award. Management is responsible for establishing and maintaining a system of internal control that should include controls over its activities allowed or unallowed, allowable cost/cost principal process.

CFR 200.403(g) states that for costs to be allowed under federal awards, they must be adequately documented. Additionally, salaries and wages charged to Federal awards are subject to the standards of documentation as described by 2 CFR Section 200.430(i) and must be based on records that accurately reflect the work performed. These records must:

- Be incorporated into the organization's official records.
- Reasonably reflect the total activity for which the employee is compensated across all grant-related and non-grant related activities (100%); and
- Support the distribution of employee salary across multiple activities or cost objectives.

Condition - During our testing of allowable costs for payroll expenditures incurred throughout the year, we sampled and selected 60 of 1,854 payroll disbursements and noted the following:

- 13 instances where DHS did not consistently apply funding allocation in accordance with the Notice of Personnel Action (NOPA). Of the 13, we found 5 instances where hours that should have been charged 100% to federal funds were split 50/50 (local/federal) and 8 instances in which hours that should have been split 50/50 were charged 100% (3), 95% (3), 75% (1), and 55% (1) to federal funds.
- One instance where an employee's compensation was charged to SNAP while working on a different federal program.
- One instance in which overtime hours noted per the employees' timesheet did not agree to the overtime hours in the payroll register.

Further, we noted that internal controls identified did not appear to be operating at a level of precision to ensure compliance with the above-mentioned requirements.

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Questioned Costs - Not Determinable.

Context - This is a condition identified per review of DHS' compliance with the specified requirements using a statistically valid sample. The total payroll expenditures charged to the program in fiscal year 2022 were \$3,354,155. The amount sampled is \$132,885. The known amount of the instances of inconsistent funding allocation is \$6,453.

Effect - An ineffective control system related to review of transactions to ensure that only allowable costs are allocated to federal programs can lead to noncompliance with federal statutes, regulations, and the provisions of grant agreements that could ultimately lead to disallowed costs for the major programs.

Cause - DHS does not appear to have adequate policies and procedures to ensure compliance with applicable cost principles and ensure that an appropriate level of review and approval was completed prior to charging costs to a federal program.

Recommendation - We recommend that DHS reevaluate and improve internal controls to ensure adherence to federal regulations related to the fiscal administrative requirement for expending and accounting for payroll and to ensure proper and accurate funding allocation of payroll cost.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Human Services (DHS) adopted the electronic Timeforce (STATS) system for payroll, replacing manual processes. Time and attendance are approved through management levels, with payroll based on Notice of Personnel Action (NOPA) cost centers. Financial Analysts reconcile payroll, and a workflow ensures accurate NOPA listings for payroll purposes. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-021
Prior Year Finding Number: 2021-020
Compliance Requirement: Matching, Level of Effort, Earmarking

Program:
U.S. Department of Agriculture

Government Department/Agency:
Department of Human Services (DHS)

Supplemental Nutrition Assistance Program Cluster
(SNAP)

ALN: 10.551, 10.561

Award #: 4VI400408

Award Year: 10/01/20 - 09/30/21
10/01/21 - 09/30/22

Criteria - CFR Section 200.303, *Internal Controls*, (a) states DHS must establish and maintain effective internal control over federal awards that provides reasonable assurance that DHS is managing the federal awards in compliance with federal statutes, regulations, and terms and conditions of the federal award. Management is responsible for establishing and maintaining a system of internal control that should include controls over its matching process.

Further, 2 CFR Section 200.306 provides detailed criteria for acceptable matching costs. The basic criteria for acceptable matching costs include costs that are necessary and reasonable for accomplishment of program objectives and are allowed under 2 CFR Part 200, Subpart E (Cost Principles).

Condition - During the fiscal year, it appears that management's internal controls over matching compliance were not functioning as intended. We found that management was not monitoring its compliance with the matching requirement throughout the year.

Further, we tested 60 of 1,455 matching transactions and noted the following:

- 13 instances where DHS did not consistently apply funding allocation in accordance with the Notice of Personnel Action (NOPA). Of the 13, we found 9 instances where hours that should have been charged 100% to federal funds were split 50/50 (local/federal) and 4 instances in which hours that should have been split 50/50 were charged incorrectly. We do note, however, that all such employees did work 100% on the federal program such that time allocated to the match is allowable.
- One transaction did not contain the appropriate management approvals.
- One transaction totaling \$4,500 that did not appear to be an allowable cost was claimed as part of the match. We do note, however, that the overall match appears to have been met with the exclusion of this transaction.

Questioned Costs - None.

Context - This is a condition identified per review of DHS' compliance with the specified requirements using a statistically valid sample. The total expenditures claimed as the match fiscal year 2022 were \$3,864,719. The amount sampled is \$406,626.

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Effect - DHS is not in compliance with the stated provisions. Without adequate internal controls to ensure compliance with matching requirements, there is an increased risk that matching will not be properly applied and funding could be jeopardized.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure complete compliance with the matching requirement. Further, lack of monitoring of the match requirement appears to be the result of significant personnel turnover and lack of staffing.

Recommendation - We recommend that DHS deploy resources that are given the responsibility to ensure periodic monitoring and compliance of the matching requirement throughout the fiscal year.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Human Services (DHS) shifted to the electronic Timeforce (STATS) system for payroll, replacing manual processes. Time and attendance require multi-level management approval, finalized by the Agency Head. Payroll is based on Notice of Personnel Action (NOPA) cost centers, updated annually with ERP codes. A dedicated Financial Analyst reconciles payroll costs, and a workflow ensures accurate NOPA listings for payroll purposes. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-022
Prior Year Finding Number: 2021-021
Compliance Requirement: Special Tests and Provisions - EBT Card Security

Program: U.S. Department of Agriculture
Government Department/Agency: Department of Human Services (DHS)

Supplemental Nutrition Assistance Program Cluster
(SNAP)

ALN: 10.551, 10.561

Award #: 4VI400408

Award Year: 10/01/20 - 09/30/21

10/01/21 - 09/30/22

Criteria - CFR Section 200.303, *Internal Controls*, Section (a) states DHS must establish and maintain effective internal control over federal awards that provides reasonable assurance that DHS is managing the federal awards in compliance with federal statutes, regulations, and terms and conditions of the federal award. Management is responsible for establishing and maintaining a system of internal control that should include controls over its EBT Card Security process.

Per 7 CFR Section 274.8(b)(3), System Security, as an addition to or component of the Security Program required of Automated Data Processing (ADP) Systems, the State or Territory agency shall ensure that a certain electronic benefits transfer (EBT) security requirements are established. As such, DHS is required to maintain adequate security over, and documentation/records for EBT cards, to prevent their theft, embezzlement, loss damage, destruction, unauthorized transfer, negotiation, or use.

Condition - DHS contracted with Fidelity National Information Service (FIS) for the issuance and security of the EBT cards; however, it is DHS' ultimate responsibility to ensure the contractor has controls in place to maintain adequate security over, and documentation/records of EBT cards.

We sampled 8 out of 24 monthly card reconciliations and found one (1) reconciliation with differences between new/replacements issued cards status report and the actual new/replacements cards issued. Specifically, we identified differences of 10 new cards and 6 replacement cards issued.

Further, we noted that internal controls identified did not appear to be operating at a level of precision to ensure compliance with the above-mentioned requirements.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of DHS' compliance with the specified requirements using a statistically valid sample. The reconciliations sampled reported 535 new cards and 1,436 replacement cards issued.

Effect - Without adequate internal controls to ensure compliance with EBT card security requirements, there is an increased risk that the inventory of EBT cards will not be properly maintained and accounted for which can lead to noncompliance with laws, regulations, and the provision of the grant agreement.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Cause - DHS does not appear to have adequate policies and procedures in place to ensure adequate safeguarding and documentation of EBT cards.

Recommendation - We recommend that DHS strengthen formal policies and procedures to maintain adequate security, documentation, and records over EBT Cards to ensure internal controls over EBT cards security are operating effectively.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. A Standard Operating Procedures and Procedures (SOPP) document is being developed to outline the EBT Reconciliation process. Additionally, a Director of Support Services will be hired to oversee and review all reports. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-023
Prior Year Finding Number: N/A
Compliance Requirement: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities

Program:
U.S. Department of Agriculture

Government Department/Agency:
Department of Education (VIDE)

Child Nutrition Cluster
ALN: 10.555, 10.559, 10.582
Award #: 4V1300308
Award Period: 10/01/2021 - 9/30/2022

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires the non-federal entities receiving Federal awards (1.e., auditee management) establish and maintain internal control designed to reasonable ensure compliance with Federal statutes, regulations, and other terms and conditions of the Federal Award. Management is responsible for establishing and maintaining a system of internal control that should include controls over its activities allowed or unallowed, allowable cost/cost principal process.

CFR 200.403(g) states that for costs to be allowed under federal awards, they must be adequately documented. Additionally, salaries and wages charged to Federal awards are subject to the standards of documentation as described by 2 CFR Section 200.430(i) and must be based on records that accurately reflect the work performed. These records must:

- Be incorporated into the organization's official records.
- Reasonably reflect the total activity for which the employee is compensated across all grant-related and non-grant related activities (100%); and
- Support the distribution of employee salary across multiple activities or cost objectives.

Condition - During our testing of allowable costs for payroll expenditures incurred throughout the year, we sampled and selected 11 of 104 payroll disbursements and noted the following:

- 11 instances where the approved timesheet for the pay period selected was not available for review.
- 11 instances where VIDE did not provide support that time and effort is charged in accordance with A-87 requirements.
- 4 instances where the NOPA provided did not include any evidence that the employee was approved to be federally reimbursed for the project code utilized in the payroll register.
- One instance where the project code on the approved NOPA did not agree with the project code utilized on the payroll register.
- 7 instances where the payroll register did not include and employee's retirement and health insurance benefits for the pay period selected.
- One instance where the employee's pay rate in the approved NOPA provided did not agree with the pay rate in the payroll register.

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- One instance where the payroll register did not show any hours worked by the employee for the pay period selected.

Questioned Costs - None.

Context - This is a condition identified per review of VIDE's compliance with the specified requirements using a statistically valid sample. The total payroll expenditures charged to the program in fiscal year 2022 were \$205,418. The amount sampled is \$22,738. The known amount of the instances of inconsistent funding allocation is \$22,738.

Effect - An ineffective control system related to review of transactions to ensure that only allowable costs are allocated to federal programs can lead to noncompliance with federal statutes, regulations, and the provisions of grant agreements that could ultimately lead to disallowed costs for the major programs.

Cause - VIDE does not appear to have adequate policies and procedures to ensure compliance with applicable cost principles and ensure that an appropriate level of review and approval was completed prior to charging costs to a federal program.

Recommendation - We recommend that VIDE reevaluate and improve internal controls to ensure adherence to federal regulations related to the fiscal administrative requirement for expending and accounting for payroll and to ensure proper and accurate funding allocation of payroll cost.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-024
Prior Year Finding Number: 2021-022
Compliance Requirement: Cash Management

Program:
U.S. Department of Agriculture

Government Department/Agency:
Department of Health (DOH)

Special Supplemental Nutrition Program for Women,
Infants, and Children (WIC)
ALN: 10.557
Award #: Various
Award Year: Various

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We sampled and selected 60 out of 319 drawdowns and noted that all 60 drawdown requests did not contain evidence of review and approval.

Questioned Costs - None.

Context - This is a condition identified per review of the DOH's compliance with the specified requirements using a statistically valid sample. Total drawdown requests were \$3,870,825. The amount sampled is \$1,275,356.

Effect - Without proper review and oversight drawdowns may not be in compliance with the CMIA Agreement and cash management compliance requirements.

Cause - It appears that policies and procedures, including review over cash management transactions, were not functioning as intended.

Recommendation - We recommend that the DOH reevaluate its policies and procedures to ensure proper monitoring and continue to be vigilant in following internal procedures over reviews and authorizations.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Health (DOH) will update drawdown Standard Operating Procedures (SOPs) for Fiscal Year 2025 to require signatures or initials on all supporting documents, certifying proper review. This updated procedure will be included in Federal Grants training in December 2024 and made accessible on the Business Process Improvement SharePoint site. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-025
Prior Year Finding Number: N/A
Compliance Requirement: Period of Performance

Program:
U.S. Department of Agriculture

Government Department/Agency:
Department of Health (DOH)

Special Supplemental Nutrition Program for Women,
Infants, and Children (WIC)
ALN: 10.557
Award #: Various
Award Year: Various

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Additionally, a non-federal entity may charge to the Federal award, allowable costs incurred during the period of performance and any costs incurred before the Federal awarding agency or pass-through entity made the Federal award, only to the extent that they would have been allowable if incurred after the date of the Federal award and only with the written approval of the Federal awarding agency.

Condition - We sampled and selected 73 out of 909 transactions and noted 32 transactions that were charged to an internal project code associated with a grant that ended on 9/30/21 but were incurred after 10/1/21. Upon further investigation, it was determined that such transactions were charged to the incorrect internal project code but were not ultimately drawn down from the 2021 grant associated with the internal project code. Such costs incurred after 10/1/21 were ultimately drawn down from a grant ending on 9/30/22.

Additionally, we analyzed each open grant award and compared the Federal award to award-to-date expenditures according to the internal project codes through September 30, 2022. For the grants noted above, according to the internal project code accounting, we noted \$1,355,231 of spending above the total federal award.

As a result, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the period of performance compliance requirement.

Questioned Costs - None.

Context - This is a condition identified per review of DOH's compliance with the specified requirements using a statistically valid sample. Total amount of expenditures charged to the program was \$4,560,676. Total amount sampled is \$2,951,525. The total amount of the exceptions is \$157,215.

Effect - Failure to properly review and support expenditures can result in noncompliance with laws and regulations along with loss of funding.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Cause - DOH does not appear to have adequate policies and procedures in place to ensure compliance with applicable period of performance stipulations.

Recommendation - We recommend that DOH strengthen its process with respect to setting up and charging expenditures between various grant awards. We also recommend that DOH enhance its review process to properly determine the activities of each grant relative to the appropriate period of performance.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-026
Prior Year Finding Number: N/A
Compliance Requirement: Allowable Costs/Cost Principles - Payroll Activities and Period of Performance

Program:

U.S. Department of Defense

Government Department/Agency:

Office of the Adjutant General
(OTAG)

National Guard Military Operations and Maintenance
(O&M) Projects

ALN: 12.401

Award #: W9127P-22-2, W9127P-21-2

Award Year: 10/01/2020 - 09/30/2021

10/01/2021 - 09/30/2022

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Additionally, a non-federal entity may charge to the Federal award, allowable costs incurred during the period of performance and any costs incurred before the Federal awarding agency or pass-through entity made the Federal award, only to the extent that they would have been allowable if incurred after the date of the Federal award and only with the written approval of the Federal awarding agency.

Condition - We sampled and selected 60 out of 597 payroll transactions and noted the following:

- Eleven (11) instances where the employees' payroll costs were charged to prior year grant projects that had not been extended or approved.
- One (1) instance where there was no evidence of approval of an employee's timesheet.
- Seven (7) instances where the timesheet for the pay period selected was not provided.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the allowable costs/cost principles and period of performance compliance requirements.

Questioned Costs - None.

Context - This is a condition identified per review of OTAG's compliance with the specified requirements using a statistically valid sample. The total amount of payroll expenditures charged to the program during fiscal year 2022 were \$1,812,537 and the total amount of our sample was \$252,320. The known amount of the exceptions amounted to \$97,989.

Effect - OTAG is not in compliance with the stated provisions. Failure to properly review and support expenditures can result in noncompliance with laws and regulations along with loss of funding.

Cause - OTAG does not appear to have adequate policies and procedures in place to ensure compliance with applicable cost principles and the required period of performance stipulations.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that OTAG improve internal controls to ensure adherence to Federal regulations related to the fiscal and administrative requirements for expending and accounting for payroll expenditures. We also recommend that OTAG enhance its review process to properly determine the activities of each grant relative to the appropriate period of performance.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. OTAG enhanced internal controls by implementing a dual timesheet system manual and electronic to verify employee hours. Updated policies ensure payroll process validation, supported by an Employee Relations Coordinator. The Director of Administration certifies, and the Agency Head approves payroll activities based on cost principles. OTAG is refining the grant review process for performance periods. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-027
Prior Year Finding Number: N/A
Compliance Requirement: Cash Management and Reporting

Program: U.S. Department of Defense
Government Department/Agency: Office of the Adjutant General (OTAG)

National Guard Military Operations and Maintenance (O&M) Projects
ALN: 12.401
Award #: W9127P-22-2, W9127P-21-2
Award Year: 10/01/2020 - 09/30/2021
10/01/2021 - 09/30/2022

Criteria - U.S. Department of the Treasury (Treasury) regulations at 31 CFR Part 205 implement the Cash Management Improvement Act of 1990 (CMIA), as amended (Pub. L. No. 101-453; 31 USC 6501 et seq.). Subpart A of those regulations requires state recipients to enter into Treasury-State Agreements that prescribe specific methods of drawing down federal funds (funding techniques) for federal programs listed in the Assistance Listing that meet the funding threshold for a major federal assistance program under the CMIA. Treasury-State Agreements also specify the terms and conditions under which an interest liability would be incurred.

Each State or Territory must file various financial, programmatic, and special reports. Additionally, the requirements necessitate that all submitted reports should be supported by the underlying performance records and presented in accordance with program requirements. SF-270, *Request for Advance or Reimbursement Report*, is required to be filed in connection with cash drawdowns.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires the non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonable ensure compliance with Federal statutes, regulations, and other terms and conditions of the Federal Award.

Condition - We were unable to verify the completeness of the SF-270 (cash management and reporting) population. As a result, we were unable to test compliance and internal controls over compliance related to the cash management and reporting compliance requirements.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of OTAG's compliance with the specified requirements and general compliance principles.

Effect - OTAG is not in compliance with the stated provisions. Inaccurate information may have been reported to the Federal government in the absence of required reconciliations and reviews.

Cause - It appears that policies and procedures, including review over cash management transactions, were not functioning as intended.

Recommendation - We recommend that OTAG reevaluate its policies and procedures to ensure proper monitoring and continue to be vigilant in following internal procedures over reviews and authorizations.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. OTAG could not complete the SF-270 report for Fiscal Year 2022. However, it developed a Policies and Procedures Manual for FY2023 and hired a Reimbursement Specialist to ensure separation of duties in financial reporting. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-028
Prior Year Finding Number: N/A
Compliance Requirement: Matching, Level of Effort, Earmarking

Program: U.S. Department of Defense
Government Department/Agency: Office of the Adjutant General (OTAG)

National Guard Military Operations and Maintenance (O&M) Projects
ALN: 12.401
Award #: W9127P-22-2, W9127P-21-2
Award Year: 10/01/2020 - 09/30/2021
10/01/2021 - 09/30/2022

Criteria - According to the Master Cooperative Agreement Section 303, *Cost Sharing*, cost sharing requirements are found in a grantees individual Cooperative Agreements. The Government has various cost-sharing requirements within their Cooperative Agreements.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires the non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonable ensure compliance with Federal statutes, regulations, and other terms and conditions of the Federal Award.

Condition - OTAG was unable to readily exhibit and provide its computation of the matching calculation or provide evidence that it was monitoring compliance with said requirement. Therefore, we were unable to determine if the matching requirement has been met or if the expenditures being claimed towards the matching requirement are allowable activities/costs.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the matching compliance requirement.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of OTAG's compliance with the specified requirements and general compliance principles.

Effect - OTAG is not in compliance with the stated provisions.

Cause - OTAG does not appear to have adequate policies and procedures in place to ensure complete compliance with the matching requirement.

Recommendation - We recommend that OTAG deploy resources that are given the responsibility to ensure periodic monitoring and compliance of the matching requirement throughout the fiscal year.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. OTAG updated their policies and procedures manual to include tracking match fulfillment for each expenditure. The master cooperative agreements, through appendices, identifies cost share and requirements for management functions. Procedures are updated annually to reflect any changes. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-029
Prior Year Finding Number: N/A
Compliance Requirement: Period of Performance

Program:

U.S. Department of Defense

Government Department/Agency:

Office of the Adjutant General
(OTAG)

National Guard Military Operations and Maintenance
(O&M) Projects

ALN: 12.401

Award #: W9127P-22-2, W9127P-21-2

Award Year: 10/01/2020 - 09/30/2021

10/01/2021 - 09/30/2022

Criteria - National Guard Bureau O&M cooperative agreements (CA) are funded with one-year appropriations. By policy, only state costs obligated during the period of the federal fiscal year or period of performance identified in the CA are reimbursable. (National Guard Regulation (NGR) 5-1, chapters 3 and 11)

The recipient shall not request reimbursement for any expenditure it made before the date that all required parties execute the Master Cooperative Agreement (MCA) unless the United States Property & Fiscal Officer (USPFO) expressly authorizes expenditures made during the funding period, but prior to the date of final signature, the parties may also agree on a specific start or effective date (NGR 5-1, Chapter 11).

Within 90 days after the end of the federal fiscal year or upon termination of the CA, whichever is earlier, the recipient shall promptly deliver to the USPFO a final accounting of all funding and disbursements under the agreement for the fiscal year (NGR 5-1, Chapter 11).

If unliquidated claims and undisbursed obligations arising from the recipient's performance of the CA will remain 90 days after the close of the federal fiscal year, the recipient shall provide a detailed listing of uncleared obligations and a projected timetable for their liquidation and disbursement no later than 31 December. The USPFO shall then set an appropriate new timetable for the recipient to submit its final accounting (NGR 5-1, Chapter 11).

Costs incurred in a federal fiscal year, which are not disclosed by the recipient within 90 days of the end of the federal fiscal year, except costs associated with unliquidated claims and undisbursed obligations arising from the recipient's performance of the CA that the recipient has reported, shall not be eligible for reimbursement by NGB. The USPFO may extend the 90-day limit for good cause shown (NGR 5-1, Chapter 11).

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires the non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonable ensure compliance with Federal statutes, regulations, and other terms and conditions of the Federal Award.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Condition - We sampled and selected 126 out of 600 transactions and noted the following:

- Five (5) instances where transactions were charged to the incorrect grant award.
- Forty-four (44) instances where the transaction was paid outside the liquidation period.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the allowable costs/cost principles and period of performance compliance requirements.

Questioned Costs - \$416,938.

Context - This is a condition identified per review of OTAG's compliance with the specified requirements using a statistically valid sample. The total amount expenditures subject to sampling were \$1,301,606 and the total amount of our sample was \$858,928. The known amount of the exceptions amounted to \$416,938.

Effect - OTAG is not in compliance in compliance with the stated provisions. Failure to properly review and support expenditures can result in noncompliance with laws and regulations along with loss of funding.

Cause - OTAG did not appear to have adequate policies and procedures in place to ensure compliance with the required period of performance stipulations.

Recommendation - We recommend that OTAG strengthen its processes with respect to setting up and charging expenditures between various grant awards. We also recommend that OTAG enhance its review process to properly determine the activities of each grant relative to the appropriate period of performance.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. OTAG updated policies and procedures to manage pre-award costs, scope of work, and vendor payouts, ensuring compliance with the 90-day closeout process. They are training new personnel and actively monitoring implementation. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-030
Prior Year Finding Number: 2021-025
Compliance Requirement: Cash Management

Program:
U.S. Department of the Interior

Government Department/Agency:
Various

Economic, Social, and Political Development of the
Territories
ALN: 15.875
Award #: Various
Award Year: Various

Criteria - US Department of the Treasury (Treasury) regulations at 31 CFR Part 205 implement the Cash Management Improvement Act of 1990 (CMIA), as amended (Pub. L. No. 101-453; 31 USC 6501 et seq.). Subpart A of those regulations requires state recipients to enter into Treasury-State Agreements that prescribe specific methods of drawing down federal funds (funding techniques) for federal programs listed in the Assistance Listing that meet the funding threshold for a major federal assistance program under the CMIA. The CMIA agreement for this program stipulates a reimbursement method with 7-day clearance.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We reviewed 12 out of 59 drawdowns and noted 1 instance where the drawdown was made in advance and did not adhere to the reimbursement method in the CMIA Agreement.

Further, we noted that internal controls were not operating at a level of precision to ensure compliance with the cash management compliance requirements. This includes 9 instances where the journal entry to record the cash receipt was reviewed and approved by unauthorized individuals.

Questioned Costs - None.

Context - This is a condition identified per review of the Government's compliance with the specified requirements using a statistically valid sample. Total fiscal year 2022 drawdown requests were \$7,577,962. Total amount sampled is \$5,547,527. The amount of the drawdown made in advance is \$741,450.

Effect - The Government is not in compliance with the stated provisions.

Cause - It appears that policies and procedures, including review over cash management transactions, were not functioning as intended.

Recommendation - We recommend that the Government reevaluate its policies and procedures to ensure proper monitoring and continue to be vigilant in following internal procedures to ensure compliance with stated provisions.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government of the Virgin Islands (GVI) is enacting reforms to enhance financial accountability and internal controls. An Executive Order directs CFOs of the Government agencies to report to the Department of Finance, streamlining oversight. Introduction of new Public Finance Policy is an important step to standardize procedures, ensuring compliance with Cash Management regulations to maintain transparency and minimize financial risks. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-031
Prior Year Finding Number: 2021-026
Compliance Requirement: Equipment and Real Property Management

Program: U.S. Department of the Interior
Government Department/Agency: Various

Economic, Social, and Political Development of the Territories
ALN: 15.875
Award #: Various
Award Year: Various

Criteria - Per 2 CFR section 200.313, *Equipment*, property records must be maintained that include a description of the property, a serial number or other identification number, the source of property, who holds title, the acquisition date, cost of the property, percentage of Federal participation in the cost of the property, the location, use and conditions of the property, and any ultimate disposition data including the date of disposal and sale price of the property.

Further, a physical inventory of equipment should be taken at least once every 2 years and reconciled to the equipment records along with the usage of an appropriate control system to safeguard and maintain equipment.

Additionally, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - The Government's Department of Property and Procurement (DPP) maintains the equipment register for the Government. DPP was unable to provide an accurate and complete property records which met the stated requirements. Further, no physical inventory was taken in fiscal year 2022.

Further, we noted that internal controls were not operating at a level of precision to ensure compliance with the equipment management compliance requirements.

Questioned Costs - None.

Context - This is a condition identified per review of the Government's compliance with the specified requirements. Equipment purchased in 2022 totaled \$3,007,762.

Effect - There is a risk that inadequate recordkeeping of equipment could lead to misappropriation of assets and noncompliance with Federal regulations resulting in a return of Federal awards received.

Cause - The Government does not appear to have a process in place to adequately monitor equipment acquired with Federal funds.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that DPP improve internal controls to ensure adherence to Federal regulations related to equipment and its related maintenance. There should be timely coordination and communication amongst all Government departments and/or agencies that are responsible for handling and managing such assets.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Asset Management Division (AMD) adheres to Federal equipment guidelines. Assets are tagged, and records are created using the Tyler Munis Resource Planning system (ERP). In 2022, AMD inventoried four agencies, ensuring compliance with Federal regulations. The completed Standard Operation Policies and Procedures (SOPP) are pending approval, crucial for enhancing internal controls. Training sessions for fixed assets employees are planned, and additional staff will be needed to support the initiative effectively. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-032
Prior Year Finding Number: N/A
Compliance Requirement: Procurement and Suspension and Debarment

Program: U.S. Department of the Interior
Government Department/Agency: Various

Economic, Social, and Political Development of the Territories
ALN: 15.875
Award #: Various
Award Period: Various

Criteria - When procuring property and services, states must use the same policies and procedures they use for procurements from their non-federal funds (2 CFR section 200.317).

Per Procurement Manual, User Agencies are required to submit a written justification letter to the Government's Department of Property and Procurement (DPP), which was signed by the agency head, which explains the need for the services, the exception in title 31, Virgin Islands Code, chapter 23, section 239(a) being relied upon, the methodology for the selection process, and the rationale for selecting the prospective contractor. The letter must identify the funding source and comply with all other requirements necessary for the acquisition of services under title 31, Virgin Islands Code, chapter 23, sections 239(a) (1), (2) or (3) whichever is applicable. The letter must contain an "approve/disapprove" block for the Commissioner of Property and Procurement.

Additionally, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - In our review of 11 out of 77 procurement transactions, we noted 5 procurement transactions did not contain sufficient supporting documentation to validate adherence to procurement policy. One procurement did not contain a justification letter for emergency purchases. Four procurements did not include the following:

- Contract file documents showing the significant history of the procurement, including the rationale for the method of procurement, selection of contract type, contractor selection or rejection, and the basis of contract price.
- The procurement provides full and open competition.
- Documentation in support of the rationale to limit competition in those cases where competition was limited and ascertain if the limitation was justified.
- Cost or price analysis in connection with procurement action, including contract modifications and that this analysis supported the procurement action.

Further, we noted that internal controls were not operating at a level of precision to ensure compliance with the procurement compliance requirements.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Questioned Costs - None.

Context - This is a condition identified per review of DPP's compliance with the specified requirements using a statistically valid sample. Total amount of procurement transactions was \$8,984,016. Total amount sampled was \$3,455,217. The known amount of exceptions is \$2,424,927.

Effect - DPP could inadvertently contract or make sub-awards to parties that are suspended or debarred from doing business with the Federal government as well as award contracts to vendors whose contract prices are unreasonable. In addition, contracts may be executed to unqualified vendors.

Cause - DPP does not appear to have a process in place to adequately monitor and maintain completed contract files comprising of all supporting documents.

Recommendation - We recommend that DPP improve internal controls to ensure adherence to federal regulations relating to the procurement of goods and services and review current records retention policies. There should be timely coordination and communication amongst all Government departments and/or agencies that are responsible for handling and managing procurement tasks.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government updated its procurement laws and issued revised manuals, along with position-specific Standard Operating Procedures. Processes to enforce internal controls and ensure adherence to procurement laws have been established and are regularly reinforced. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-033
Prior Year Finding Number: 2021-027
Compliance Requirement: Reporting

Program:

U.S. Department of the Interior

Government Department/Agency:

Various

Economic, Social, and Political Development of the
Territories

ALN: 15.875

Award #: Various

Award Year: Various

Criteria - Each State or Territory must file various financial, programmatic, and special reports. Additionally, the requirements necessitate that all submitted reports should be supported by the underlying performance records and presented in accordance with program requirements.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We sampled and selected 14 out of 134 financial and performance reports and noted the following:

- 5 financial reports and 5 performance reports were not available for review.
- 2 financial reports and 2 performance reports where sufficient supporting documentation were not available to validate that the respective financial information agreed with the underlying records.
- 1 financial report and 1 performance progress report where the report was reviewed by an individual other than authorized reviewer.
- 1 performance report that was submitted 305 days late.

Additionally, the Government did not submit FFATA reports where subawards were made for more than \$30,000 for fiscal year 2022.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the reporting compliance requirements.

Questioned Costs - None.

Context - This is a condition identified per review of the Government's compliance with the specified requirements using a statistically valid sample.

Effect - The Government is not in compliance with the stated provisions and inaccurate information may have been reported to the Federal government.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Cause - It appears that policies and procedures, including review over reporting procedures were not functioning as intended. Further, the Government does not have adequate control over maintenance of the underlying documentation used in preparing various reports.

Recommendation - We recommend that Government reevaluate its policies and procedures to ensure proper retention, monitoring, and review of the required reports by an appropriate official who would ensure that information submitted is complete, accurate, consistent, and submitted within the required timeframe.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government plans a high-level review of internal control policies and closely monitoring reports for completeness, accuracy, timeliness, and consistency with Cognizant Agency guidelines. An analyst will be assigned to track reporting schedules, oversee grant activity, and manage document storage, ensuring timely submission of all required reports for each grant award. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-034
Prior Year Finding Number: 2021-028
Compliance Requirement: Activities Allowed or Unallowed

Program: U.S. Department of Labor
Government Department/Agency: Department of Labor (VIDOL)

Unemployment Insurance
ALN: 17.225
Award #: Various
Award Period: Various

Criteria - In accordance with the Uniform Guidance in 2 CFR Section Part 200, a State or Territory must adopt its own written fiscal and administrative requirements for expending and accounting for all funds, which are consistent with the provisions of Uniform Guidance and extend such policies to all sub-recipients. These fiscal and administrative requirements must be sufficiently specific to ensure that: funds are used in compliance with all applicable Federal statutory and regulatory provisions, costs are reasonable and necessary for operating these programs, and funds are not used for general expenses required to carry out other responsibilities of a State or Territory or its sub-recipients.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - VIDOL was unable to provide reconciled accounting information relating to the majority of the Unemployment Insurance Trust Fund accounts. As such, we are unable to conclude on the fiscal and administrative requirements with respect to expending and accounting for all funds related to the Unemployment Insurance program.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the above referenced compliance requirement.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of VIDOL's compliance with the specified requirements.

Effect - Accounting tasks, such as periodic reconciliations, play a key role in proving the accuracy of accounting data and information included in various interim financial statements and/or Federal reports. A lack of timely preparation of complete and accurate reconciliations results in the absence of adequate control over both cash receipts and disbursements.

Cause - VIDOL does not appear to have adequate policies and procedures in an effort to adequately administer the expending and accounting for all funds.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that VIDOL improve internal controls to ensure adherence to Federal regulations related to the fiscal and administrative requirements for expending and accounting for all funds. In order to prevent significant errors in the financial records as well as prevent possible irregularities, including fraud, to exist and continue without notice, we recommend that all accounts, accruals, and reconciliations be reviewed on a periodic basis.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDOL acknowledges the auditor's finding regarding balance discrepancies with the general ledger, attributed to an incomplete file for audit. To prevent future issues, VIDOL updated the report writer for balance queries and issued a proposal for a contractor to install a Trust Fund accounting system. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-035
Prior Year Finding Number: 2021-029
Compliance Requirement: Eligibility

Program:

U.S. Department of Labor

Government Department/Agency:

Department of Labor (VIDOL)

Unemployment Insurance

ALN: 17.225

Award #: Various

Award Period: Various

Criteria - Public Law 112-96 Sec. 2101 requires that as a condition of eligibility for regular compensation, a claimant must be able to work, available to work, legally authorized to work in the United States and actively seeking work. Claimants must meet other conditions of eligibility for Pandemic Unemployment Assistance (PUA), Pandemic Emergency Unemployment Compensation (PEUC) and Federal Pandemic Unemployment Compensation (FPUC).

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-Federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We sampled and selected 60 out of 19,227 unemployment claim files and noted the following:

- 7 instances where VIDOL was not able to provide evidence that the claimant met the criteria for participating in the UI program but had received benefits during the year.
- 1 instance where VIDOL was not able to provide evidence of UI interviewer eligibility assessment.
- 3 instances where VIDOL was not able to provide evidence that the claimant is legally authorized to work in the United States.

Further, it appears internal controls were not designed to ensure documentation is maintained for the proper time period to substantiate claims charged to the program.

Questioned Costs - \$34,076.

Context - This is a condition identified per review of VIDOL's compliance with the specified requirements using a statistically valid sample. Total amount of unemployment claims charged to the program during fiscal year were \$36,406,202. Total amount sampled is \$187,107. The known amount of the exceptions is \$34,076.

Effect - Noncompliance with program requirements could result in disallowances of costs and participants could be receiving benefits that they are not entitled to receive.

Cause - VIDOL does not appear to have adequate policies and procedures in place to ensure a consistent and systematic review of the data in its claimant files.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that VIDOL reevaluate its policies and procedures to ensure proper maintenance and retention of complete program files and confirming that only eligible participants are receiving benefits they are entitled to.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The agency is reviewing retention policies and training staff on systematic record-keeping. In 3rd Qtr. of FY2025, an electronic record-keeping system for claims files will be launched, enhancing record retention. VIDOL staff will collaborate with USDOL for technical assistance and data validation to ensure eligibility and record maintenance. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-036
Prior Year Finding Number: 2021-030
Compliance Requirement: Reporting

Program:

U.S. Department of Labor

Government Department/Agency:

Department of Labor (VIDOL)

Unemployment Insurance

ALN: 17.225

Award #: Various

Award Period: Various

Criteria - Each State or Territory must file various financial, programmatic, and special reports. Additionally, the requirements necessitate that all submitted reports should be supported by the underlying performance records and presented in accordance with the program requirements.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-Federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We sampled and selected 28 out of 100 financial, performance and special reports required to be submitted. We noted the following:

- 3 reports (2 ETA-9050 and 1 ETA-9052) did not have any supporting information available to review.
- 1 report (ETA-9052) did not contain evidence of review and approval.
- 8 reports (2 ETA-9050, 2 ETA-9052 and 4 ETA-9055) where information reported did not agree with the underlying records.

Further, it appears internal controls were not designed to ensure documentation is maintained for the proper time period to substantiate reports submitted to the Federal government.

Questioned Costs - None.

Context - This is a condition identified per review of VIDOL's compliance with the specified requirements using a statistically valid sample.

Effect - VIDOL is not in compliance with the stated provisions and inaccurate information may have been reported to the Federal government.

Cause - It appears that policies and procedures, including review over reporting procedures were not functioning as intended. Further, VIDOL does not appear to have adequate control over maintenance of the underlying documentation used in preparing various report.

Recommendation - We recommend that VIDOL reevaluate its policies and procedures to ensure proper retention, monitoring, and review of the required reports by the appropriate official who would ensure that information reported is complete, accurate, consistent, and submitted within the required timeframe.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDOL received a federal grant from USDOL to update and redesign the UI reporting and accounting system. This grant aims to rebuild the reporting structure for complete, accurate, and timely processes. VIDOL has begun preparing the scope of works for the projects, with completion anticipated by 4th Qtr. of FY2026. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-037
Prior Year Finding Number: 2021-031
Compliance Requirement: Special Tests and Provisions - Employer Experience Rating

Program: U.S. Department of Labor
Government Department/Agency: Department of Labor (VIDOL)

Unemployment Insurance
ALN: 17.225
Award #: Various
Award Period: Various

Criteria - Per 2 CFR section 200.303(a), a nonfederal entity must establish and maintain effective internal control over the federal award that provides reasonable assurance that the nonfederal entity is managing the federal award in compliance with federal statutes, regulations, and the terms and conditions of the federal award. These internal controls should comply with the guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States or the “Internal Control-Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).

Certain benefits accrue to states and employers as a result of the state having a federally approved experience-rated UI tax system. All states currently have an approved system. For the purpose of proper administration of the system, the SWA maintains accounts, or subsidiary ledgers, on state UI taxes received or due from individual employers, and the UI benefits charged to the employer.

The employer’s “experience” with the unemployment of former employees is the dominant factor in the SWA computation of the employer’s annual state UI tax rate. The computation of the employer’s annual tax rate is based on state UI law (26 USC 3303).

Condition - We tested 60 of 5,381 employer tax remittances and found the employer tax rate to be accurate and applied appropriately in all instances. However, we were unable to determine if the population subject to testing is complete. We found the total taxes collected by employer according to VIDOL systems does not reconcile to the total taxes collected in the general ledger of the Government of the Virgin Islands. Out of total taxes collected by employer of \$19,203,630, we found a variance of \$177,714 to the General Ledger.

Further, it appears internal controls were not designed to ensure compliance with the employer experience rating compliance requirement.

Questioned Costs - None.

Context - This is a condition identified per review of VIDOL’s population completeness over the compliance requirements of the program.

Effect - VIDOL did not comply with the employer experience rating compliance requirements of the program.

Cause - VIDOL does not appear to have adequate policies and procedures in place to ensure compliance with applicable requirements, and maintenance of underlying documentation.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that VIDOL improve its existing internal controls and procedures over maintenance of appropriate documentation to ensure compliance with Federal regulations related to employer experience rating.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDOL acknowledges the auditor's finding regarding balance discrepancies with the general ledger, attributed to an incomplete file for audit. To prevent future issues, VIDOL updated the report writer for balance queries and issued a proposal for a contractor to install a Trust Fund accounting system. This system aims to correct accounting deficiencies, improve operations, and ensure accurate account balances. It will facilitate accrual, month-end, and year-end system closes, with trained personnel managing postings and ledger balances. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-038
Prior Year Finding Number: 2021-033
Compliance Requirement: Special Tests and Provisions - UI Reemployment Programs (WPRS and RESEA)

Program:

U.S. Department of Labor

Government Department/Agency:

Department of Labor (VIDOL)

Unemployment Insurance

ALN: 17.225

Award #: Various

Award Period: Various

Criteria - The UI program serves as one of the principal “gateways” to the workforce system. It is often the first workforce program accessed by individuals who need workforce services. The WPRS and RESEA programs service as UI’s primary programs that facilitate the reemployment needs of UI claimants.

RESEA is authorized by Section 306 of the Social Security Act and builds on the success of both WPRS and RESEA’s predecessor, the former UI Reemployment and Eligibility Assessment (REA) program. RESEA uses an evidence-based integrated approach that combines an eligibility assessment for continuing UI eligibility and the provision of reemployment services. RESEA is a voluntary program and under certain circumstances may be designed to also satisfy WPRS requirements. Operating guidance for the RESEA program is updated annually. UIPL 7-19 provides RESEA operating guidance for FY 2019.

Per 2 CFR section 200.303(a), a nonfederal entity must establish and maintain effective internal control over the federal award that provides reasonable assurance that the nonfederal entity is managing the federal award in compliance with federal statutes, regulations, and the terms and conditions of the federal award. These internal controls should comply with the guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States or the “Internal Control-Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).

Condition - During our testing of VIDOL’s compliance with UI Reemployment Programs, we found VIDOL did not submit the 9129 Quarterly RESEA reports.

Further, it appears controls are not designed to ensure the timely and proper submission of required reports.

Questioned Costs - None.

Context - This is a condition identified per review of VIDOL’s compliance with the specified requirements.

Effect - It appears that policies and procedures, including review over reporting procedures were not functioning as intended.

Cause - VIDOL does not appear to have adequate control over maintenance of the underlying documentation used in preparing various report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that VIDOL reevaluate its policies and procedures to ensure proper retention, monitoring, and review of the required reports by the appropriate official who would ensure that information reported is complete, accurate, consistent, and submitted within the required timeframe.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDOL is implementing a RESEA case management system for reporting and program services, currently in the configuration phase. This system will serve as the official system for documenting all services provided to RESEA claimants participating in the program. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-039
Prior Year Finding Number: N/A
Compliance Requirement: Period of Performance

Program:

U.S. Department of Treasury

Government Department/Agency:

Office of Management and Budget (OMB)

COVID-19 - Coronavirus Relief Fund

ALN: 21.019

Award #: N/A

Award Period: 03/01/2020 - 12/31/2021

Criteria - The CARES Act provides that payments from the Coronavirus Relief Fund (CRF) may only be used to cover costs that were incurred during the period that begins on March 1, 2020 and ends on December 31, 2021. All such obligations would need to be liquidated by September 30, 2022. (Section 601(d)(3) of the Social Security Act (42 U.S.C. 801(d)(3)), as added by section 5001 of the CARES Act and as amended by section 1001 of Division N of the Consolidated Appropriations Act, 2021)

In “Revision to Guidance Regarding When a Cost is Considered Incurred, December 14, 2021” Treasury revised the guidance to provide that a cost associated with a necessary expenditure incurred due to the public health emergency shall be considered to have been incurred by December 31, 2021, if the recipient has incurred an obligation with respect to such cost by December 31, 2021. Treasury defines obligation for this purpose consistently with the Uniform Guidance definition in 2 C.F.R. 200.1 as an order placed for property and services and entry into contracts, subawards, and similar transactions that require payment.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - During our testing of 12 expenditures sampled of a population of 53, we found 3 expenditures that were not incurred within the period of performance.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the compliance requirements.

Questioned Costs - \$45,300.

Context - This is a condition identified per review of OMB’s compliance with the specified requirements using a statistically valid sample. The total amount of non-payroll disbursements totaled \$5,277,012. The total amount sampled was \$4,636,495.

Effect - OMB is not in compliance with the stated provisions. Failure to properly review and support expenditures can result in noncompliance with laws and regulations along with loss of funding.

Cause - OMB does not appear to have adequate policies and procedures in place to ensure compliance with the period of performance compliance requirements.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that OMB strengthen its process with respect to incurring and charging expenditures. We also recommend that OMB enhance its review process to properly determine the activities of the grant relative to the appropriate period of performance.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Office of Management and Budget will collaborate with the Department of Finance to implement control measures designed to prevent the approval of transactions beyond the designated period of performance. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-040
Prior Year Finding Number: 2021-035
Compliance Requirement: Reporting

Program:

U.S. Department of Treasury

Government Department/Agency:

Office of Management and Budget (OMB)

COVID-19 - Coronavirus Relief Fund

ALN: 21.019

Award #: N/A

Award Period: 03/01/2020 - 12/31/2021

Criteria - Each prime recipient of Coronavirus Relief Funds shall provide a quarterly Financial Progress Report that contains COVID-19 related costs incurred during the covered period (the period beginning on March 1, 2020; and ending on December 31, 2021) to Treasury Office of Inspector General. Each prime recipient shall report this quarterly information mentioned above into the GrantSolutions portal. The prime recipient's quarterly Financial Progress Report submissions should be supported by the data in the prime recipient's accounting system.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We sampled and selected 3 out of the 5 quarterly reports submitted during the fiscal year and noted that OMB was unable to furnish underlying financial records to determine whether the 3 quarterly reports submitted were complete and accurate. Additionally, all 3 reports were not submitted in a timely manner, ranging from 7 to 14 days late.

Further, it appears internal controls were not designed to ensure documentation is maintained for the proper time period to substantiate reports submitted to the Federal government.

Questioned Costs - None.

Context - This is a condition identified per review of OMB's compliance with the specified requirements using a statistically valid sample.

Effect - Inaccurate reporting of financial information to the federal government can result in the use of inaccurate data by the federal government when making programmatic decisions.

Cause - It appears that internal controls, including management review of federal reports and underlying documentation were not properly designed.

Recommendation - We recommend that OMB reevaluate its policies and procedures to ensure proper retention, monitoring, and review of the required reports by an appropriate official who would ensure that information submitted is complete, accurate, consistent, and submitted within the required timeframe.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. An analyst will be designated to track reporting schedules, oversee grant activity, and store documents. This analyst will regularly monitor each grant award's reporting schedule to ensure timely submission of all required reports. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-041
Prior Year Finding Number: 2021-036
Compliance Requirement: Subrecipient Monitoring

Program:

U.S. Department of Treasury

Government Department/Agency:

Office of Management and Budget (OMB)

COVID-19 - Coronavirus Relief Fund

ALN: 21.019

Award #: N/A

Award Period: 03/01/2020 - 12/31/2021

Criteria - A pass-through entity (PTE) must:

Identify the Award and Applicable Requirements - Clearly identify to the subrecipient:

1. The award as a subaward at the time of subaward (or subsequent subaward modification) by providing the information described in 2 CFR section 200.331(a)(1);
2. All requirements imposed by the PTE on the subrecipient so that the federal award is used in accordance with federal statutes, regulations, and the terms and conditions of the award (2 CFR section 200.331(a)(2));
3. Any additional requirements that the PTE imposes on the subrecipient in order for the PTE to meet its own responsibility for the federal award (e.g., financial, performance, and special reports) (2 CFR section 200.331(a)(3)).

Evaluate Risk - Evaluate each subrecipient's risk of noncompliance for purposes of determining the appropriate subrecipient monitoring related to the subaward (2 CFR section 200.332(b)). This evaluation of risk may include consideration of such factors as the following:

1. The subrecipient's prior experience with the same or similar subawards;
2. The results of previous audits including whether or not the subrecipient receives single audit in accordance with 2 CFR Part 200, Subpart F, and the extent to which the same or similar subaward has been audited as a major program;
3. Whether the subrecipient has new personnel or new or substantially changed systems; and
4. The extent and results of federal awarding agency monitoring (e.g., if the subrecipient also receives federal awards directly from a federal awarding agency).

Monitor - Monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, complies with the terms and conditions of the subaward, and achieves performance goals (2 CFR sections 200.332(d) through (f)). In addition to procedures identified as necessary based upon the evaluation of subrecipient risk or specifically required by the terms and conditions of the award, subaward monitoring must include the following:

1. Reviewing financial and programmatic (performance and special reports) required by the PTE.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

2. Following-up and ensuring that the subrecipient takes timely and appropriate action on all deficiencies pertaining to the federal award provided to the subrecipient from the PTE detected through audits, on-site reviews, and other means.
3. Issuing a management decision for audit findings pertaining to the federal award provided to the subrecipient from the PTE as required by 2 CFR section 200.521.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We reviewed two sub-awards made during 2022 and found that OMB did not evaluate the risks or monitor the two subrecipients.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the subrecipient monitoring compliance requirements.

Questioned Costs - None.

Context - This is a condition identified per review of OMB's compliance with the specified requirements and general compliance principles. The total amount of expenditures passed through to subrecipients in fiscal year 2022 were \$4,500,000.

Effect - OMB is not in compliance with the stated provisions. Failure to properly monitor subrecipients can result in noncompliance with laws and regulations and failure to meet the programs objectives.

Cause - OMB does not have internal controls in place to properly monitor subrecipients to ensure adherence to applicable federal regulations, including expending federal awards for allowable expenditures.

Recommendation - We recommend that OMB implement policies, procedures, and controls to ensure subrecipients are monitored in accordance with federal statutes.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. OMB will establish a robust framework featuring detailed monitoring procedures, regular compliance checks, and comprehensive oversight mechanisms to ensure subrecipients adhere to federal requirements. This framework aims to promote accountability, proper use of federal funds, mitigate risks, enhance transparency, and ensure subrecipients effectively fulfill their obligations under federal statutes. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-042
Prior Year Finding Number: N/A
Compliance Requirement: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Non-Payroll Activities and Procurement and Suspension and Debarment

Program: U.S. Department of the Treasury
Government Department/Agency: Office of Management and Budget (OMB)

COVID-19 - Coronavirus State and Local Fiscal Recovery Funds
ALN: 21.027
Award #: N/A
Award Period: 03/03/2021 - 12/31/2024

Criteria - Recipients may use CSLFRF payments for any eligible expenses subject to the restrictions set forth in sections 602 and 603 of the Social Security Act as added by section 9901 of the American Rescue Plan Act of 2021 (codified as 42 USC 802 and 42 USC 803 respectively), Treasury's Interim Final Rule and Final Rule at 31 CFR sections 35.7 and 35.8.

The following activities are not permitted under CSLFRF:

- Offset a reduction in net tax revenue (applicable to states and territories)
- Deposits into pension funds (applicable to all recipients except Tribes)
- Debt service or replenishing financial reserves (e.g., "rainy day funds") (applicable to all recipients)
- Satisfaction of settlements and judgements (applicable to all recipients)
- Programs, services, or capital expenditures that include a term or condition that undermines efforts to stop the spread of COVID-19 (applicable to all recipients)

Recipients may use payments from CSLFRF to:

- Support public health expenditures, by funding COVID-19 mitigation efforts, medical expenses, behavioral healthcare, and certain public health and safety staff;
- Address negative economic impacts caused by the public health emergency, including economic harms to workers, households, small businesses, impacted industries, and the public sector;
- Replace lost public sector revenue to provide government services; recipients may use this funding to provide government services to the extent of the reduction in revenue experienced due to the pandemic.
- Provide premium pay for essential workers, offering additional support to those who have borne and will bear the greatest health risks because of their service in critical infrastructure sectors; and,

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

- Invest in water, sewer, and broadband infrastructure, making necessary investments to improve access to clean drinking water, support vital wastewater and stormwater infrastructure, and to expand access to broadband internet.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - In mid-2024, an inquiry was conducted by the United States Department of Justice (“DOJ”) into potential criminal activity associated with three individuals, each of whom were senior GVI officials working in their respective capacities as Director/Commissioner of the U.S. Virgin Islands Office of Management and Budget, Virgin Islands Police Department, and Department of Sports, Parks, and Recreation. As of January 2025, the DOJ filed formal indictments against the these now former USVI officials (collectively the “Indicted Individuals”).

The DOJ alleged that the Indicted Individuals were involved in activities associated with bribery, specifically providing, or attempting to provide, accelerated approval of contracts and payments on invoices to a vendor, Mon Ethos Pro Support, LLC. The court cases are on-going. In 2022, Mon Ethos Pro Support, LLC was paid \$52,290 from Coronavirus State and Local Fiscal Recovery Funds, which are considered questioned costs.

Further, internal controls over compliance do not appear to be operating effectively to ensure compliance with the allowable activities and procurement compliance requirements.

Questioned Costs - \$52,290.

Context - This is a condition identified per review of current events and specific transactions related to the vendor identified in the DOJ indictment.

Effect - Fraudulent transactions associated with a Federal program can lead to an assessment of penalties, claw back of federal funds and termination of awards. Further, an ineffective control system related to procuring of vendors and submission of allowable costs that could ultimately lead to disallowed costs for the major programs.

Cause - OMB does not appear to have adequate policies and procedures to ensure compliance with applicable cost principles and procurement standards. Specifically, there appears to be a lack of monitoring controls and an appropriate level of review and approval of transactions prior to charging costs to a federal program.

Recommendation - We recommend that OMB evaluate its policies and procedures to ensure appropriate internal controls in order to comply with federal regulations relating to the procurement of goods and services and review current records retention policies.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. A comprehensive corrective action plan has been implemented to strengthen grant management and compliance. Key personnel have been hired, including a Grants Administrator and an external accounting firm, to provide oversight and expertise. The Government has developed detailed policies and procedures to ensure compliance with federal regulations, including internal controls for subrecipient vetting, documentation, monitoring of expenditures, and clear communication regarding non-compliance. Efforts are underway to finalize overarching policies, such as a Fraud, Waste, and Abuse policy with a whistleblower process. Robust internal controls have been established, including regular financial reviews, segregation of duties, and staff training. Additionally, a monitoring and evaluation framework has been set up through the OMB Compliance Unit, supported by an Audit Committee, to assess and improve the effectiveness of controls. Regular training sessions are provided to all staff involved in grant management to ensure they understand and adhere to compliance requirements. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-043
Prior Year Finding Number: 2021-038
Compliance Requirement: Procurement and Suspension and Debarment

Program: U.S. Department of the Treasury
Government Department/Agency: Office of Management and Budget (OMB)

COVID-19 - Coronavirus State and Local Fiscal Recovery
Funds
ALN: 21.027
Award #: N/A
Award Period: 03/03/2021 - 12/31/2024

Criteria - Recipients may use award funds to enter into contracts to procure goods and services necessary to implement one or more of the eligible purposes outlined in sections 602(c) and 603(c) of the Act and Treasury's Interim Final Rule and Final Rule. As such, recipients are expected to have procurement policies and procedures in place that comply with the procurement standards outlined in the Uniform Guidance. Specifically, a state must follow the same policies and procedures it uses for procurements from its non-federal funds and comply with 2 CFR sections 200.321, 200.322, and 200.323. States must also ensure that every contract includes the applicable contract clauses required by 2 CFR section 200.327.

Per Procurement Manual, User Agencies are required to submit a written justification letter to DPP, which was signed by the agency head, which explains the need for the services, the exception in title 31, Virgin Islands Code, chapter 23, section 239(a) being relied upon, the methodology for the selection process, and the rationale for selecting the prospective contractor. The letter must identify the funding source, and comply with all other requirements necessary for the acquisition of services under title 31, Virgin Islands Code, chapter 23, sections 239(a) (1), (2) or (3) whichever is applicable. The letter must contain an "approve/disapprove" block for the Commissioner of Property and Procurement. As such, please provide the justification letter for these three Task Order Contracts.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - The Government's Department of Property and Procurement (DPP) is primarily responsible for procurement transactions. In our review of 9 out of 86 procurement transactions, we noted 3 transactions where there was no written justification letter for task order contracts.

Further, internal controls over compliance do not appear to be operating effectively to ensure compliance with the procurement compliance requirements.

Questioned Costs - None.

Context - This is a condition identified per review of OMB's compliance with the specified requirements using a statistically valid sample. Total amount of the procurement transactions was \$17,487,469. Total amount of the samples was \$5,699,575. The known amount of the exceptions is \$3,530,516.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Effect - OMB could inadvertently contract or make sub-awards to parties that are suspended or debarred from doing business with the Federal government as well as award contracts to vendors whose contract prices are unreasonable. In addition, contracts may be executed to unqualified vendors.

Cause - OMB does not appear to have a process in place to adequately monitor and maintain completed contract files comprising of all supporting documents.

Recommendation - We recommend that OMB and DPP improve internal controls to ensure adherence to federal regulations relating to the procurement of goods and services and review current records retention policies. There should be timely coordination and communication amongst all Government departments and/or agencies that are responsible for handling and managing procurement tasks.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Government updated its procurement laws and issued revised procurement manuals, along with issuing position-specific Standard Operating Procedures. Processes for enforcing Internal controls and adherence to procurement laws have been established and are regularly reinforced. In early 2025, the Government-wide training reinforced expectations for full and open competition. User Agencies now access GVIBUY for informal solicitations in the eProcurement system, with ongoing training to prioritize competition and enhance oversight by the Department of Property and Procurement. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-044
Prior Year Finding Number: 2021-039
Compliance Requirement: Reporting

Program:

U.S. Department of the Treasury

Government Department/Agency:

Office of Management and Budget (OMB)

COVID-19 - Coronavirus State and Local Fiscal Recovery
Funds

ALN: 21.027

Award #: N/A

Award Period: 03/03/2021 - 12/31/2024

Criteria - There are three types of reporting requirements for the CSLFRF program:

Interim Report: Provide initial overview of status and uses of funding. The interim report will include a recipient's expenditures through July 31, 2021 by category and at the summary level. The reporting requirements vary by type of recipient, the total allocation amount, and the date which the recipient first received its allocation. This is a one-time report.

Project and Expenditure Report: Report on financial data, projects funded, expenditures, and contracts and subawards over \$50,000, and other information. Project and Expenditure Reports are due on a regular, recurring basis after the Interim Reports. The reporting frequency and deadlines vary by type of recipient and total allocation amount.

Recovery Plan Performance Report: The Recovery Plan Performance Report (the "Recovery Plan") will provide information on the projects that large recipients are undertaking with program funding and how they plan to ensure program outcomes are achieved in an effective, efficient, and equitable manner. It will include key performance indicators identified by the recipient and some mandatory indicators identified by Treasury. The Recovery Plan will be posted on the website of the recipient as well as provided to Treasury.

In addition, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - In our review of 3 out of 4 reports submitted during the fiscal year, we noted 3 reports did not contain evidence of review and approval prior to submission and the financial and other information did not agree with underlying records.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the reporting compliance requirements.

Questioned Costs - None.

Context - This is a condition identified per review of OMB's compliance with the specified requirements using a statistically valid sample.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Effect - OMB is not in compliance with the stated provisions and inaccurate information may have been reported to the Federal government.

Cause - It appears that policies and procedures, including review over reporting procedures were not functioning as intended. Further, OMB does not have adequate control over maintenance of the underlying documentation used in preparing various reports.

Recommendation - We recommend that OMB reevaluates its policies and procedures to ensure proper retention, monitoring, and review of the required reports by an appropriate official who would ensure that information submitted is complete, accurate, consistent, and submitted within the required timeframe.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. Starting in 2024, OMB has implemented a reporting approval memo, signed by the OMB Director, to confirm the review and approval of Treasury reports. OMB has enhanced the collection and storage of supporting financial information for all projects in quarterly reports, ensuring necessary support is available upon request as of FY23. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-045
Prior Year Finding Number: N/A
Compliance Requirement: Subrecipient Monitoring

Program:

U.S. Department of Treasury

Government Department/Agency:

Office of Management and Budget (OMB)

COVID-19 - Coronavirus State and Local Fiscal Recovery
Funds

ALN: 21.027

Award #: N/A

Award Period: 03/03/2021 - 12/31/2024

Criteria - A pass-through entity (PTE) must:

Identify the Award and Applicable Requirements - Clearly identify to the subrecipient:

1. The award as a subaward at the time of subaward (or subsequent subaward modification) by providing the information described in 2 CFR section 200.331(a)(1);
2. All requirements imposed by the PTE on the subrecipient so that the federal award is used in accordance with federal statutes, regulations, and the terms and conditions of the award (2 CFR section 200.331(a)(2));
3. Any additional requirements that the PTE imposes on the subrecipient in order for the PTE to meet its own responsibility for the federal award (e.g., financial, performance, and special reports) (2 CFR section 200.331(a)(3)).

Evaluate Risk - Evaluate each subrecipient's risk of noncompliance for purposes of determining the appropriate subrecipient monitoring related to the subaward (2 CFR section 200.332(b)). This evaluation of risk may include consideration of such factors as the following:

1. The subrecipient's prior experience with the same or similar subawards;
2. The results of previous audits including whether or not the subrecipient receives single audit in accordance with 2 CFR Part 200, Subpart F, and the extent to which the same or similar subaward has been audited as a major program;
3. Whether the subrecipient has new personnel or new or substantially changed systems; and
4. The extent and results of federal awarding agency monitoring (e.g., if the subrecipient also receives federal awards directly from a federal awarding agency).

Monitor - Monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, complies with the terms and conditions of the subaward, and achieves performance goals (2 CFR sections 200.332(d) through (f)). In addition to procedures identified as necessary based upon the evaluation of subrecipient risk or specifically required by the terms and conditions of the award, subaward monitoring must include the following:

1. Reviewing financial and programmatic (performance and special reports) required by the PTE.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

2. Following-up and ensuring that the subrecipient takes timely and appropriate action on all deficiencies pertaining to the federal award provided to the subrecipient from the PTE detected through audits, on-site reviews, and other means.
3. Issuing a management decision for audit findings pertaining to the federal award provided to the subrecipient from the PTE as required by 2 CFR section 200.521.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We obtained a list of subrecipients from OMB and found that the list identified internal Government of the Virgin Islands (GVI) departments and offices as subrecipients. The list of subrecipients also included an external entity whose federal expenditures are part of the GVI Schedule of Expenditures of Federal Awards. As a result, the listing of subrecipients was amended to exclude 23 projects totaling \$23,559,959.

Using the amended listing of subrecipients, we selected 12 of 18 subrecipients and found the following:

- 3 projects which OMB did not verify if the entity underwent a single audit as required by 2 CFR part 200, subpart F.
- 1 project which OMB did not complete their monitoring workbook during the fiscal year.
- 5 projects in which there was no evidence the monitoring workbook was reviewed by the American Rescue Plan Act (ARPA) Grants Administrator.
- 6 projects where entities were identified as subrecipients but were ultimately considered to be beneficiaries of SLFRF funds and not subrecipients.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the subrecipient monitoring compliance requirements or proper identification of subrecipients.

Questioned Costs - None.

Context - This is a condition identified per review of OMB's compliance with the specified requirements using a statistically valid sample. The total amount of expenditures passed through to subrecipients in fiscal year 2022 were \$56,490,165. The total amount of our sample totaled \$46,452,928.

Effect - OMB is not in compliance with the stated provisions. Failure to properly identify and monitor subrecipients can result in noncompliance with laws and regulations and failure to meet the programs objectives.

Cause - OMB does not have internal controls in place to properly identify and monitor subrecipients to ensure adherence to applicable federal regulations, including expending federal awards for allowable expenditures.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that OMB implement policies, procedures, and controls to ensure subrecipients are identified and monitored in accordance with federal statutes.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. Starting FY25, OMB will identify and monitor federal awarding agencies, requesting single audit results for applicable recipients and including them in monitoring reviews. For revenue replacement projects, Treasury's Final Rule FAQ (13.14) states that these funds do not create subrecipient relationships, thus exempting them from the Single Audit Act due to the absence of a federal program or purpose. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-046
Prior Year Finding Number: 2021-041
Compliance Requirement: Equipment and Real Property Management

Program: U.S. Department of Education
Government Department/Agency: Department of Education (VIDE)

Special Education Cluster
ALN: 84.027 (84.027A and 84.027X)
Award #: Various
Award Period: Various

Criteria - Per the Uniform Guidance in 2 CFR Section 200.313, *Equipment*, property records must be maintained that include a description of the property, a serial number or other identification number, the source of the property, who holds title, the acquisition date, cost of the property, percentage of Federal participation in the cost of the property, the location, use and conditions of the property, and any ultimate disposition date including the date of disposal and sale price of the property.

Additionally, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - The VIDE maintains an equipment listing for fixed assets purchased with federal funding. VIDE was unable to provide complete property records which met the stated requirements.

Further, we noted that internal controls were not operating at a level of precision to ensure compliance with the equipment management compliance requirements.

Questioned Costs - None.

Context - This is a condition identified per review of the VIDE's compliance with the specified requirements.

Effect - There is a risk that inadequate recordkeeping or equipment could lead to misappropriation of assets and noncompliance with Federal regulations resulting in a return of Federal awards received.

Cause - VIDE does not appear to have adequate policies and procedures in place to adequately monitor equipment acquired with Federal Funds.

Recommendation - We recommend that VIDE improve internal controls to ensure adherence to Federal regulations related to equipment and its related maintenance. There should be timely coordination and communication amongst all personnel that are responsible for handling and managing such assets as well as monitoring of the performance of the recording of the equipment.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDE will enhance their asset tracking system, maintaining centralized records with detailed asset information, including description, serial number, acquisition details, and federal participation. The Procurement Division will conduct quarterly inventory audits and reconciliations to ensure alignment with actual inventory, promptly resolving discrepancies. The Fixed Asset Director will establish protocols for regular communication among Programs/Divisions responsible for asset management, requiring monthly status reports to ensure data accuracy and timely updates. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-047
Prior Year Finding Number: 2021-042
Compliance Requirement: Matching, Level of Effort, Earmarking

Program:

U.S. Department of Education

Government Department/Agency:

Department of Education (VIDE)

Special Education Cluster

ALN: 84.027 (84.027A and 84.027X)

Award #: Various

Award Period: Various

Criteria - The Uniform Guidance in 2 CFR Section 200.303, Internal Controls, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Further, in accordance with the Uniform Guidance in 2 CFR Section 200.306, a State may not reduce the amount of State financial support for special education and related services for children with disabilities (or State financial support otherwise made available because of the excess costs of educating those children) below the amount of State financial support provided for the preceding fiscal year. The Secretary reduces the allocation of funds under 20 USC 1411 for any fiscal year following the fiscal year in which the State fails to comply with this requirement by the amount by which the State failed to meet the requirement.

Additionally, an LEA can use not more than 15% of the amount of federal Part B funds the LEA receives for any fiscal year (less any amount by which it reduces its expenditures under 20 USC 1413(a)(2)(C)) (see III.G.2.1.b.(6) in this section), in combination with other funds, to develop and implement, early intervening services for children in kindergarten through grade 12 who have not been identified under IDEA but need additional academic and behavioral support to succeed in the general education environment (20 USC 1413(f); 34 CFR section 300.226).

Condition -

We reviewed the level of effort calculations and noted the following:

- At the Local Education Agency (LEA) level, we noted that although the two LEAs appeared to meet the required financial support thresholds on the per child basis based on the level of effort compliance requirement, we were unable to verify the number of students for each LEA.
- At the State Education Agency (SEA) level, we were unable to review documentation that included the approval /certification of the amounts in the Maintenance of Financial support at the State Education level. In addition, although the calculation shows that VIDE met the Maintenance of Effort at the State level, we were unable to review documentation that would allow us to verify the number of students served in the current year.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

We reviewed the earmarking documentation and noted the following:

- At the State Education Agency (SEA) level, for the ARP grant and non-ARP grant, we were unable to verify the total numbers of students and the number of students in poverty. We were therefore unable to confirm that the allocation of the remaining funds to the LEA agreed with the relative numbers of children living in poverty.
- At the Local Education Agency (LEA) level, we were unable to review documentation that the LEA did not use more than 15% of the amount of federal Part B funds to develop and implement early intervening services for children in kindergarten through grade 12 who have not been identified under IDEA but need additional academic and behavioral support to succeed in the general education environment.

As a result, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the level of effort and earmarking compliance requirement.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of VIDE's compliance with the specified requirements.

Effect - VIDE is not in compliance with the stated provisions. Without adequate internal controls to ensure compliance with level of effort requirements and earmarking, there is an increased risk that level of effort and earmarking requirements will not be properly applied, and funding could be jeopardized.

Cause - VIDE did not appear to have adequate policies and procedures in place to ensure consistent and systematic monitoring of the requirements.

Recommendation - We recommend that VIDE improve internal controls to ensure adherence to federal regulations relating to the level of effort and earmarking requirements at the SEA and LEA levels by deploying resources that are given the responsibility to ensure periodic monitoring and compliance of the level of effort and earmarking requirements.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDE acknowledges need to enhance monitoring and internal controls. VIDE will establish a team for quarterly reviews of documentation, report issues, and recommend corrective actions. The IDEA State Office will set procedures for verifying accuracy of data reported by LEAs. Comprehensive staff training will ensure understanding of new policies and procedures. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number 2022-048
Prior Year Finding Number: 2021-043
Compliance Requirement: Cash Management

Program:

U.S. Department of Education

Government Department/Agency:

Department of Education (VIDE)

Consolidated Grant to the Outlying Areas

ALN: 84.403A

Award #: Various

Award Period: Various

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Further, the U.S. Department of Education (DOE) imposed specific conditions on grant awards provided to the U.S. Virgin Islands. VIDE is required to draw down funds and provide any applicable matching funds to the Agent within 24 hours of receipt of the written notice from the Third-Party Fiduciary Agent (TPFA).

Condition - We reviewed 24 out of 204 drawdowns and noted the following:

- 2 drawdowns were not performed within the required 24 hours after receipt of the request from the TPFA as required by the DOE. In addition, the drawdown reconciliation for one of these sample was not provided so we were unable to confirm that it was properly reviewed and approved;
- 2 drawdowns were missing required documentation.

Further, we noted that the internal controls are not designed at a level of precision that would prevent or detect and correct noncompliance.

Questioned Costs - None.

Context - This is a condition identified per review of the VIDE's compliance with the specified requirements using a statistically valid sample. Total amount of cash drawdowns for the program was \$16,413,229. Total amount sampled is \$5,764,930. The known amount of the exception is \$38,540.

Effect - VIDE is not in compliance with the stated provisions. Payment to vendors could be delayed when cash drawdowns are not completed in a timely manner.

Cause - It appears that policies and procedures, including timely submission of drawdown requests, were not functioning as intended. Further, the Government did not appear to exercise due diligence in requesting Federal funds consistent with the U.S. Department of Education imposed specific conditions and its actual cash needs.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that VIDE comply with the specific conditions imposed by the U.S. Department of Education and request Federal funds consistent with the specific conditions imposed for this program.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDE will reinforce the procedure to complete drawdown requests within 24 hours and ensure designated individuals are trained to process requests. Weekly reconciliations of requests and disbursements will be conducted, with processes to resolve discrepancies and maintain detailed records. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number 2022-049
Prior Year Finding Number: 2021-044
Compliance Requirement: Equipment and Real Property Management

Program: U.S. Department of Education
Government Department/Agency: Department of Education (VIDE)

Consolidated Grant to the Outlying Areas
ALN: 84.403A
Award #: Various
Award Period: Various

Criteria - Per the Uniform Guidance in 2 CFR Section 200.313, *Equipment*, property records must be maintained that include a description of the property, a serial number or other identification number, the source of the property, who holds title, the acquisition date, cost of the property, percentage of Federal participation in the cost of the property, the location, use and conditions of the property, and any ultimate disposition date including the date of disposal and sale price of the property.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e.. auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - The VIDE maintains an equipment listing for fixed assets purchased with federal funding. VIDE was unable to provide complete property records which met the stated requirements.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the equipment management compliance requirements.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of the VIDE's compliance with the specified requirements.

Effect - There is a risk that inadequate recordkeeping or equipment could lead to misappropriation of assets and noncompliance with Federal regulations resulting in a return of Federal awards received.

Cause - VIDE does not appear to have adequate policies and procedures in place to adequately monitor equipment acquired with Federal Funds.

Recommendation - We recommend that VIDE improve internal controls to ensure adherence to Federal regulations related to equipment and its related maintenance. There should be timely coordination and communication amongst all personnel that are responsible for handling and managing such assets as well as monitoring of the performance of the recording of the equipment.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDE plans to improve management and documentation of federally funded equipment by enhancing its asset tracking system and maintaining centralized records with detailed asset information. The Procurement Division will conduct quarterly inventory audits to reconcile records with actual inventory, resolving discrepancies promptly. The Fixed Asset Director will establish communication protocols among Programs/Divisions, requiring monthly status reports to ensure data accuracy and timely updates. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number 2022-050
Prior Year Finding Number: 2021-045
Compliance Requirement: Reporting

Program:

U.S. Department of Education

Government Department/Agency:

Department of Education (VIDE)

Consolidated Grant to the Outlying Areas

ALN: 84.403A

Award #: Various

Award Period: Various

Criteria - Each State or Territory must file various financial, programmatic, and special reports. Additionally, the requirements necessitate that all submitted reports should be supported by the underlying performance records and presented in accordance with program requirements.

Under the requirements of the Federal Funding Accountability and Transparency Act (Pub. L. No. 109-282), as amended by Section 6202 of Public Law 110-252, hereafter referred as the "Transparency Act" that are codified in 2 CFR Part 170, recipients (i.e., direct recipients) of grants or cooperative agreements are required to report first-tier subawards of \$30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS).

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities, receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - VIDE failed to submit subaward data to fulfill the Transparency Act reporting requirements for the first tier subawards of \$30,000 or more.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the reporting compliance requirements.

Questioned Costs - None.

Context - This is a condition per review of VIDE's compliance with reporting requirements. In fiscal year 2022, VIDE passed through \$1,051,727 to 10 subrecipients.

Effect - VIDE is not in compliance with reporting requirements as it failed to provide evidence of identifying and reporting Transparency Act reporting requirements.

Cause - It appears that policies and procedures, including review over reporting procedures were not functioning as intended.

Recommendation - We recommend that VIDE should implement policies, procedures and controls that will comply with all required laws, guidelines, and requirement under the award.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDE plans to address the audit finding on FFATA reporting by developing detailed reporting policies and procedures. These will include guidelines for identifying and tracking subawards, collecting required data, and setting submission timelines. Roles and responsibilities of involved personnel will be clearly defined. VIDE will enhance existing system or implement a new system for tracking subawards and provide comprehensive training to staff. Data verification and validation procedures will be strengthened, with formal processes for reviewing data accuracy before submission and regular reconciliations to ensure consistency. Mandatory training sessions will ensure all personnel understand FFATA requirements and new reporting procedures. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number 2022-051
Prior Year Finding Number: N/A
Compliance Requirement: Subrecipient Monitoring

Program:

U.S. Department of Education

Government Department/Agency:

Department of Education (VIDE)

Consolidated Grant to the Outlying Areas

ALN: 84.403A

Award #: Various

Award Period: Various

Criteria - Per Compliance Supplement, a pass-through entity (PTE) must:

- **Identify the Award and Applicable Requirements** - Clearly identify to the subrecipient:
 - (1) The award as a subaward at the time of subaward (or subsequent subaward modification) by providing the information described in 2 CFR section 200.331(a)(1);
 - (2) all requirements imposed by the PTE on the subrecipient so that the federal award is used in accordance with federal statutes, regulations, and the terms and conditions of the award (2 CFR section 200.331(a)(2)); and (3) any additional requirements that the PTE imposes on the subrecipient in order for the PTE to meet its own responsibility for the federal award (e.g., financial, performance, and special reports) (2 CFR section 200.331(a)(3)).
- **Evaluate Risk** - Evaluate each subrecipient's risk of noncompliance for purposes of determining the appropriate subrecipient monitoring related to the subaward (2 CFR section 200.332(b)). This evaluation of risk may include consideration of such factors as the following:
 1. The subrecipient's prior experience with the same or similar subawards;
 2. The results of previous audits including whether or not the subrecipient receives single audit in accordance with 2 CFR Part 200, Subpart F, and the extent to which the same or similar subaward has been audited as a major program;
 3. Whether the subrecipient has new personnel or new or substantially changed systems; and
 4. The extent and results of federal awarding agency monitoring (e.g., if the subrecipient also receives federal awards directly from a federal awarding agency).
- **Monitor** - Monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, complies with the terms and conditions of the subaward, and achieves performance goals (2 CFR sections 200.332(d) through (f)). In addition to procedures identified as necessary based upon the evaluation of subrecipient risk or specifically required by the terms and conditions of the award, subaward monitoring must include the following:
 1. Reviewing financial and programmatic (performance and special reports) required by the PTE.
 2. Following-up and ensuring that the subrecipient takes timely and appropriate action on all deficiencies pertaining to the federal award provided to the subrecipient from the PTE detected through audits, on-site reviews, and other means.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

3. Issuing a management decision for audit findings pertaining to the federal award provided to the subrecipient from the PTE as required by 2 CFR section 200.521.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We selected a sample of subawards to 3 out of 10 subrecipients and found no supporting documentation demonstrating that VIDE verified whether the subrecipients were subject to audit requirements under 2 CFR part 200, subpart F. Additionally, there was no evidence of award monitoring performed for 2 of the 3 subrecipients tested.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the subrecipient monitoring compliance requirements.

Questioned Costs - None.

Context - This is a condition identified per review of VIDE's compliance with the specified requirements and general compliance principles. The total amount of expenditures passed through to subrecipients in fiscal year 2022 were \$1,051,727.

Effect - VIDE is not in compliance with the stated provisions. Failure to properly monitor subrecipients can result in noncompliance with laws and regulations and failure to meet the programs objectives.

Cause - VIDE does not have internal controls in place to properly monitor subrecipients to ensure adherence to applicable federal regulations, including expending federal awards for allowable expenditures.

Recommendation - We recommend that VIDE implement policies, procedures, and controls to ensure subrecipients are monitored in accordance with federal statutes.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDE is committed to strengthening controls to ensure subrecipient compliance with federal audit requirements under 2 CFR Part 200, Subpart F. This includes implementing effective measures, such as explicit reporting requirements in subrecipient agreements and providing training to internal staff on subrecipient monitoring requirements and ensure consistent implementation. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-052
Prior Year Finding Number: 2021-046
Compliance Requirement: Allowable Costs/Cost Principles - Payroll Activities

Program:

U.S. Department of Education

Government Department/Agency:

Department of Education (VIDE)
Office of Management and Budget
(OMB)

COVID-19 - Education Stabilization Fund
State Educational Agency (Outlying Areas)
(ESF-SEA)

ALN: 84.425A

Award #: S425A200004, S425A210004

Award Period: 06/22/2020 - 09/30/2022
01/13/2021 - 09/30/2023

COVID-19 - Education Stabilization Fund
Governors (Outlying Areas) (ESF-Governor)

ALN: 84.425H

Award #: S425H200003, S425H210003

Award Period: 06/29/2020 - 09/30/2022
01/13/2021 - 09/30/2023

COVID-19 - American Rescue Plan - Outlying Areas
State Educational Agency (ARP-OA SEA)

ALN: 84.425X

Award #: S425X210004

Award Period: 04/08/2021 - 09/30/2024

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Additionally, salaries and wages charged to Federal awards are subject to the standards of documentation as described by 2 CFR Section 200.430(i) and must be based on records that accurately reflect the work performed. These records must:

- Be incorporated into the organization's official records:
- Reasonable reflect the total activity for which the employee is compensated across all grant-related and non-grant related activities (100% effort); and
- Support the distribution of employee salary across multiple activities or cost objectives.

Condition - For ALN 84.425A, we sampled and selected 60 out of 2,319 payroll expenditures and noted 4 timesheets were not available for review.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the activities allowed or unallowed and allowable costs/cost principles compliance requirements.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Questioned Costs - Not determinable.

Context - This is a condition identified per review of VIDE's compliance with the specified requirements using a statistically valid sample. The total payroll expenditures charged to program in fiscal year 2022 is \$3,138,454. Total amount sampled is \$98,332. The known amount of the exceptions is \$7,968.

Effect - Failure to properly review and support expenditures can result in noncompliance with laws and regulations along with loss of funding.

Cause - VIDE does not appear to have adequate policies and procedures in place to ensure compliance with applicable cost principles and maintenance of underlying documentation.

Recommendation - We recommend that VIDE improve internal controls to ensure adherence to Federal regulations related to the fiscal and administrative requirements for expending and accounting for payroll expenditures. Where employees work on multiple activities or cost objectives, a distribution of salaries or wages should be supported by personnel activity reports (time and attendance) or equivalent documents. Such information should also be monitored, retained, and approved by a responsible official of VIDE in a timely manner.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDE is addressing audit findings related to payroll activities by enhancing internal controls to ensure compliance with federal regulations. Key measures include improving timesheet management through electronic submission, mandatory supervisor review, and secure storage. Additionally, VIDE will strengthen rate verification processes with a standardized checklist for comparing NOPA rates with payroll system rates, requiring payroll staff to complete it at each pay cycle and maintain a discrepancy tracker. Mandatory training sessions will be conducted for employees and supervisors to ensure understanding of the new policies, covering timesheet completion, rate verification, and adherence to guidelines. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-053
Prior Year Finding Number: 2021-049
Compliance Requirement: Reporting

Program:

U.S. Department of Education

COVID-19 - Education Stabilization Fund
State Educational Agency (Outlying Areas)
(ESF-SEA)

ALN: 84.425A

Award #: S425A200004, S425A210004

Award Period: 06/22/2020 - 09/30/2022
01/13/2021 - 09/30/2023

COVID-19 - Education Stabilization Fund
Governors (Outlying Areas) (ESF-Governor)

ALN: 84.425H

Award #: S425H200003, S425H210003

Award Period: 06/29/2020 - 09/30/2022
01/13/2021 - 09/30/2023

COVID-19 - American Rescue Plan - Outlying Areas
State Educational Agency (ARP-OA SEA)

ALN: 84.425X

Award #: S425X210004

Award Period: 04/08/2021 - 09/30/2024

Criteria - Each State or Territory must file various financial, programmatic and special reports. Additionally, the requirements necessitate that all submitted reports should be supported by the underlying performance records and presented in accordance with program requirements.

Under the requirements of the Federal Funding Accountability and Transparency Act (Pub. L. No. 109-282), as amended by Section 6202 of Public Law 110-252, hereafter referred as the "Transparency Act" that are codified in 2 CFR Part 170, recipients (i.e., direct recipients) of grants or cooperative agreements are required to report first-tier subawards of \$30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS).

Specifically for this program, the CARES Act 15011(b)(2) requires institution receiving funds under ESF II-Governor and ESF II-SEA to submit the required quarterly reports to the Secretary at such time and manner and containing such information as the Secretary may require.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-Federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Condition - We sampled and selected 4 out of 12 performance and special reports during the fiscal year and noted the following:

- 1 quarterly performance report did not contain evidence of review and approval.
- 1 annual performance report was not available for review.
- 1 quarterly performance report was not submitted timely (8 days late).

We also performed testing over the Transparency Act reporting requirements outlined in the criteria section above. We noted that 1 report submitted in FSRS did not contain evidence of review and approval. The results of the testing are outline in the table below:

Transactions Tested	Subaward not reported	Report not timely	Subaward amount incorrect	Subaward missing key elements
1	0	1 (549 days late)	0	0
Dollar Amount of Tested Transactions	Subaward not reported	Report not timely	Subaward amount incorrect	Subaward missing key elements
\$100,000	0	\$100,000	0	0

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the reporting compliance requirements.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of OMB and VIDE's compliance with the specified requirements using a statistically valid sample.

Effect - Failure to properly track all reporting requirements, including the due dates of those reports, could result in missed or late reporting. This could also lead to a reduction in funding due to noncompliance with the terms of the Federal award.

Cause - The internal controls established for submission of reporting requirements did not fully operate as designed causing late submission and not in compliance with reporting requirements under the Transparency Act related to the program's subrecipients.

Recommendation - We recommend that OMB and VIDE reevaluate its policies and procedures to ensure proper retention, monitoring, and review of the required reports by an appropriate official who would ensure that information submitted is complete, accurate, consistent, and submitted within the required timeframe.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDE is addressing deficiencies in the reporting processes for the COVID-19 Education Stabilization Fund (ESF-SEA) by committing to enhance reporting practices for compliance with federal requirements. This includes implementing a structured review and approval process for all performance and special reports, ensuring they are vetted by appropriate officials. Additionally, training will be provided to all staff involved in report preparation and submission. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-054
Prior Year Finding Number: 2021-051
Compliance Requirement: Special Tests and Provisions - Participation of Private School Children

Program:

U.S. Department of Education

Government Department/Agency:

Department of Education (VIDE)
Office of Management and Budget
(OMB)

COVID-19 - Education Stabilization Fund
State Educational Agency (Outlying Areas)
(ESF-SEA)

ALN: 84.425A

Award #: S425A200004, S425A210004

Award Period: 06/22/2020 - 09/30/2022
01/13/2021 - 09/30/2023

COVID-19 - Education Stabilization Fund
Governors (Outlying Areas) (ESF-Governors I and II)

ALN: 84.425H

Award #: S425H200003, S425H210003

Award Period: 06/29/2020 - 09/30/2022
01/13/2021 - 09/30/2023

COVID-19 - American Rescue Plan - Outlying Areas
State Educational Agency (ARP-OA SEA)

ALN: 84.425X

Award #: S425X210004

Award Period: 04/08/2021 - 09/30/2024

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Per Compliance Supplement, the State or Territory or agency receiving financial assistance under ESF-SEA I and ESF-Governor I, must provide eligible private school children and their teachers or other educational personnel with equitable services or other benefits under the program. Before an agency, consortium, or entity makes any decision that affects the opportunity of eligible private school children, teachers, and other educational personnel to participate, the agency, consortium, or entity must engage in timely and meaningful consultation with private school officials. Expenditures for services and benefits to eligible private school children and their teachers and other educational personnel must be equal on a per-pupil basis to the expenditures for participating public school children and their teachers and other educational personnel, taking into account the number and educational needs of the children, teachers and other educational personnel to be served. For the programs under ESF-SEA, ESF II-SEA, ESF-Governor, ESF II- Governor will ensure equitable services will be provided to students and teachers in non-public elementary and secondary schools in the same manner provided under section 8501 of the Elementary and Secondary Education Act (ESEA).

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Condition - We reviewed OMB and VIDE's compliance with the compliance participation of private school children and noted the following:

- OMB did not implement a formal process for the participation of private school children compliance for FY2022.
- OMB did not conduct a timely consultation with nonpublic schools.
- OMB did not provide documents to support that the educational services that were planned were provided and that the allocation to nonpublic schools are equal on a per-pupil basis for public and private schools.

Additionally, we sampled and selected 9 out of 29 non-public schools for VIDE and noted following:

- Computation by VIDE of amount allocated to nonpublic schools did not contain evidence of review and approval.
- VIDE did not provide the Affirmation of Consultation/Intent to Participate for 9 out of 29 nonpublic schools consulted.
- VIDE did not provide documents to support that the educational services that were planned were provided.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the special tests and provisions requirements.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of OMB and VIDE's compliance with the specified requirements.

Effect - Noncompliance with program requirements could result in disallowances of costs and ineligible schools could be participating in the program.

Cause - OMB and VIDE do not appear to have an effective system in place to ensure consistent and systematic review of documentation and file maintenance.

Recommendation - We recommend that OMB and VIDE implement policies, procedures, and controls that will ensure equitable services are provided to eligible private school children and their teachers and other educational personnel. OMB and VIDE should also review its record retention policies to ensure that complete documentation is maintained, safeguarded, and available for review.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDE is committed to addressing issues related to the participation of private school children in the COVID-19 Education Stabilization Fund. OMB will develop and implement formal policies and procedures to ensure compliance with federal regulations. This includes establishing guidelines and a schedule for timely consultations with nonpublic schools and collaborating with the Department of Education to ensure equitable per-pupil expenditures for both private and public school children. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-055
Prior Year Finding Number: N/A
Compliance Requirement: Special Tests and Provisions - Wage Rate Requirements

Program:

U.S. Department of Education

Government Department/Agency:

Department of Education (VIDE)
Office of Management and Budget
(OMB)

COVID-19 - Education Stabilization Fund
State Educational Agency (Outlying Areas)
(ESF-SEA)

ALN: 84.425A

Award #: S425A200004, S425A210004

Award Period: 06/22/2020 - 09/30/2022
01/13/2021 - 09/30/2023

COVID-19 - Education Stabilization Fund
Governors (Outlying Areas) (ESF-Governors I and II)

ALN: 84.425H

Award #: S425H200003, S425H210003

Award Period: 06/29/2020 - 09/30/2022
01/13/2021 - 09/30/2023

COVID-19 - American Rescue Plan - Outlying Areas
State Educational Agency (ARP-OA SEA)

ALN: 84.425X

Award #: S425X210004

Award Period: 04/08/2021 - 09/30/2024

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Non-federal entities shall include in their construction contracts subject to the Wage Rate Requirements (which still may be referenced as the Davis-Bacon Act) a provision that the contractor or subcontractor comply with those requirements and the Department of Labor regulations (29 CFR part 5, Labor Standards Provisions Applicable to Contracts Governing Federally Financed and Assisted Construction). This includes a requirement for the contractor or subcontractor to submit to the nonfederal entity weekly, for each week in which any contract work is performed, a copy of the payroll and a statement of compliance (certified payrolls).

Condition - We reviewed VIDE's compliance with the wage rate requirements and noted the following:

- VIDE did not implement a formal process for the wage rate requirements compliance for FY2022.
- We randomly selected 1 contract for classroom repair services and determined it did not indicate a provision that the contractor complies with wage rate requirements.
- VIDE did not provide the certified payrolls required to be submitted by the contractor.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Further, it does not appear that there are controls in place to ensure compliance with the special tests and provisions compliance requirements.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of VIDE's compliance with the specified requirements.

Effect - VIDE is not in compliance with the stated provisions. There is potential that contractor or subcontractors could have paid their employees less than the prevailing wage rates established by the Department of Labor.

Cause -VIDE does not appear to have adequate policies and procedures in place to ensure compliance with applicable wage rate requirements.

Recommendation - We recommend the VIDE implement policies, procedures, and controls that will ensure adherence to Federal regulations related to wage rate requirements, and to ensure that responsible project management personnel obtain and review the required certified payroll reports for each week in which contract work is performed.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. VIDE is addressing compliance gaps related to wage rate requirements under the COVID-19 Education Stabilization Fund by reviewing all contracts to ensure they include appropriate compliance language. Contract templates will be updated to mandate compliance and specify consequences for noncompliance. Additionally, VIDE will implement a system requiring contractors to submit certified payroll reports weekly, with a designated team responsible for collecting, reviewing, and retaining these reports to verify compliance. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-056
Prior Year Finding Number: N/A
Compliance Requirement: Allowable Costs/Cost Principles - Payroll Activities

Program: U.S. Department of Health and Human Services
Government Department/Agency: Department of Health (DOH)

Epidemiology and Laboratory Capacity for Infectious Disease
ALN: 93.323
Award #: NU50CK000507
Award Year: 08/01/19 - 07/31/24

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Control* Section (a), requires the non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonable ensure compliance with Federal statutes, regulations, and other terms and conditions of the Federal Award. Management is responsible for establishing and maintaining a system of internal control that should include controls over its activities allowed or unallowed, allowable cost/cost principle process. CFR 200.403(g) states that for costs to be allowed under federal awards, they must be adequately documented.

Additionally, salaries and wages charged to Federal awards are subject to the standards of documentation as described by 2 CFR Section 200.430(i) and must be based on records that accurately reflect the work performed. These records must:

- Be incorporated into the organization's official records;
- Reasonably reflect the total activity for which the employee is compensated across all grant-related and non-grant related activities (100%); and
- Support the distribution of employee salary across multiple activities or cost objectives.

Condition - DOH was unable to reconcile the payroll expense include in the SEFA (\$2,025,690) with the payroll expense in the payroll register (\$1,909,128). As a result, the auditor was not able to establish the completeness of the population and was unable to perform testing procedures.

Questioned Costs - None.

Context - This is a condition identified per review of DOH's compliance with the specified requirements.

Cause - DOH does not appear to have adequate policies and procedures in place to review and reconcile program expenditures.

Effect - Lack of proper reconciling information can result in noncompliance with laws and regulation along with loss of funding.

Recommendation - We recommend that DOH improve internal controls to ensure program data is reconciled, monitored and retained in order to facilitate adherence to federal regulations and compliance requirements.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Official - The Government concurs with the auditor's findings and recommendations. DOH acknowledges the auditor's finding regarding the inability to reconcile payroll expenses in the SEFA with the payroll register due to untimely payroll adjustments. To address this, DOH is training its team and ensuring staff have access to make necessary adjustments in the Government Financial Management System starting FY2024. Moving forward, DOH will enhance its SOPs by holding monthly reconciliation meetings with relevant program teams for timely adjustments and continuous monitoring. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-057
Prior Year Finding Number: N/A
Compliance Requirement: Equipment and Real Property Management

Program: U.S. Department of Health and Human Services
Government Department/Agency: Department of Health (DOH)

Epidemiology and Laboratory Capacity for Infectious Disease
ALN: 93.323
Award #: NU50CK000507
Award Year: 08/01/19 - 07/31/24

Criteria - Per 2 CFR Section 200.313, property records must be maintained that include a description of the property, a serial number or other identification number, the source of funding for the property, who holds title, the acquisition date, cost of the property, percentage of Federal participation in the project costs for the Federal award under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sales price of the property.

Further, a physical inventory of equipment should be taken at least once every two years and reconciled to the equipment records along with the usage of an appropriate control system to safeguard and maintain equipment.

Additionally, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - The Government's Department of Property and Procurement (DPP) maintains the equipment register for the Government. DPP was unable to provide an accurate and complete property records which met the stated requirements. Further, no physical inventory was taken in fiscal year 2022.

Further, we noted that internal controls were not operating at a level of precision to ensure compliance with the equipment management compliance requirements.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of DOH's compliance with the specified requirements.

Cause - DOH does not appear to have a process in place to adequately monitor property and equipment acquired with Federal funds.

Effect - There is a risk that inadequate recordkeeping lead to misappropriation of assets and noncompliance with Federal regulations resulting in loss of funding.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that DOH and DPP improve internal to ensure adherence to federal regulations related to equipment and its related maintenance. There should be timely coordination and communication amongst all Government departments responsible for handling managing such assets.

Views of Responsible Official - The Government concurs with the auditor's findings and recommendations. The Epidemiology Division has implemented strong procedures for managing and monitoring property and equipment in line with Property and Procurement guidelines, including meticulous inventory and employee acknowledgment of assigned items. However, DOH acknowledges the need for better coordination with Property and Procurement. To improve asset management, DOH will update the Fixed Asset SOP to mandate that each division shares its asset inventory with Property and Procurement quarterly, ensuring more accurate and current records. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-058
Prior Year Finding Number: 2021-053
Compliance Requirement: Equipment and Real Property Management

Program: U.S. Department of Health and Human Services
Government Department/Agency: Department of Human Services (DHS)

Head Start Cluster
ALN: 93.356, 93.600
Award #: Various
Award Year: Various

Criteria - Real property, equipment, and intangible property, that are acquired or improved with a federal award must be held in trust by the nonfederal entity as trustee for the beneficiaries of the project or program under which the property was acquired or improved. The HHS awarding agency may require the nonfederal entity to record liens or other appropriate notices of record to indicate that personal or real property has been acquired or improved with a federal award and that use and disposition conditions apply to the property (45 CFR section 75.323 and 45 CFR section 1303 - Subpart E).

Real property acquired or improved under a federal award must be used for the authorized purpose so long as it is needed for that purpose, during which time the HSA may not dispose of, replace or encumber the property without prior ACF approval (45 CFR section 75.318; 45 CFR section 75.308(c)(1)(xi)).

Equipment acquired under a federal award must be used for the authorized purposes of the project during the period of performance, or until the property is no longer needed for the purposes of the project. A HSA may not dispose of, replace, or encumber title to equipment without prior ACF approval (45 CFR section 75.319; 45 CFR section 75.308(c)(1)(xi)).

Property records must be maintained for equipment acquired under a federal award that include a description of the property, a serial number or other identification number, the source of funding for the property (including the FAIN), who holds title, the acquisition date, and cost of the property, percentage of federal participation in the project costs for the federal award under which the property was acquired, the location, use and condition of the property, and any ultimate disposition data including the date of disposal and sale price of the property. A physical inventory of the property must be taken and the results reconciled with the property records at least once every two years.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - The Government's Department of Property and Procurement (DPP) maintains the equipment register for DHS. DPP was unable to provide complete property records which met the stated requirements. Further, no physical inventory of equipment was taken in the previous two years.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Further, internal controls were not operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of DHS' compliance with the specified requirements.

Effect - There is a risk that inadequate recordkeeping of equipment could lead to misappropriation of assets and noncompliance with Federal regulations resulting in a return of Federal awards received.

Cause - The Government does not appear to have a process in place to adequately monitor equipment acquired with Federal funds.

Recommendation - We recommend that DHS and DPP improve internal controls to ensure adherence to Federal regulations related to equipment and its related maintenance. There should be timely coordination and communication amongst all Government departments and/or agencies that are responsible for handling and managing such assets.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Human Services (DHS) maintains an internal asset listing and will collaborate with the Department of Property and Procurement to ensure compliance with Federal regulations regarding equipment and its maintenance. The Office of Management and Budget is reviewing and coordinating with the leadership of both DPP and DHS to ensure that processes are updated and maintained for monitoring equipment acquired with Federal funds. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-059
Prior Year Finding Number: N/A
Compliance Requirement: Reporting

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

Head Start Cluster
ALN: 93.356, 93.600
Award #: Various
Award Year: Various

Criteria - Each State or Territory must file various financial, programmatic, and special reports. Additionally, the requirements necessitate that all submitted reports should be supported by the underlying performance records and presented in accordance with program requirements.

More specifically for the program, in accordance with the compliance supplement, the states and territories are required to submit to the Federal administering agency, the Administration for Children and Families (ACF), the SF-429 *Real Property Status Report* and SF-429 *A General Reporting* on an annual basis 90 days after the end of the reporting period.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We sampled and selected 3 out of 11 special reports required to be submitted during the fiscal year and noted program personnel did not ensure 3 SF-429 reports were prepared and submitted to the federal grantor agency as prescribed.

Further, internal controls were not operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - None.

Context - This is a condition identified per review of DHS' compliance with the specified requirements.

Effect - DHS is not in compliance with the stated provisions. Failure to submit required reports could result in reduction or disallowance of Federal funding.

Cause - It appears that policies and procedures, including oversight over submission of required reports were not functioning as intended.

Recommendation - We recommend that DHS strengthen its process with respect to ensuring proper retention, monitoring, and review of the required reports by an appropriate official.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The program is working with the Director of Asset Management and the Fiscal Analyst to incorporate SOPP language that ensures forms are completed and submitted in a timely manner. These efforts are supported by the Federal Office of Head Start Grants Office. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-060
Prior Year Finding Number: N/A
Compliance Requirement: Special Test and Provision - Protection of Federal Interest in Real Property and Facilities

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

Head Start Cluster
ALN: 93.356, 93.600
Award #: Various
Award Year: Various

Criteria - Head Start uses specific terms related to real property and facilities, which are defined at 45 CFR section 1305.2, including construction, facility, federal interest, major renovation, and modular unit.

Facilities activities (purchase, construction, major renovation, subordination of a federal interest, refinancing, and disposition) are initiated through the submission of Form SF429 (cover sheet) and applicable attachments B (Request to Acquire, Improve or Furnish) or C (Disposition or Encumbrance Request).

With written prior approval from ACF, a HSA may use Head Start funds to purchase, construct, or renovate (major) a facility, including using Head Start funds to pay ongoing purchase costs which include principal and interest on approved loans (45 CFR sections 1303.40 through 1303.44).

A HSA that uses Head Start funds to purchase real property or purchase, construct, or renovate (major) a facility appurtenant to real property (either owned or leased) must record a Notice of Federal Interest (also referred to as “reversionary interest”) (45 CFR sections 1303.46). The Notice of Federal Interest must include the required language content from 45 CFR section 1303.47(a) and be properly recorded in the official real property records for the jurisdiction where the facility is or will be located. A similar Notice of Federal Interest is required for leased facilities on land the HSA does not own (45 CFR section 1303.47(b)).

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - Based on audit procedures performed, we identified 8 of 11 facilities with major repairs that did not have evidence of the required Notice of Federal Interest.

Further, internal controls were not operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - None.

Context - This is a condition identified per review of DHS’ compliance with the specified requirements.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Effect - There is a risk that lack of compliance with the stated requirements can result in significant fiscal issues that may put the Head Start program they administer at risk along with loss of funding.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure compliance with protection of Federal interest in real property and facilities.

Recommendation - We recommend that DHS strengthen and improve internal controls to ensure adherence to Federal regulations related to protection of Federal interest in real property and facilities. This includes incorporating the necessary internal controls to ensure the Notice of Federal Interest is obtained when required.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The program is collaborating with the Office of Legal Counsel to incorporate SOPP language to ensure the timely completion of forms, with support and technical assistance from the Federal Office of Head Start Grants Office. All outstanding reports are scheduled for submission by the end of March 2025, and this will be addressed in quarterly monitoring meetings. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-061
Prior Year Finding Number: 2021-054
Compliance Requirement: Special Test and Provision - Program Governance

Program: U.S. Department of Health and Human Services
Government Department/Agency: Department of Human Services (DHS)

Head Start Cluster
ALN: 93.356, 93.600
Award #: Various
Award Year: Various

Criteria - A Head Start Agency (HAS) must share accurate and regular financial information with the governing body and the policy council, including monthly financial statements, including credit card expenditures and the financial audit (42 USC 9837(d)(2)(A) and (E)).

Head Start governing body has a legal and fiscal responsibility for the HSA. The governing body's responsibilities include approving financial management, accounting, and reporting policies, and compliance with laws and regulations related to financial statements, including the:

- approval of all major financial expenditures of the agency;
- annual approval of the operating budget of the agency;
- selection (except when a financial auditor is assigned by the state under state law or is assigned under local law) of independent financial auditors; and
- monitoring of the agency's actions to correct any audit findings and of other action necessary to comply with applicable laws (including regulations) governing financial statement and accounting practices (42 USC 9837(c)(1)(E)(iv)(VII)(aa) through (dd)).

The auditee has provided training and technical assistance to the governing body and policy council to support understanding of financial information provided to them and support effective oversight of the Head Start award (42 USC 9837(d)(3)).

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - When evaluating DHS' compliance with the above-mentioned compliance requirements, we found the following:

- DHS was unable to validate that they provided training and technical assistance to the governance board during the fiscal period under review.
- Financial information is not shared with the governing board monthly. We observed financial information being shared quarterly.
- We found no discussion by the governing board relating to monitoring of DHS' actions to correct audit findings.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Further, internal controls were not operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - None.

Context - This is a condition identified per review of DHS' compliance with the specified requirements.

Effect - There is a risk that lack of compliance with the stated requirements can result in significant fiscal issues that may put the Head Start program they administer at risk along with loss of funding.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure compliance with program governance.

Recommendation - We recommend that DHS strengthen and improve internal controls to ensure adherence to Federal regulations related to program governance training and technical assistance to governing body and policy council. There should be regular training that will enable the governing body to perform it's legal, fiscal, and oversight responsibilities.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Governing Board transitioned to virtual meetings due to the pandemic, which pre-empted the FY22 training, and has incorporated electronic voting into its procedures. Regular trainings are now conducted to enable the governing body to effectively perform its legal, fiscal, and oversight responsibilities. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-062
Prior Year Finding Number: N/A
Compliance Requirement: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Non-Payroll Activities

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

CCDF Cluster
ALN: 93.575/93.489
Award #: Various
Award Period: Various

Criteria - Activities allowed for CCDF Funds include the following:

- a. Funds may be used for child care services in the form of certificates, grants, or contracts (42 USC 9858c(c)(2)(A)).
- b. Funds may be used for activities that improve the quality or availability of child care services, consumer education, and parental choice (42 USC 9858e).
- c. Funds may be used for activities that improve access to child care services, including the use of procedures to permit enrollment of homeless children (after an initial eligibility determination) while required documentation is obtained; training and technical assistance on identifying and serving homeless children and their families; and specific outreach to homeless families (42 USC 9858c(c)(3)(B)(i)).
- d. Funds may be used for any other activity that the Lead Agency deems appropriate to (a) promote parental choice; (b) provide comprehensive consumer education information to help parents and the public make informed choices about child care services and promote involvement by parents and family members in the development of their children in child care settings; (c) deliver high-quality, coordinated early childhood care and education services to maximize parents' options and support parents trying to achieve independence from public assistance; (d) improve the overall quality of child care services and programs by implementing the health, safety, licensing, training and oversight standards established in the CCDBG Act and in state law and regulations; (e) improve child care and development of participating children; and (f) increase the number and percentage of low-income children in high-quality child care settings (42 USC 9857 and 9858c(c)(3)(B)).

In addition, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We sampled and selected 82 out of 1,243 non-payroll transactions and noted 3 transactions totaling \$23,502 that appear to be unallowable costs.

Further, we noted that internal controls were not operating at a level of precision to ensure compliance with the allowable activities compliance requirement.

Questioned Costs - \$23,502.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Context - This is a condition identified per review of DHS's compliance with the specified requirements using a statistically valid sample. The total amount of non-payroll expenditures charged to the program were \$2,697,115. Total amount sampled is \$907,839.

Effect - DHS is not in compliance with the stated provisions. Failure to properly review and support expenditures can result in noncompliance with laws and regulations along with loss of funding.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure compliance with the allowable activities compliance requirement.

Recommendation - We recommend that DHS improve internal controls to ensure adherence to Federal regulations related to the fiscal and administrative requirements for expending and accounting for non-payroll expenditures.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. A dedicated Fiscal Analyst has been hired and integrated into the approval workflow to ensure compliance. Furthermore, all open purchase orders are now closed at the end of the grant year to ensure compliance. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-063
Prior Year Finding Number: N/A
Compliance Requirement: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

CCDF Cluster
ALN: 93.575, 93.489
Award #: Various
Award Period: Various

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires the non-federal entities receiving Federal awards (1.e., auditee management) establish and maintain internal control designed to reasonable ensure compliance with Federal statutes, regulations, and other terms and conditions of the Federal Award. Management is responsible for establishing and maintaining a system of internal control that should include controls over its activities allowed or unallowed, allowable cost/cost principal process.

CFR 200.403(g) states that for costs to be allowed under federal awards, they must be adequately documented. Additionally, salaries and wages charged to Federal awards are subject to the standards of documentation as described by 2 CFR Section 200.430(i) and must be based on records that accurately reflect the work performed. These records must:

- Be incorporated into the organization's official records.
- Reasonably reflect the total activity for which the employee is compensated across all grant-related and non-grant related activities (100%); and
- Support the distribution of employee salary across multiple activities or cost objectives.

Condition - We sampled and selected 67 out of 302 payroll transactions and in all instances found that DHS did not consistently apply funding allocation in accordance with the Notice of Personnel Action (NOPA). We found the project code approved on the NOPA did not agree to the project code used on the payroll register. However, in all instances we found the employee's actual time and effort was appropriately charged to the CCDF program.

Thus, internal controls were not operating at a level of precision to ensure compliance with the allowable costs compliance requirement.

Questioned Costs - None.

Context - This is a condition identified per review of DHS's compliance with the specified requirements using a statistically valid sample. The total amount of payroll expenditures charged to the program were \$820,305. Total amount sampled was \$202,805.

Effect - Failure to properly update an employee's NOPA can result time and effort charged to the incorrect project code resulting in noncompliance with laws and regulations along with loss of funding.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Cause - DHS does not appear to have adequate policies and procedures in place to ensure compliance with applicable cost principles.

Recommendation - We recommend that DHS improve internal controls to ensure adherence to Federal regulations related to the fiscal and administrative requirements for expending and accounting for payroll expenditures.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Division of Human Resources is updating the Notice of Personnel Actions to include the necessary Project code at the start of each fiscal year. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-064
Prior Year Finding Number: N/A
Compliance Requirement: Eligibility

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

CCDF Cluster
ALN: 93.575, 93.489
Award #: Various
Award Period: Various

Criteria - DHS must have in place procedures for documenting and verifying eligibility in accordance with the Federal requirements, as well as the specific eligibility requirements selected by the Territory in its approved Plan.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - The CCDF program appears to have policies and procedures in place for eligibility determinations and child care provider voucher preparation and distribution. However, DHS was unable to provide a complete listing of child care provider voucher distributions that includes relevant information to test eligibility of recipients. As a result, it appears DHS did not perform a reconciliation of the benefits paid to eligible participants and the expenditures recorded in the general ledger.

Further, internal controls were not operating at a level of precision to ensure compliance with the eligibility compliance requirement.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of DHS's compliance with the specified requirements and general compliance principles. Approximately \$1.5 million was expended for child care vouchers.

Effect - Noncompliance with program requirements could result in disallowances of costs and program participants could be receiving benefits that they are not entitled to receive.

Cause - It appears that policies and procedures, including review over eligibility transactions, were not functioning as intended.

Recommendation - We recommend that DHS reevaluate its policies and procedures to ensure proper monitoring and continue to be vigilant in following internal procedures over reviews and authorizations.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Department of Human Services (DHS) has introduced a checklist as an additional internal control measure to ensure compliance with Federal requirements for review of provider enrollment applications by the provider relations staff. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-065
Prior Year Finding Number: N/A
Compliance Requirement: Matching, Level of Effort, Earmarking

Program: U.S. Department of Health and Human Services
Government Department/Agency: Department of Human Services (DHS)

CCDF Cluster
ALN: 93.575, 93.489
Award #: Various
Award Period: Various

Criteria - The annual appropriations law for CCDF Discretionary Funds (Assistance Listing 93.575), the CARES Act (Pub. L. No. 116-136), and the CRRSA Act (Pub. L. No. 116-260) all specify that funds shall be used to supplement, not supplant State general revenue funds for child care assistance for low-income families. Funds appropriated by the ARP Act (Pub. L. No. 117-2) shall be used to supplement and not supplant other federal, state, and local public funds expended to provide child care services for eligible individuals.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We discussed with management the process to ensure compliance with the level of effort requirement noting they do not appear to have adequate policies and procedures to monitor and ensure compliance with level of effort requirements.

Further, internal controls were not operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of DHS's compliance with the specified requirements.

Effect - DHS is not in compliance with the stated provisions.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure a consistent and systematic monitoring of the requirements.

Recommendation - We recommend that DHS deploy resources that are given the responsibility to ensure periodic monitoring and compliance of the requirements throughout the fiscal year.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. According to Federal regulations and the instructions provided for completing the 696 reports, earmarking is assessed with the final report submission, not the intermediate report. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-066
Prior Year Finding Number: N/A
Compliance Requirement: Period of Performance

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

CCDF Cluster
ALN: 93.575, 93.489
Award #: Various
Award Period: Various

Criteria - A non-federal entity may charge to the Federal award allowable costs incurred during the period of performance and any costs incurred before the Federal awarding agency or pass-through entity made the Federal award, only to the extent that they would have been allowable if incurred after the date of the Federal award and only with the written approval of the Federal awarding agency.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - To track spending on individual federal awards, DHS establishes project codes within the general ledger. Creation and close down of project codes are subject to a review and approval process. The purpose is to ensure accuracy of the period of performance associated with project codes and expenditures are coded to the correct grants for period of performance. During our testing of period of performance, we found all 2 project codes subject to testing did not contain evidence of review and approval during creation of the project.

Questioned Costs - None.

Context - This is a condition identified per review of DHS's compliance with the specified requirements using a statistically valid sample. Spending on the projects totaled \$822,355.

Effect - Failure to properly review and approve project codes can result in noncompliance with laws and regulations along with loss of funding.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure adherence to their system of internal controls.

Recommendation - We recommend that DHS strengthen its system of internal controls to ensure all projects contain evidence of approval when established.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. A dedicated Fiscal Analyst has been hired and integrated into the approval workflow to ensure compliance. Additionally, all open purchase orders are now closed at the end of the grant year to ensure compliance. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-067
Prior Year Finding Number: N/A
Compliance Requirement: Reporting

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

CCDF Cluster
ALN: 93.575, 93.489
Award #: Various
Award Period: Various

Criteria - Pursuant to CCDF regulations at 45 CFR 98.65(g), and as part of the terms and conditions of the grant award, States and Territories are required to complete and submit a quarterly financial status report (ACF-696). The form must be submitted quarterly (reports are due 30 days after the end of the quarter). States must submit quarterly reports for each federal fiscal year until all funds are expended or when the liquidation period expires. Since CCDF funds are awarded each federal fiscal year, a Lead Agency might submit multiple separate quarterly ACF-696 forms for multiple overlapping grant award years simultaneously.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We sampled and selected 6 reports of 36 reports expected to be filed during the fiscal year. During our testing, we found the following:

- 3 financial reports had not been submitted in a timely manner, ranging from 222 to 227 days late.
- 3 financial reports that did not appear to be submitted as required.
- 6 financial reports where we could not determine if the amounts reported were complete and accurate.

Further, internal controls were not operating at a level of precision to ensure compliance with the reporting compliance requirement.

Questioned Costs - None.

Context - This is a condition identified per review of DHS's compliance with the specified requirements using a statistically valid sample.

Effect - DHS is not in compliance with stated provisions and inaccurate information may have been reported to the Federal government.

Cause - It appears that policies and procedures, including review over reporting procedures were not functioning as intended. Further, DHS does not have adequate control over maintenance of the underlying documentation used in preparing various reports.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that DHS reevaluate its policies and procedures to ensure proper retention, monitoring, and review of the required reports by an appropriate official who would ensure that information submitted is complete, accurate, consistent and submitted within the required timeframe.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. A Federal Grants Financial Analyst for CCDF program has been onboarded, tasked with ensuring the accuracy and submission of financial reports. Internal controls have been established, requiring final review and approval by a supervisor. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-068
Prior Year Finding Number: N/A
Compliance Requirement: Special Tests and Provisions - Health and Safety Requirements

Program: U.S. Department of Health and Human Services
Government Department/Agency: Department of Human Services (DHS)

CCDF Cluster
ALN: 93.575, 93.489
Award #: Various
Award Period: Various

Criteria - As part of their CCDF plans, Lead Agencies must certify that procedures are in effect (e.g., monitoring and enforcement) to ensure that providers serving children who receive subsidies comply with all applicable health and safety requirements. This includes verifying and documenting that child care providers (unless they meet an exception, e.g., family members who are caregivers or individuals who object to immunization on certain grounds) serving children who receive subsidies meet requirements pertaining to health and safety. These requirements must address 11 specific areas—including first aid and CPR, safe sleeping practices, and administration of medication—and child care workers must be trained in these areas (42 USC 9858c(c)(2)(I); 45 CFR section 98.41).

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - DHS was unable to provide a list of child care providers serving children who receives subsidies. Thus, we were unable to select a sample to determine if DHS verified and documented that child care providers meet requirements pertaining to health and safety.

Further, internal controls were not operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of DHS's compliance with the specified requirements.

Effect - DHS is not in compliance with the stated provisions. Noncompliance with program requirements could result in disallowances of costs and ineligible providers could be participating in the program.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure consistent and systematic monitoring of requirements.

Recommendation - We recommend that DHS deploy resources that are given the responsibility to ensure periodic monitoring and compliance of the health and safety requirements throughout the fiscal year.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. DHS remains in compliance with this finding from previous audit years, the untimely submission led to the issue in current year. To address this, a shared file will be established to ensure that the necessary information for each year is readily available for audit purposes. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-069
Prior Year Finding Number: N/A
Compliance Requirement: Special Tests and Provisions - Fraud Detection and Repayment

Program: U.S. Department of Health and Human Services
Government Department/Agency: Department of Human Services (DHS)

CCDF Cluster
ALN: 93.575, 93.489
Award #: Various
Award Period: Various

Criteria - Lead Agencies shall recover childcare payments that are the result of fraud. These payments shall be recovered from the party responsible for committing the fraud (45 CFR section 98.60). The Lead Agency must correctly identify and report fraud and take steps to recover payment.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - While DHS has a procedure for identifying and recovering payments resulting from fraud, via its internal audit process, it was unable to evidence that such audit(s) had been conducted during the fiscal year.

Further, internal controls were not operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of DHS's compliance with the specified requirements.

Effect - There may be prolonged, ongoing cases of unnecessary utilization and fraud that may be unnoticed and remain unreported by the program. Funds available are possibly being used inappropriately.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure consistent and systematic monitoring of requirements.

Recommendation - We recommend that DHS deploy resources that are given the responsibility to ensure periodic monitoring and compliance with fraud detection and repayment requirements throughout the fiscal year. DHS should also review its records retention policies to ensure that complete documentation is maintained, safeguarded, and available for review.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. An internal audit process is actively utilized, involving the exchange of caseloads between workers. Eligibility and subsidy determinations are cross-checked by different workers according to federally and locally established policies. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-070
Prior Year Finding Number: 2021-055
Compliance Requirement: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities

Program: U.S. Department of Health and Human Services
Government Department/Agency: Department of Justice (DOJ)

Child Support Enforcement
ALN: 93.563
Award #: 2001VICSES, 2101VICSES, 2201VICSES
Award Year: 10/01/2019 - 09/30/2020
10/01/2020 - 09/30/2021
10/01/2021 - 09/30/2022

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - In our review of 60 out of 1,527 payroll transactions, we noted 38 timesheets did not contain evidence of review and approval of the respective employee's supervisor.

Questioned Costs - None.

Context - This is a condition identified per review of the DOJ's compliance with the specified requirements using a statistically valid sample. The total amount of payroll expenditures charged to the program were \$3,457,487. Total amount sampled is \$154,186. The known amount of the exceptions is \$102,505.

Effect - Failure to properly review and support expenditures can result in noncompliance with laws and regulations along with loss of funding.

Cause - DOJ does not appear to have adequate policies and procedures in place to ensure internal controls are consistently and diligently applied.

Recommendation - We recommend that DOJ improve internal controls to ensure adherence to the Federal regulations related to the fiscal and administrative requirements for expending and accounting for payroll expenditures.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The DOJ will ensure that each timesheet is approved by the respective employee's supervisor before being forwarded to the DOJ Payroll Division for processing. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-071
Prior Year Finding Number: 2021-056
Compliance Requirement: Activities Allowed or Unallowed and Allowable Costs/Cost Principles

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

Social Services Block Grant
ALN: 93.667
Award #: Various
Award Year: Various

Criteria - The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires the non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonable ensure compliance with Federal statutes, regulations, and other terms and conditions of the Federal Award.

Condition - We sampled and selected 60 of 1,458 payroll transactions and noted 2 timesheets where hours worked were not reflected correctly on the payroll register. While non-compliance was not found, controls did not appear to be operating at a level of precision to ensure accuracy of the payroll register.

We also sampled 60 of 362 non-payroll transactions and noted 1 instance where the invoice did not have evidence of approval by authorized personnel.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of compliance with the specified requirements using a statistically valid sample.

Total amount of payroll expenditures charged to the program in fiscal year 2022 were \$3,814,841. Total amount sampled is \$180,651. The known amount of the exceptions is \$4,945.

Total amount of non-payroll expenditures charged to the program in fiscal year 2022 were \$1,919,342. Total amount sampled is \$956,768. The known amount of the exception is \$45,063.

Effect - Failure to properly review and support expenditures can result in noncompliance with laws and regulations along with loss of funding.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure compliance with applicable cost principles and maintenance of underlying documentation.

Recommendation - We recommend that DHS improve internal controls to ensure adherence to federal regulations related to the fiscal and administrative requirements for expending and accounting for payroll and non-payroll expenditures.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The Stats Timeforce system has been implemented, automating the time and attendance process and eliminating manual variances. Employees use a fingerprint to log their time, which, once vetted and approved, is sent to the Department of Finance for check processing. This automated process aligns with the ERP cost center listed on the employee's Notice of Personnel Action. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-072
Prior Year Finding Number: 2021-057
Compliance Requirement: Period of Performance

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

Social Services Block Grant
ALN: 93.667
Award #: Various
Award Year: Various

Criteria - A Non-Federal entity may charge to the Federal award only allowable costs incurred during the period of performance and any costs incurred before the Federal awarding agency or pass-through entity made the Federal award, only to the extent that they would have been allowable if incurred after the date of the Federal award and only with the written approval of the Federal awarding agency.

Additionally, the Uniform Guidance in 2 CFR Section 200.344(b), states that unless the federal awarding agency or pass-through entity authorized an extension, a non-Federal entity must liquidate all financial obligations incurred under the Federal award not later than 120 calendar days after the end date of the period of performance as specified in the terms and conditions of the Federal award.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires the non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonable ensure compliance with Federal statutes, regulations, and other terms and conditions of the Federal Award.

Condition - We sampled and selected 24 out of 164 expenditures and found 7 expenditures that were charged to the grant during the liquidation period and incurred outside the period of availability. Such expenditures totaled \$4,152. Further, outside of our sample, we found six expenditures that were charged to a grant after the liquidation period.

Additionally, internal controls do not appear to be operating at a level of precision to ensure grant expenditures are charged to the correct grant and within the allowable period of performance.

Questioned Costs - \$6,934.

Context - This is a condition identified per review of DHS' compliance with the specified requirements using a statistically valid sample. Total amount of expenditures subject to sampling were \$183,568. Total amount sampled is \$35,873.

Effect - DHS is not in compliance with the stated provisions. Failure to properly review and support expenditures can result in noncompliance with laws and regulations along with loss of funding.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure compliance with the required period of performance stipulations.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that DHS strengthen its process with respect to charging expenditures between various grant awards. We also recommend that DHS enhance its review process to properly determine the activities of each grant relative to the appropriate period of performance.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. As part of the close-out process, all open purchase orders are now submitted to the Department of Finance for closure. The grant close-out process has been shifted to the OMB to ensure the grant is no longer available for transaction entries or liquidations. Additionally, a dedicated Fiscal Analyst is being integrated into the workflow to ensure compliance. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-073
Prior Year Finding Number: 2021-058
Compliance Requirement: Reporting

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

Social Services Block Grant
ALN: 93.667
Award #: Various
Award Year: Various

Criteria - Each State or Territory must file various financial, programmatic, and special reports. Additionally, the requirements necessitate that all submitted reports should be supported by the underlying performance records and presented in accordance with program requirements.

More specifically for the program, in accordance with the compliance Supplement, the states and territories are required to submit to the Federal administering agency, the Office of Community Services (OCS), SF-425 'Federal Financial Report' and an annual 'Post Expenditure Report' (42 USC 1397e) no later than six months following the close of the fiscal year. Further, in accordance with OCS SSBG Supplemental Terms and Conditions, SSBG is required to submit an interim and final SF-425 report covering Year 1 and the entire 2-year of the project period, 90 days following Year 1 (FFY 1) and 90 days following the end of Year 2 (FFY 2), respectively.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires the non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonable ensure compliance with Federal statutes, regulations, and other terms and conditions of the Federal Award.

Condition - We sampled and selected 2 out of 4 financial (SF-425) and special (Post-Expenditure) reports and noted the following:

- 1 financial report was not available for review.
- For 1 special report, we noted no evidence of the date the report was prepared, reviewed, and submitted to the Federal grantor. Additionally, we were not able to agree the key line item of the report to the underlying records.

Additionally, internal controls do not appear to be operating at a level of precision to ensure federal reports are prepared accurately, reviewed and submitted timely, and maintained for inspection.

Questioned Costs - None.

Context - This is a condition identified per review of DHS' compliance with the specified requirements using a statistically valid sample.

Effect - DHS is not in compliance with the stated provisions. Failure to submit required reports could result in reduction or disallowance of Federal funding.

Cause - It appears that policies and procedures, including oversight over submission of required reports were not functioning as intended.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that DHS strengthen its process with respect to ensuring proper retention, monitoring, and review of the required reports by an appropriate official.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. Currently, there is a collaboration with Federal Partners to consolidate reporting in the Payment Management System portal, as there is no single report for the SSBG as required. Report requests are currently inconsistent with one consolidated grant. Additionally, pre and post expenditures are submitted through the portal, accompanied by a submission log. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-074
Prior Year Finding Number: 2021-061
Compliance Requirement: Allowable Costs/Cost Principles - Non-Payroll Activities

Program: U.S. Department of Health and Human Services
Government Department/Agency: Department of Human Services (DHS)

Medicaid Cluster
ALN: 93.775, 93.778
Award #: 75X0512
Award Period: 10/01/2015 - 09/30/2022

Criteria - 2 CFR Section 200.403, *Factors Affecting Allowability of Costs*, “Except where otherwise authorized by statute, costs must meet the following general criteria in order to be allowable under federal awards:

- a. Be necessary and reasonable for the performance of the federal award and be allocable thereto under these principles.
- b. Conform to any limitations or exclusions set forth in these principles or in the federal award as to types or amounts of cost items.
- c. Be consistent with policies and procedures that apply uniformly to both federally financed and other activities of the non-federal entity.
- d. Be accorded consistent treatment. A cost may not be assigned to a federal award as a direct cost if any other cost incurred for the same purpose in like circumstances has been allocated to the federal award as an indirect cost.
- e. Be determined in accordance with generally accepted accounting principles (GAAP), except, for state and local governments and Indian tribes only, as otherwise provided for in this part.
- f. Not be included as a cost or used to meet cost sharing or matching requirements of any other federally financed program in either the current or a prior period.
- g. Be adequately documented.”

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - In the prior year, BDO noted one instance where DHS paid a monthly fee for a trailer to store excess furniture and other administrative items. It was determined that the Medicaid staff no longer needed the trailer. The amount charged to the Medicaid program in fiscal year 2022 related to trailer totals \$4,870.

Further, internal controls were not operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - \$4,870.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Context - This is a condition identified per review of DHS' compliance with the specified requirements.

Effect - DHS is not in compliance with the stated provisions. Failure to properly review and support expenditures can result in noncompliance with laws and regulations along with loss of funding.

Cause - DHS does not have adequate policies and procedures in place to ensure that expenses are reviewed and approved to ensure reasonability and necessity.

Recommendation - We recommend that DHS improve internal controls to ensure adherence to Federal regulations related to the fiscal and administrative requirements for expending and accounting for non-payroll expenditures.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. This was an isolated occurrence during the transition of the MAP program from one building to another. Since the equipment could not be used at the new location, it was stored for future use. The Director of Asset Management now oversees the storage of inventory to prevent similar occurrences in the future. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-075
Prior Year Finding Number: 2021-062
Compliance Requirement: Eligibility

Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Human Services (DHS)

Medicaid Cluster

ALN: 93.775, 93.778

Award #: 75X0512

Award Period: 10/01/2015 - 09/30/2022

Criteria - Plan and eligibility requirements must comply with various Federal requirements. The Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-Federal entities receiving Federal awards (i.e. auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Additionally, in accordance with the State Plan under Title XIX of the Social Security Act, Section 4.7, *Maintenance of Records*, the Medicaid agency maintains or supervises the maintenance of records necessary for the proper and efficient operation of the plan, including records regarding applications, determination of eligibility, the provisions of medical assistance, and administrative costs, statistical, fiscal and other records necessary for reporting and accountability.

Condition - In our review of 60 out of 2,047 participant case files, we noted the following:

- For 4 participants, there was no documentation in the case file supporting the verification of income or resource requirements.
- For 1 participant, there was no evidence that the social security number was verified.
- For 16 participants, it does not appear the application was processed timely.
- For all 60 participants, there was no evidence that a review and approval of the eligibility determination had been performed.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of DHS' compliance with the specified requirements using a statistically valid sample.

Effect - Noncompliance with program requirements could result in disallowances of costs and program participants could be receiving benefits that they are not entitled to receive.

Cause - DHS does not appear to have adequate policies and procedures in place to ensure a consistent and systematic review of the data in its participant case files.

Recommendation - We recommend that DHS perform regular reviews of the data in its participant case files to ensure accuracy and completeness and confirming that only eligible participants are receiving the entitled benefits. Additional levels of review by a supervisor or manager can provide more timely quality assurance oversight over the eligibility process.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. DHS staff will collaborate with the PMO, hired to assist with the Public Health Emergency Unwind, to establish Standard Operating Policies and Procedures (SOPPs) for certification and recertification processes. DHS is in the process of hiring a Program Integrity Director and Medical Eligibility Quality Control (MEQC) staff, who will be responsible for reviewing completed case files. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-076
Prior Year Finding Number: 2021-063
Compliance Requirement: Reporting

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

Medicaid Cluster
ALN: 93.775, 93.778
Award #: 75X0512
Award Period: 10/01/2015 - 09/30/2022

Criteria - Each State or Territory must file various financial, programmatic, and special reports. Additionally, the requirements necessitate that all submitted reports should be supported by the underlying performance records and presented in accordance with program requirements.

In accordance with the Compliance Supplement, the State or Territory is required to submit CMS-64, *Quarterly Statement of Expenditures for the Medicaid Assistance Program*, thirty days after the end of the quarter.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-Federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We reviewed 2 out of the 4 quarterly CMS-64 reports submitted during the fiscal year and noted the following:

- 2 reports did not contain evidence of review or approval.
- 1 report had not been submitted in a timely manner (44 days late).

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the reporting compliance requirements.

Questioned Costs - None.

Context - This is a condition identified per review of DHS' compliance with the specified requirements using a statistically valid sample.

Effect - DHS is not in compliance with stated provisions and inaccurate information may have been reported to the Federal government.

Cause - It appears that policies and procedures, including review over reporting procedures were not functioning as intended.

Recommendation - We recommend that DHS reevaluate its policies and procedures to ensure proper monitoring and review of the required reports by an appropriate official who would ensure the information submitted is complete, accurate, consistent, and submitted within the required timeframe.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. As Medicaid staffing shortages are addressed, reports are submitted for review via email. To ensure access for audit purposes, the Department has implemented a shared folder where copies of approval emails and any time extension requests are stored, since the submission portal does not allow for attachments. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-077
Prior Year Finding Number: 2021-064
Compliance Requirement: Special Tests and Provisions - Utilization Control and Program Integrity

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

Medicaid Cluster
ALN: 93.775, 93.778
Award #: 75X0512
Award Period: 10/01/2015 - 09/30/2022

Criteria - The state plan must provide methods and procedures to safeguard against unnecessary utilization of care and services. In addition, the state must have (1) methods of determining criteria for identifying suspected fraud cases; (2) methods for investigating these cases; and (3) procedures, developed in cooperation with legal authorities, for referring credible allegations of fraud cases to law enforcement officials (42 CFR parts 455, 456, and 1002). Credible allegations of provider fraud must be referred to the state MFCU or an appropriate law enforcement agency in states with no certified MFCU (42 CFR Part 455.21).

The SMA must establish and use written criteria for evaluating the appropriateness and quality of Medicaid services. The agency must have procedures for the ongoing post-payment review, on a sample basis, of the need for, and the quality and timeliness of, Medicaid services. The SMA may conduct this review directly or may contract with an independent entity (42 CFR 456.5, 456.22 and 456.23).

In addition, the SMA as required per Section 1902(a)(68) - [42 USC 1396a(a)(68)] False Claims Education must ensure that providers and contractors receiving or making payments of at least \$5 million annually under a state's Medicaid program have (a) established written policies for all employees (including management) about the Federal False Claims Act, whistleblower protections, administrative remedies, and any pertinent state laws and rules; (b) included as part of these policies detailed provisions regarding detecting and preventing fraud, waste, and abuse; and (c) included in any employee handbook a discussion of the False Claims Act, whistleblower protections, administrative remedies, and pertinent state laws and rules.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-Federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - Upon investigation, DHS was not able to provide evidence of compliance with the above referenced compliance requirements. Specifically, we found the following:

- No evidence of a method of determining criteria for identifying suspected fraud cases.
- No evidence of a method for investigating these cases.
- No evidence of procedures, developed in cooperation with legal authorities, for referring credible allegations of fraud cases to law enforcement officials.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Further, we noted DHS had not provided evidence of established and used written criteria for evaluating the appropriateness and quality of Medicaid services, including procedures for the ongoing post-payment review.

Additionally, DHS did not provide evidence they ensure that providers and contractors receiving or making payments of at least \$5 million annually under a state's Medicaid program have (a) established written policies for all employees (including management) about the Federal False Claims Act, whistleblower protections, administrative remedies, and any pertinent state laws and rules; (b) included as part of these policies detailed provisions regarding detecting and preventing fraud, waste, and abuse; and (c) included in any employee handbook a discussion of the False Claims Act, whistleblower protections, administrative remedies, and pertinent state laws and rules.

Finally, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - None.

Context - This is a condition identified per review of DHS' compliance with the specified requirements.

Effect - There may be prolonged, ongoing cases of unnecessary utilization and fraud which may be unnoticed and remain unreported by the program. Funds available are possibly being used inappropriately, with no methodology of properly identifying or tracking the amounts.

Cause - DHS does not appear to have an effective system in place to address the program's requirements.

Recommendation - DHS should reconsider whether it would like to be directly responsible for Utilization Control and Program Integrity, or if the use of a QIO would better suit current needs. Once this is decided, DHS should take the necessary steps to ensure compliance with this requirement. The written procedures should reflect the actual actions to be taken. In the event a QIO is used, DHS should be involved throughout, so that it is aware of the program's vulnerabilities and has the opportunity to make the necessary changes for improvement in a timely manner.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. DHS has onboarded a Director of Program Integrity who will be responsible for establishing the Quality Control Unit, which will collaborate with the Medical Eligibility Quality Control (MFCU) on behalf of the Medicaid Program. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-078
Prior Year Finding Number: 2021-065
Compliance Requirement: Special Tests and Provisions - Inpatient Hospital and Long-Term Care Facility Audits

Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Human Services (DHS)

Medicaid Cluster

ALN: 93.775, 93.778

Award #: 75X0512

Award Period: 10/01/2015 - 09/30/2022

Criteria - The SMA pays for inpatient hospital services and long-term care facility services through the use of rates that are economic and efficient and are in accordance with the state plan. To the extent the state pays reconciled costs, the SMA must provide for the filing of uniform cost reports for each participating provider in order to establish payment rates. The SMA must provide for the periodic audits of financial and statistical records of participating providers. The specific audit requirements will be established by the state plan (42 CFR 447.253).

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-Federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - DHS provides Medicaid services to eligible Territory residents through inpatient hospitals and long-term care facilities. These hospitals and facilities include various Territory agencies and third-party service providers. The costs incurred by these facilities are summarized in a cost report that is submitted to DHS. DHS awarded a contract in August 2017 for the audit of these cost reports; however, we noted that DHS had not received any audited cost reports for fiscal year 2022.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - None.

Context - This is a condition identified per review of DHS' compliance with the specified requirements.

Effect - Without timely audits of the cost reports, DHS has no assurance that the costs incurred by the medical facilities are actual costs incurred. Further, the difference between costs submitted for reimbursement and the costs actually reimbursed result in the use of local, rather than Federal, dollars to fund Medicaid expenditures.

Cause - DHS does not appear to have adequate policies and procedures in place for the provision of audited cost reports of its participating providers.

Recommendation - We recommend that DHS evaluate and develop policies and procedures to obtain and audit the cost reports. This will allow DHS to reduce the time between the Medicaid expenditures being incurred and the ultimate reimbursement from the Federal government.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. DHS is currently in the process of drafting the solicitation for bids on the project to address all outstanding periods. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-079
Prior Year Finding Number: 2021-066
Compliance Requirement: Special Tests and Provisions - ADP Risk Analysis and System Security Review

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

Medicaid Cluster
ALN: 93.775, 93.778
Award #: 75X0512
Award Period: 10/01/2015 - 09/30/2022

Criteria - SMAs must establish and maintain a program for conducting periodic risk analyses to ensure that appropriate and cost-effective safeguards are incorporated into new and existing systems. SMAs must perform risk analyses whenever significant system changes occur. SMAs shall review the ADP system security installations involved in the administration of HHS programs on a biennial basis. At a minimum, the reviews shall include an evaluation of physical and data security operating procedures, and personnel practices. The SMA shall maintain reports on its biennial ADP system security reviews, together with pertinent supporting documentation, for HHS on-site reviews (45 CFR 95.621).

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-Federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - DHS did not perform the required ADP Risk Analysis and System Security Review for the systems that support the Medicaid Program.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the compliance requirement.

Questioned Costs - None.

Context - This is a condition identified per review of DHS' compliance with the specified requirements.

Effect - The absence of policies to ensure these analyses and reviews are performed may lead to physical and data security issues and noncompliance with program requirements. Further, DHS' risk of incomplete or inaccurate data processing, or worse, the risk of fraud, increases.

Cause - DHS' records do not permit a determination as to the sufficiency of the design and operation of key controls surrounding the environment in which the Medicaid claims reside.

Recommendation - We recommend that management should perform and review a risk analysis and system security review for all systems that support the Medicaid program. All issues should be addressed by management. If management becomes aware that such a report will not be available, we recommend that management conduct its own review.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. DHS had secured a commitment from a vendor who was unable to perform the required services. Currently, DHS is working through the procurement process with DPP to identify a new vendor to perform the mandated services. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-080
Prior Year Finding Number: 2021-069
Compliance Requirement: Special Tests and Provisions - Medicaid National Correct Coding Initiative

Program:
U.S. Department of Health and Human Services

Government Department/Agency:
Department of Human Services (DHS)

Medicaid Cluster
ALN: 93.775, 93.778
Award #: 75X0512
Award Period: 10/01/2015 - 09/30/2022

Criteria - States or Territories are required to incorporate six National Correct Coding Initiative (NCCI) methodologies into the state Medicaid Programs pursuant to requirements of Section 6507 of the Affordable Care Act (section 1903(r) of the Social Security Act). The purpose of the NCCI Program is to promote correct coding, prevent coding errors, prevent code manipulation, reduce improper payments and reduce the paid claims improper payment rate.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-Federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to reasonably ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - DHS did not provide documentation to verify that the quarterly NCCI edit files were uploaded timely. In addition, DHS did not have the required signed Confidentiality Agreements in place as required by Technical Guidance Manual, sections 7.1.1 and 7.1.2 during fiscal year 2022.

Further, it does not appear that DHS has internal controls in place to ensure compliance with the compliance requirement.

Questioned Costs - Not determinable.

Context - This is a condition identified per review of DHS' compliance with the specified requirements.

Effect - DHS is not in compliance with regulations for the Medicaid National Correct Coding Initiative.

Cause - DHS did not establish internal controls to ensure that the NCCI methodologies were incorporated into the Medicaid program or that the required signed Confidentiality Agreements were in place.

Recommendation - We recommend that DHS establish internal controls to ensure compliance with the requirements of the Medicaid National Correct Coding Initiative and incorporate the NCCI methodologies into the state Medicaid program.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. Although DHS indicated that documentation supporting the download and incorporation of NCCI methodologies was available for review and that the MMIS has these methodologies built into the system, OMB recommends that DHS implement internal controls to ensure the NCCI methodologies are consistently incorporated into the Medicaid Program. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-081
Prior Year Finding Number: 2021-072
Compliance Requirement: Reporting

Program:

U.S. Department of Homeland Security

Disaster Grants - Public Assistance (Presidentially
Declared Disasters)

ALN: 97.036

Award#: FEMA-4335-DR, FEMA-4340-DR-VI, FEMA-4513-DR

Award Periods: 09/20/2017 - 09/07/2026

09/07/2017 - 09/16/2025

04/02/2020 - 05/11/2023

Government Department/Agency:

Virgin Islands Territorial Emergency
Management Agency (VITEMA)

Criteria - Each State or Territory must file various financial, programmatic, and special reports. Additionally, the requirements necessitate that all submitted reports should be supported by the underlying performance records and presented in accordance with program requirements.

More specifically for the program, the Territorial agreement between VITEMA and FEMA dictates that all performance reports must be submitted within 30 days of the end of each quarter. Further, under the requirements of the Federal Funding Accountability and Transparency Act (FFATA) (Pub. L. No. 109-282), as amended by Section 6202 of Public Law 110-252, hereafter referred as the "Transparency Act" that are codified in 2 CFR Part 170, recipients (i.e., direct recipients) of grants or cooperative agreements are required to report first-tier subawards of \$30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS).

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We reviewed 8 out of the 67 reports submitted during the fiscal year and noted that 6 financial reports and 2 performance reports did not have supporting documentation to reconcile the amounts reported to the appropriate financial and non-financial records of VITEMA.

We further noted that Project Close Out Reports for D4335 (22 reports) and D4340 (25 reports) were not submitted within 180 days of project completion.

Finally, we selected 8 projects with first-tier subawards greater than \$30,000 and found that none had submitted FFATA reports.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

The results of the testing performed over Transparency Act are outlined in the table below.

Transactions Tested	Subaward not reported	Report not timely	Subaward amount incorrect	Subaward missing key elements
8	8	8	Not determinable	Not determinable
Dollar Amount of Tested Transactions	Subaward not reported	Report not timely	Subaward amount incorrect	Subaward missing key elements
\$8,572,831	\$8,572,831	\$8,572,831	Not determinable	Not determinable

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the reporting compliance requirements.

Questioned Costs - None.

Context - This is a condition identified per review of VITEMA’s compliance with the specified requirements using a statistically valid sample.

Effect - VITEMA is not in compliance with stated provisions and inaccurate information may have been reported to the Federal government.

Cause - It appears that policies and procedures, including review over reporting procedures were not functioning as intended. Further, VITEMA does not have adequate control over maintenance of the underlying documentation used in preparing various reports.

Recommendation - We recommend that VITEMA reevaluate its policies and procedures to ensure proper retention, monitoring, and review of the required reports by an appropriate official who would ensure that information submitted is complete, accurate, consistent and submitted within the required timeframe.

Views of Responsible Officials - The Government concurs with the auditor’s findings and recommendations. A formalized process for the preparation and submission of financial and performance reports is now established, with clearly defined roles and responsibilities. The Disaster Program Financial Specialist is tasked with preparing the reports quarterly and submitting them to the Territorial Public Assistance Officer for review. The planned corrective actions are presented in the Government’s Corrective Action Plan attached as Appendix B to the Single Audit Report.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-082
Prior Year Finding Number: N/A
Compliance Requirement: Subrecipient Monitoring

Program:

U.S. Department of Homeland Security

Government Department/Agency:

Virgin Islands Territorial Emergency
Management Agency (VITEMA)

Disaster Grants - Public Assistance (Presidentially
Declared Disasters)

ALN: 97.036

Award#: FEMA-4335-DR, FEMA-4340-DR-VI, FEMA-4513-DR

Award Periods: 09/20/2017 - 09/07/2026

09/07/2017 - 09/16/2025

04/02/2020 - 05/11/2023

Criteria - A pass-through entity (PTE) must:

Identify the Award and Applicable Requirements - Clearly identify to the subrecipient:

1. The award as a subaward at the time of subaward (or subsequent subaward modification) by providing the information described in 2 CFR section 200.331(a)(1);
2. All requirements imposed by the PTE on the subrecipient so that the federal award is used in accordance with federal statutes, regulations, and the terms and conditions of the award (2 CFR section 200.331(a)(2));
3. Any additional requirements that the PTE imposes on the subrecipient in order for the PTE to meet its own responsibility for the federal award (e.g., financial, performance, and special reports) (2 CFR section 200.331(a)(3)).

Evaluate Risk - Evaluate each subrecipient's risk of noncompliance for purposes of determining the appropriate subrecipient monitoring related to the subaward (2 CFR section 200.332(b)). This evaluation of risk may include consideration of such factors as the following:

1. The subrecipient's prior experience with the same or similar subawards;
2. The results of previous audits including whether or not the subrecipient receives single audit in accordance with 2 CFR Part 200, Subpart F, and the extent to which the same or similar subaward has been audited as a major program;
3. Whether the subrecipient has new personnel or new or substantially changed systems; and
4. The extent and results of federal awarding agency monitoring (e.g., if the subrecipient also receives federal awards directly from a federal awarding agency).

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Monitor - Monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, complies with the terms and conditions of the subaward, and achieves performance goals (2 CFR sections 200.332(d) through (f)). In addition to procedures identified as necessary based upon the evaluation of subrecipient risk or specifically required by the terms and conditions of the award, subaward monitoring must include the following:

1. Reviewing financial and programmatic (performance and special reports) required by the PTE.
2. Following-up and ensuring that the subrecipient takes timely and appropriate action on all deficiencies pertaining to the federal award provided to the subrecipient from the PTE detected through audits, on-site reviews, and other means.
3. Issuing a management decision for audit findings pertaining to the federal award provided to the subrecipient from the PTE as required by 2 CFR section 200.521.

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We selected 8 of 25 subrecipients and found the following:

- 5 instances where we were unable to obtain subrecipient agreements.
- 8 instances where we were unable to obtain Quarterly Progress Reports.
- 3 instances with no Certification Letter of Completion of Work and Disaster Response and Recovery Final Inspection Report.
- 8 instances with no supporting documentation that VITEMA verified that subrecipients expected to be audited as required by 2 CFR part 200, subpart F.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the subrecipient monitoring compliance requirements or proper identification of subrecipients.

Questioned Costs - None.

Context - This is a condition identified per review of VITEMA's compliance with the specified requirements using a statistically valid sample. The total amount of expenditures passed through to subrecipients in fiscal year 2022 were \$205,714,063. The total amount of our sample totaled \$190,927,885.

Effect - VITEMA is not in compliance with the stated provisions. Failure to properly identify and monitor subrecipients can result in noncompliance with laws and regulations and failure to meet the programs objectives.

Cause - VITEMA does not have internal controls in place to properly identify and monitor subrecipients to ensure adherence to applicable federal regulations, including expending federal awards for allowable expenditures.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Recommendation - We recommend that VITEMA implement policies, procedures, and controls to ensure subrecipients are identified and monitored in accordance with federal statutes.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. The formal process for completing and retaining Subrecipient Agreements is now operational to ensure compliance with programmatic obligations. As the Recipient, the Territory is responsible for notifying the Subrecipient when federal funds are obligated and providing them with a subrecipient agreement outlining the program's terms and conditions. The Disaster Program Financial Specialist is responsible for ensuring that the subrecipient agreement is signed by both the Applicant and the Governor's Authorized Representative and provided to the Territorial Public Assistance Officer. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

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Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Finding Number: 2022-083
Prior Year Finding Number: 2021-074
Compliance Requirement: Reporting

Program:

U.S. Department of Homeland Security

Hazard Mitigation Grant Program

ALN: 97.039

Award #: FEMA-4335-DR, FEMA-4340-DR-VI

Award Periods: 09/20/2017 - 09/30/2027
09/07/2017 - 11/30/2025

Government Department/Agency:

Virgin Islands Territorial Emergency
Management Agency (VITEMA)

Criteria - Each State or Territory must file various financial, programmatic, and special reports. Additionally, the requirements necessitate that all submitted reports should be supported by the underlying performance records and presented in accordance with program requirements.

More specifically for the program, the Territorial agreement between VITEMA and FEMA dictates that all performance reports must be submitted within 30 days of the end of each quarter. Further, under the requirements of the Federal Funding Accountability and Transparency Act (FFATA) (Pub. L. No. 109-282), as amended by Section 6202 of Public Law 110-252, hereafter referred as the "Transparency Act" that are codified in 2 CFR Part 170, recipients (i.e., direct recipients) of grants or cooperative agreements are required to report first-tier subawards of \$30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS).

Further, the Uniform Guidance in 2 CFR Section 200.303, *Internal Controls*, requires that non-federal entities receiving Federal awards (i.e., auditee management) establish and maintain internal control designed to ensure compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.

Condition - We reviewed 8 out of the 16 reports submitted during the fiscal year and noted the following:

- 2 performance reports did not agree to the underlying records.
- 1 performance report had not been submitted in a timely manner (10 days late).
- 3 performance reports submitted did not contain evidence of review and approval.
- 3 financial reports did not contain evidence of review and approval.
- 3 financial Reports did not have sufficient supporting documentation to validate accounting records agree with the reports.
- FFATA reports had not been prepared and submitted.

Further, it does not appear that the controls in place are operating at a level of precision to ensure compliance with the reporting compliance requirements.

Questioned Costs - None.

Government of the United States Virgin Islands

Schedule of Findings and Questioned Costs Year Ended September 30, 2022

Context - This is a condition identified per review of VITEMA's compliance with the specified requirements using a statistically valid sample.

Effect - VITEMA is not in compliance with stated provisions and inaccurate information may have been reported to the Federal government.

Cause - It appears that policies and procedures, including review over reporting procedures were not functioning as intended. Further, VITEMA does not have adequate control over maintenance of the underlying documentation used in preparing various reports.

Recommendation - We recommend that VITEMA reevaluate its policies and procedures to ensure proper retention, monitoring, and review of the required reports by an appropriate official who would ensure that information submitted is complete, accurate, consistent and submitted within the required timeframe.

Views of Responsible Officials - The Government concurs with the auditor's findings and recommendations. A process for the preparation and submission of financial and performance reports will be formalized, with clear roles and responsibilities outlined. The Disaster Program Account Supervisors will be responsible for preparing the reports on a quarterly basis and submitting them to the Territorial Hazard Mitigation Officer for review. The review process will include thorough reconciliation between the reports and supporting data, such as accounting records. The planned corrective actions are presented in the Government's Corrective Action Plan attached as Appendix B to the Single Audit Report.

Management's Appendices

Summary Schedule of Prior Audit Findings

GOVERNMENT OF
THE UNITED STATES VIRGIN ISLANDS



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DEPARTMENT OF FINANCE

Appendix A
Summary Schedule of Prior Audit Findings

Section I - Financial Statement Findings

Finding 2021-001, 2020-001, 2019-001, 2018-001, 2017-001, 2016-009, 2015-009 and 2014-009: Financial Position

Deficits in Unrestricted Net Position

Current Status: Repeated. Finding 2022-001 B.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government is continuing with its recovery efforts of working with federal partners, attracting new industries, improving financial controls, monitoring cash flows, and rebuilding equity.

Plan Funding Considerations

Current Status: Repeated. Finding 2022-005 H.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Virgin Islands Public Finance Authority created the Matching Fund Special Purpose Securitization Corporation (Corporation) for the purpose of refunding and restructuring the matching fund bonds of the Government. In addition, the Corporation placed a funding note with GERS secured by a subordinate lien on the matching funds and is projected to pay out \$3.8 billion to GERS through 2051.

Policy decisions to investigate post-employment benefit alternatives, and to establish special funds for post-employment benefits, are under the purview of the Legislature of the Virgin Islands.

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Government Insurance Fund

Current Status: Corrective action was taken. Finding not repeated in the current year.

Finding 2021-002, 2020-002, 2019-002, 2018-002, 2017-003, 2016-001, 2015-001 and 2014-001: Year-End Close Process

Timeliness and Methodology of Close Process

Current Status: Repeated. Finding 2022-001 A.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: Aggressive timelines are established for a timely year-end process. The Department of Finance (DOF) is in the process of standardizing the reporting necessary to aid in a successful and timely audit by collectively working on templates that will assist the agencies in reporting the necessary data. Accountability measures must be in effect to remove employees that are ineffective, while recruiting for accounting talent. DOF is aware that to achieve uniformity across all agencies on finance matters, DOF will have to assess the needs, skillset, and resources for the agencies and provide a sole position that will be able to monitor the success. Additionally, the Government will establish a formal review and approval process for the Major Funds Calculation.

Journal Entries

Current Status: Repeated. Finding 2022-001 C.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: Department of Finance recognized that it needs to have more feet on the ground to be able to approve journals. As such, training has been in effect and there are more people that will be able to assist with journals, especially when people are on leave etc.

Additionally, certain journals are systematically generated, resulting in the same individual serving as both the creator and approver. These typically include year-end closing journals. Moving forward, the Department of Finance will ensure that proper documentation is maintained within the system.

Finding 2021-003, 2020-003, 2019-003, 2018-003, 2017-004, 2016-002, 2015-002 and 2014-003: Revenue and Receivables

Reconciliation of Subsidiary Registers

Current Status: Repeated. Finding 2022-002 A.

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Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: - For purposes of interim financial reporting, the Bureau, Office of the Lieutenant Governor, and the Department of Finance have begun quarterly reconciliation meetings to reduce end of year adjustments, reconcile non-sufficient funds checks in a timely manner, and implement internal safeguards to allow for more efficient reconciliation. In addition, the Government will implement the policy of reconciling tax receivables on a quarterly basis.

Optimum Usage of the Real Property Tax System

Current Status: Corrective action was taken. Finding not repeated in the current year.

Tax Return Processing Method

Current Status: Repeated. Finding 2022-002 B.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Bureau has launched its online gross receipts filing system. The Bureau is in the final testing stage of implementing the online income tax filing system.

Real Property Tax

Current Status: Repeated. Finding 2022-002 C.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Office of the Lieutenant Governor will continue to work with appropriate agencies and review its records to remove from its tax rolls any entities that are exempt from paying taxes. The Office of the Lieutenant Governor notes that Government agencies are generally not exempt from paying sewer fees that are collected via the tax bill on behalf of the Virgin Islands Waste Management Authority. Therefore, these entities will receive tax bills for sewer fees only.

Other Revenues

Current Status: Repeated. Finding 2022-002 D.

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Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: In an effort to provide adequate supporting documentation for sampled items, the Government will ensure that the procedures to attach the documents are fully adhered to. The Government will conduct spot checks to ensure employees are adhering to this process.

Finding 2021-004, 2020-004, 2019-004, 2018-004, 2017-005, 2016-003, 2015-003 and 2014-004: Grants Management

Control Systems Over the Schedule of Expenditures of Federal Awards

Current Status: Repeated. Finding 2022-003 A.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The review of ALN, expenditures, and cash receipts postings to grants will occur as part of the quarterly system closings. Continuous reconciliations of the SEFA with departments and agencies will also be implemented.

Federal Grants and Contributions

Current Status: Repeated. Finding 2022-003 B.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Department of Finance monitors the federal receivables and provides the agencies with reports showing outstanding drawdowns. In addition, a private firm has been contracted to work directly with the agencies to reconcile the Government's federal receivables.

Federal Grants Accounting

Current Status: Repeated. Finding 2022-003 C.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government has implemented measures that will ensure strict adherence to its reconciliation and review policies and procedures.

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Finding 2021-005, 2020-005, 2019-005, 2018-005, 2017-002, 2017-006, 2016-004, 2015-004 and 2014-005: Capital Assets and Related Expenditures

Record Keeping

Current Status: Repeated. Finding 2022-004 A.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Department of Finance will review the controls in place and update the necessary manuals to address all of the recommendations set forth.

Reconciliation and Review of Subsidiary Registers

Current Status: Repeated. Finding 2022-004 B.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: To verify that all assets in the subsidiary register are reviewed and updated with sufficient descriptions, corrected acquisition dates, and recalculated accumulated depreciation, the Capital Assets team—comprising key individuals from various departments and led by the Department of Property and Procurement and the Lieutenant Governor’s Office—will identify land assets and confirm what is recorded in the books. An update to the policies and procedures will be expedited to specify how often they are revised and the frequency of working sessions for reconciliations. Revision of the Asset Policy and Procedural Manual is underway, along with continued collaboration between the Department of Finance, Department of Property and Procurement, and Department of Public Works regarding the development of the Capital Assets team.

Construction in Progress (CIP) Monitoring

Current Status: Repeated. Finding 2022-004 C.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Department of Property and Procurement in collaboration with key individuals in other agencies will provide findings internally for areas where this step was missed, including some accountability. The Capital Assets team has already begun deliberating on how the Government can capture this at the time of final payment. DPP will also review the policy and update accordingly.

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Capital Assets Impairment Process

Current Status: Repeated. Finding 2022-004 D.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: In an effort to implement a formal process whereby a periodic impairment assessment is conducted and to ensure that all disposals and retirements are consistently processed, the Government will identify key personnel from various departments and agencies to form a Capital Assets team in addition to full implementation of the fixed assets module within the ERP system. There is a project management software that houses all CIP information.

Capital Assets - Business-Type Activities

Current Status: Repeated. Finding 2022-004 E.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government will review the recommendations and collaborate with relevant parties.

Finding 2021-006, 2020-006, 2019-006, 2018-006, 2017-007, 2016-005, 2015-005 and 2014-006: Recording of Liabilities

Retroactive Pay Liability

Current Status: Repeated. Finding 2022-005 A.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Division of Personnel (DOP) will work with the Office of Collective Bargaining (OCB) to develop a master file that will serve as a clearinghouse for collective bargaining agreements and negotiated pay rates for unionized public sector workers.

The Government's Chief Negotiator will take the lead in developing the master file containing negotiated pay rates. OCB management will coordinate with the Division of Personnel's staff, to include the Director and Information Technology/Records Management staff, to first develop a firm number with regard to the Government's retroactive obligation. This process has already started. The Division of Personnel can only confirm the research that was done based on the Retroactive Wage Commission project.

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DOP Information Technology staff is ready to work with the Office of Collective Bargaining/Chief Negotiator, designated as the lead, on the development of a master file that will serve as the clearinghouse for all collective bargaining agreements.

To assist with the past retroactive calculation and on-going payments to individuals and their respective survivors, the division is designing a central repository portal that will contain total obligations due and payments made to date.

Additionally, on a bi-annual basis, the team will meet in order to compare negotiated employee salary rates to those contained in the official personnel records within the ERP system database. It must be noted that DOP functions as a facilitator with regard to the hiring process and relies on official financial information from OCB and the Office of Management and Budget (OMB). OCB negotiates and interprets contract language for unionized public sector workers while OMB certifies the availability of funding for the purpose of wage implementation. DOP then reviews, audits, and implements newly negotiated wages.

Medical Malpractice Liability

Current Status: Repeated. Finding 2022-005 B.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Department of Health is in the process of submitting a Request for Proposal (RFP) to solicit an actuary to perform the evaluation.

Accounts Payable

Current Status: Repeated. Finding 2022-005 D.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Department of Finance will work with Tyler Munis on utilizing the Accounts Payable Module and will work with Office of Management and Budget to hire an Accounts Payable Analyst who will be solely responsible to make the necessary monthly updates and adjustments while dedicating all of their time to work with D&A on entering invoices in timely. The Accounting Analysts will ensure that the invoices are entered pursuant to Standard of Operating Procedures and Policies (SOPP) 130.

Landfill Closure and Post Closure Costs Liability

Current Status: Repeated. Finding 2022-005 E.

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Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government is working with its consultants to review the work and write a report to implement monitoring controls and ensure that all calculations are reviewed timely.

Quality of Census Data

Current Status: Repeated. Finding 2022-005 F.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: A request for proposal is currently being advertised to obtain a vendor who will provide a census data management system to assist with maintaining current and accurate records.

Finding 2021-007, 2020-007, 2019-007, 2018-007, 2017-008, 2016-006, 2015-006 and 2014-007: Management of the Medicaid Program

Cost Report Audits, System Security Review, and Approvals

Current Status: Repeated. Finding 2022-006.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: For the cost report audits, the Medicaid Assistance Program continues to work with the selected vendor to complete the requirements. For the Eligibility System, a vendor has been selected and the contract is in process. Additionally, the Medicaid Program will work closely to ensure all information is provided relative to the environment for the claims.

Finding 2021-008, 2020-008, 2019-008, 2018-008, 2017-009, 2016-007, 2015-007 and 2014-008: Unemployment Insurance Trust Fund

Account Reconciliation Process

Current Status: Repeated. Finding 2022-007.

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Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Virgin Islands Department of Labor (VIDOL) hired a Financial Analyst to reconcile the Unemployment Insurance Trust Fund to ensure compliance with Cash Management Improvement Act (CMIA) and Social Security Act clearance and depository regulations. The Trust Fund is in good standing and being reconciled daily. The Virgin Islands Department of Labor (VIDOL) policies and procedures manual was approved by the U.S. Department of Labor in October 2021. The policies and procedures established address our ineffective internal controls, fiscal and administrative requirements for expending and accounting for all funds relative to the Unemployment Insurance Trust Fund accounts.

Finding 2021-009, 2020-009, 2019-009, 2018-009, 2017-010, 2016-008, 2015-008 and 2014-011: Workers Compensation Program

Plan Valuation Methodology

Current Status: Repeated. Finding 2022-008.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Department of Finance (DOF) will collaborate with VIDOL to consider the recommendations set forth. The newly implemented software, Ventiv, will assist in resolving the issues mentioned. Additionally, the Government Insurance Fund (GIF) will initiate a monthly Hospital Payables Inquiry request form for completion by the Workers Compensation Administration (WCA). The form will give the GIF a baseline from which we start and then track increases and decreases in payables going forward. It will also inform the GIF of any “special payment projects” undertaken or in progress at the WCA. This document will supplement the information provided to our actuary.

Finding 2021-010, 2020-010, 2019-010 and 2018-010: Other Postemployment Benefits Obligation

Administration and Recordkeeping

Current Status: Repeated. Finding 2022-008 B.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

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Corrective Action Plan: The Department of Finance has already begun working with the Division of Personnel on this matter. Going forward, we will continue to establish a process that will address the findings noted. The Division of Personnel can account for the receivables and payables of the Health Insurance Retiree Fund as an employee was hired as of January 2020, to monitor and track the accounting of the fund for the Group Health Insurance Unit.

Update of Mortality Tables

Current Status: Repeated. Finding 2022-008 C.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: For consistency, the mortality assumption (and other demographic assumptions) used in the valuation are the same as those used in the Government Employees' Retirement System (GERS) of the Virgin Islands' pension valuations. Updated assumptions will be implemented when the next experience study is performed for GERS.

Finding 2021-011, 2020-011, 2019-011, 2018-011, 2017-002, 2017-011, 2016-011, 2015-011 and 2014-010: Payroll, Related Accruals, and Other Expenditures

Payroll Expenditures

Current Status: Repeated. Finding 2022-009 A.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Department of Finance will collaborate with the Department of Human Services and Payroll Division to determine and consider the recommendations set forth. Additionally, the Department of Finance - Payroll Division will monitor overtime and work with the various agencies to ensure that it is appropriate and within the laws and collective bargaining agreements. In some cases, a state of emergency, overrides the normal overtime regulations appropriately.

Formalize Emergency Payroll Procedures

Current Status: Repeated. Finding 2022-009 D.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

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Corrective Action Plan: With infrastructure improvements due to climate change and technology advances in remote capabilities due to the global pandemic, the Government has made great strides in its controls to ensure continuation of normal operating procedures under the most stressful of circumstances. Protocols for emergency payroll processing are continuously updated.

Transactions with Personnel

Current Status: Repeated. Finding 2022-009 B.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Department of Finance implemented a government credit card program in fiscal year 2021 that includes training and an active P.O. for card issuance. The Department will coordinate with the Office of the Governor to strengthen, recommunicate, and monitor so that all other reimbursements are made in compliance with policies.

Reporting for Expenditures

Current Status: Repeated. Finding 2022-009 C.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government will continue to enforce the Standard of Operating Procedures and Policies (SOPP) that all invoices are attached in the ERP system and closely examine the invoice approval process. As part of the approval process, invoices will be closely reviewed to ensure expenditures are recorded in the proper period and are supported in the Accounts Payable module.

Finding 2021-012, 2020-012, 2019-012, 2018-012, 2017-012, 2016-010, 2015-010 and 2014-002: Bank Accounts

Strengthen Controls Over Bank Reconciliations

Current Status: Repeated. Finding 2022-010 A.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

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Corrective Action Plan: The Commissioner of Finance will enforce Title 33, Subtitle 3, Chapter 115, Subchapter III, Subsection 3261 which outlines the procedures for unpaid checks. Also, the Director of Treasury will ensure that bank reconciliations are prepared and reviewed on a timely basis. The Government will also work with the Munis consultants regarding implementation of a process tracking to determine when bank reconciliations are reviewed and approved.

Cash Pooling and Allocation(s)

Current Status: Repeated. Finding 2022-010 B.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Director of Treasury, with oversight from the Assistant Commissioner, will enhance the documentation provided to support the pooling and subsequent allocation of the cash accounts. Additional human capital has been provided to ensure that bank reconciliations are prepared timely as the Government continue to strive to improve the link between the confirmed cash account balances and cash balance per fund presented within the year-end financial statements.

Check Sequences

Current Status: Repeated. Finding 2022-010 C.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The ERP system does automatically generate check numbers for some accounts. To ensure controls are in place over the sequence of checks, controls will be established on the check series used and check series not used.

Finding 2021-013, 2020-013, 2019-013, 2018-013, 2017-013, 2016-012, 2015-012 and 2014-012: Information Technology Environment

User Access and Administration

Current Status: Repeated. Finding 2022-015.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

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Corrective Action Plan: Several enhancements have been made in alignment with correspondences to end users. Continuation of improvements is well underway. The Lieutenant Governor's Office has transitioned and upgraded its systems to address the issue of performing the re-certifications of user access security rights. Additionally, the MIS Director currently participates in regular meetings with the Bureau of Information Technology during which the implementation of a government-wide framework is being established.

Only members of the Computer Operations Group are Administrators on the Bureau of Internal Revenue domain. Also, a password lockout and complexity policy are in effect. All users must take part in the Bureau of Internal Revenue annual Disclosure and Computer Awareness training.

The Information Technology (IT) department has already created a recertification policy and are now working on the forms for supervisors to acknowledge. These documents will be ready by the next fiscal year. The password lockout policy will be implemented for the next fiscal year as well. The IT department have already had discussions with a vendor to provide this feature with Oracle Forms. VIDOL change management has been logged by emails and some word document forms that were created but not standardized.

VIDOL change management has been logged by emails and some word document forms that were created but not standardized. VIDOL IT is working on implementing a standardized change management system for the next fiscal year.

Proactive Approach to Cybersecurity

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2021-014, 2020-014 and 2019-014: Collateral of Depository

Current Status: Repeated. Finding 2022-016.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: Collateral reports are specific to the financial institution and may not include all quasi-governmental or component unit accounts if not identified as a government account when established at the financial institution. The Government will work with its banks to ensure any accounts identified are included on the collateral report of the related institution.

Finding 2021-015, 2020-015, 2019-015, 2018-014, 2017-014, 2016-013 and 2015-013: Landfill Consent Decrees

Current Status: Repeated. Finding 2022-017.

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Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government of the Virgin Islands is currently seeking funding, through the Virgin Islands Legislature, to address the funding concerns and to organize the workflow to timely complete reports to meet EPA decrees concerning the various issues.

Finding 2021-016, 2020-016, 2019-016, 2018-015, 2017-015, 2016-014 and 2015-014: Establishment of a Medical Malpractice Trust Fund

Current Status: Repeated. Finding 2022-018.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Department of Health has already established a Medical Malpractice fund, which is called the Reciprocal Insurance Fund.

Finding 2021-017, 2020-017, 2019-017, 2018-016, 2017-016 and 2016-015: Procurement Regulations

Current Status: Repeated. Finding 2022-014.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government will continue to take necessary measures to address noncompliance and perform periodic reviews of purchase orders, contracts, and profiles to ensure that internal policies and regulations are being adhered to.

Finding 2021-018, 2020-018, 2019-018, 2018-017 and 2017-017: Casino Control Commission

Current Status: Repeated. Finding 2022-019.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government has requested and is receiving the requisite reporting from the Casino Control Commission on a quarterly basis as covered by the V.I. Code.

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Summary Schedule of Prior Audit Findings

Section II - Federal Award Findings (By Program)

Program:

U.S. Department of Agriculture

Government Department/Agency:

Department of Human Services (DHS)

Supplemental Nutrition Assistance Program Cluster (SNAP)

ALN: 10.551, 10.561

Award #: 4VI400408

Award Year: 10/01/19 - 09/30/20

10/01/20 - 09/30/21

Finding 2021-019: Allowable Costs/Cost Principles - Payroll Activities

Current Status: Repeated. Finding 2022-020.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: DHS transitioned from a manual payroll process to the Government electronic Timeforce (STATS) system. All time and attendance are now vetted and approved through the various levels of applicable management, ultimately being approved by the Agency Head or designee. Payroll is generated based on the cost centers listed on the Notice of Personnel Action. Payroll is now reconciled by the Financial Analyst once it is posted by the Department of Finance to ensure that cost is applied appropriately. Additionally, a workflow is now established in the NOPA approval process to ensure the current org, objects and projects are listed on the Notice of Personnel Actions (NOPA) which is utilized for payroll purposes.

Finding 2021-020: Matching, Level of Effort, Earmarking

Current Status: Repeated. Finding 2022-021.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: DHS transitioned from a manual payroll process to the Government electronic Timeforce (STATS) system. All time and attendance are now vetted and approved through the various levels of applicable management, ultimately being approved by the Agency Head or designee. The payroll is generated based on the cost centers listed on the Notice of Personnel Action (NOPA). Processes are now in place ensuring each respective staff NOPA is updated at the start of each fiscal year to reflect new year's applicable ERP code. Additionally, once payroll costs are generated, it is reconciled by the dedicated Financial Analyst for SNAP. Additionally, a workflow is now established in the NOPA approval process to ensure the current org, objects and projects are listed on the Notice of Personnel Actions (NOPA) which is utilized for payroll purposes.

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Finding 2021-021, 2020-019, 2019-022, 2018-029 and 2017-031: Special Tests and Provisions - EBT Card Security

Current Status: Repeated. Finding 2022-022.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: A Standard Operating Procedures and Procedures (SOPP) is being prepared to detail the EBT Reconciliation process. Additionally, a Director of Support Services will be hired to review all reports.

Program:

U.S. Department of Agriculture

Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

ALN: 10.557

Award #: Various

Award Year: Various

Government Department/Agency:

Department of Health (DOH)

Finding 2021-022: Cash Management

Current Status: Repeated. Finding 2022-024.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: DOH will revise drawdown Standard Operating Procedures (SOPs) to mandate that all supporting documents include a signature or initial to certify that a proper review was conducted. DOH will update drawdown SOPs for Fiscal Year 2025, ensuring that all drawdown documentation includes a review confirmation. DOH will also incorporate this updated procedure into Federal Grants update training in December 2024 and make it accessible to all staff on Business Process Improvement SharePoint site.

Program:

U.S. Department of Commerce

Bipartisan Budget Act of 2018

ALN: 11.022

Award #: NA19NOS0220008, NA19NOS0220001,
NA19NMF0220004

Award Year: 10/01/2018 - 09/30/2023

04/01/2019 - 03/31/2021

08/01/2019 - 07/31/2024

Government Department/Agency:

Department of Planning and Natural Resources (DPNR)

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Finding 2021-023: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities

Current Status: On-going implementation. The Department of Planning & Natural Resources is continuing its efforts to ensure that all necessary payroll adjustments are completed accurately and in time.

Finding 2021-024: Reporting

Current Status: Corrected.

Program:

U.S. Department of the Interior

Government Department/Agency:

Various

Economic, Social, and Political Development
of the Territories

ALN: 15.875

Award #: Various

Award Year: Various

Finding 2021-025, 2020-025, 2019-030, 2017-074, 2015-062 and 2014-051: Cash Management

Current Status: Repeated. Finding 2022-030.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government of the Virgin Islands (GVI) is implementing significant reforms to strengthen financial accountability and improve internal controls within its agencies. The Executive Order directing CFOs of the Government agencies to report to the Department of Finance aims to streamline financial oversight and ensure that public funds are being managed effectively. The introduction of a Public Finance Policy to standardize procedures and ensure compliance with Cash Management regulations (including CFRs and other compliance rules) is an important step in maintaining transparency and minimizing financial risks across the various government agencies.

Finding 2021-026, 2020-026, 2019-031, 2017-075, 2015-063 and 2014-053: Equipment and Real Property Management

Current Status: Repeated. Finding 2022-031.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

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Corrective Action Plan: The Asset Management Division (AMD) has consistently followed Federal equipment and maintenance guidelines. Assets are tagged, and records are created using the Tyler Munis Resource Planning system (ERP). The serial numbers, model numbers, acquisition dates, cost of equipment, and agency that received the items are included. In 2022, AMD conducted inventory for four agencies, ensuring that all assets were accounted for and managed according to Federal regulations. Additionally, AMD have completed the Standard Operation Policies and Procedures (SOPP), which is currently in the approval process. Implementing SOPP is essential to enhancing internal controls and ensuring compliance with Federal regulations. Training sessions will be conducted for fixed assets employees across all the Government agencies to provide detailed insights and updates on the processes. It has been identified that additional staff will be required to support this initiative effectively.

Finding 2021-027, 2020-027 and 2019-032: Reporting

Current Status: Repeated. Finding 2021-032.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government will conduct a high-level review of internal control policies and closely monitor reports for completeness, accuracy, timeliness, and consistency with the guidelines, policies, and procedures established by the Cognizant Agency.

Additionally, to support this effort, an analyst will be assigned to track reporting schedules, oversee grant activity, and manage document storage for individual agencies. The analyst will regularly monitor the reporting schedule for each grant award to ensure timely submission of all required reports.

Program:

U.S. Department of Labor

Unemployment Insurance

ALN: 17.225

Award #: Various

Award Year: 10/01/2017 - 12/31/2023

Government Department/Agency:

Department of Labor (VIDOL)

Finding 2021-028, 2020-028, 2019-033, 2018-038, 2017-071, 2016-057, 2015-065 and 2014-054: Activities Allowed or Unallowed

Current Status: Repeated. Finding 2022-034.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

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Corrective Action Plan: VIDOL concurs with the auditors finding relative to the balance not reconciling with the general ledger. The underlying factor that caused the variance in this finding was related to the retrieved file for the audit, which did not cover the period of the review, thus the balances provided to the auditors would not reconcile with the source system and the Government ledger.

To avoid future occurrences, VIDOL has updated the source system report writer that produces query on balances for accounting and tracking ledger balances. VIDOL has also recently issued a request for a proposal to have a contractor assist in installing a Trust Fund accounting system infrastructure and procedures. This system is anticipated to correct many accounting deficiencies and improve operations. Based on the project plan the launch timeline is anticipated by third quarter of 2026. Once this system is operational, adequate personnel are hired and trained, postings and ledger balance should allow for more accurate data on account balances. This system will also provide a structure wherein accrual, month end, and year end system closes can occur.

Finding 2021-029: Eligibility

Current Status: Repeated. Finding 2022-035.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The agency has commenced reviewing the agency retention policies and training with staff on keeping records and files in a systematic sequence. In the third quarter of FY2025, the agency will be launching an electronic record keeping system for claims files that will provide a more comprehensive and structured mechanism for record retention. VIDOL staff will also be engaging with USDOL to have programmatic technical assistance with record retention. The agency is also engaging with USDOL to implement data validation in the operations which is intended to verify that eligibility and records are maintained. The agency's Integrity unit will commence regular compliance reviews for claimant eligibility in the 2nd quarter of FY2025, this review will assist in mitigating past errors and provide feedback on corrective actions that will assist in proper record retention.

Finding 2021-030: Reporting

Current Status: Repeated. Finding 2022-036.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

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Corrective Action Plan: VIDOL has obtained a federal grant award from USDOL, to assist in updating and redesigning of UI reporting and accounting system. This award is intended to rebuild the current reporting structure to assist with having complete, accurate, and timely processes in place. VIDOL has commenced work on preparing scope of works for the projects, and it is anticipated by 4th quarter of FY2026.

Finding 2021-031: Special Tests and Provisions - Employer Experience Rating

Current Status: Repeated. Finding 2022-037.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: VIDOL concurs with the auditors on finding relative to the balance not reconciling with the general ledger. The underlying factor that caused the variance in this finding was related to the retrieved file for the audit, which did not cover the period of the review, thus the balances provided to the auditors would not reconcile with the source system and the Government ledger.

To avoid future occurrences, VIDOL has updated the source system report writer that produces query on balances for accounting and tracking ledger balances. VIDOL has also recently issued a request for a proposal to have a contractor assist in installing a Trust Fund accounting system infrastructure and procedures. This system is anticipated to correct many accounting deficiencies and improve operations. Based on the project plan the launch timeline is anticipated by third quarter of 2026. Once this system is operational, adequate personnel are hired and trained, postings and ledger balance should allow for more accurate data on account balances. This system will also provide a structure wherein accrual, month end, and year end system closes can occur.

Finding 2021-032: Special Tests and Provisions - Match with IRS 940 FUTA Tax Form

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2021-033 and 2020-029: Special Tests and Provisions: UI Reemployment Programs: (WPRS and RESEA)

Current Status: Repeated. Finding 2022-038.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

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Corrective Action Plan: VIDOL will be implementing a RESEA case management system for reporting and program services. This case management system is currently in configuration phase of the project. Live production is expected by the 2nd quarter 2025. This system will be the official system of record for recording all services for RESEA claimants that participate in the program.

Program:
U.S. Department of Transportation

Government Department/Agency:
Department of Public Works (DPW)

Highway Planning and Construction Cluster
ALN: 20.205
Award #: Territorial Highway Program Implementation and
Stewardship Agreement
Award Year: 10/01/2016 - 09/30/2025

Finding 2018-042, 2017-070, 2016-050 and 2015-055: Equipment and Real Property Management

Current Status: In accordance with CFR 200.511(b)(3), no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2021-034: Procurement and Suspension and Debarment

Current Status: Corrective action was taken. Finding not repeated in current year.

Program:
U.S. Department of the Treasury
COVID-19 - Coronavirus Relief Fund
ALN: 21.019
Award #: N/A
Award Year: 03/02/2020 - 12/31/2021

Government Department/Agency:
Office of Management and Budget
(OMB)

Finding 2021-035 and 2020-031: Reporting

Current Status: Repeated. Finding 2022-040.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: An analyst will be assigned to track reporting schedules, grant activity and store documents. The analyst will regularly monitor the reporting schedule for each grant award to ensure that all reports are submitted in a timely manner.

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Finding 2021-036 and 2020-032: Subrecipient Monitoring

Current Status: Repeated. Finding 2022-041.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: OMB will develop and enforce a robust framework that includes detailed monitoring procedures, regular compliance checks, and comprehensive oversight mechanisms. This framework will ensure that all subrecipients adhere to federal requirements, thereby promoting accountability and proper use of federal funds. These measures will help mitigate risks, enhance transparency, and ensure that subrecipients fulfill their obligations under federal statutes effectively.

Program:

U.S. Department of the Treasury

Government Department/Agency:

Office of Management and Budget (OMB)

COVID-19 - Coronavirus State and Local Fiscal Recovery
Funds

ALN: 21.027

Award #: N/A

Award Period: 03/03/2021 - 12/31/2024

Finding 2021-037: Allowable Costs/Cost Principles - Non-Payroll Activities

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2021-038: Procurement and Suspension and Debarment

Current Status: Repeated. Finding 2022-043.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government has since updated its procurement laws and has issued revised procurement manuals, along with issuing position-specific Standard Operating Procedures. Processes for enforcing Internal controls and adherence to procurement laws have been established and are regularly reinforced.

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The Government, in late January and early February 2025, conducted the Government-wide training on the updated procurement laws and re-established expectations as it pertains to processes and maintaining full and open competition. The Government has begun providing User Agencies with access to GVIBUY to enable them to perform informal solicitations in the eProcurement system. Further targeted training on this process will continue over time, ensuring User Agencies prioritize full and open competition in their procurement activities and will give the Department of Property and Procurement more oversight and compliance powers.

Finding 2021-039: Reporting

Current Status: Repeated. Finding 2022-044.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: OMB has established a reporting approval memo in which the OMB Director signs acknowledging the review and approval of the Treasury reports starting in calendar year 2024 reporting. OMB has improved the collection and storage of underlying supporting financial information for all projects being reported in the quarterly reports and can provide the necessary support upon request as of FY23.

Program:

U.S. Environmental Protection Agency

Drinking Water State Revolving Fund Cluster

ALN: 66.468

Award #: Various

Award Year: Various

Government Department/Agency:

Department of Planning and Natural Resources (DPNR)

Finding 2021-040, 2020-036 and 2019-036: Allowable Costs/Cost Principles - Payroll Activities

Current Status: On-going implementation. The Department of Planning & Natural Resources is still in the process of hiring fiscal staff that will be responsible for preparing, updating, and maintaining the necessary documentation needed for the program to update Notice of Personnel Action's (NOPAs).

Program:

U.S. Department of Education

Special Education Cluster (IDEA)

ALN: 84.027A

Award #: Various

Award Periods: Various

Government Department/Agency:

Department of Education (VIDE)

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Finding 2021-041: Equipment and Real Property Management

Current Status: Repeated. Finding 2022-046.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: VIDE acknowledges the finding regarding the management and documentation of federally funded equipment. VIDE will ensure the reliability of its asset tracking system and ensure the maintenance of a centralized record of all assets acquired with federal funds, to include property description, serial number or other identification number, source of property, titleholder, acquisition date, cost of the property, percentage of Federal participation, location, use and condition of the property, and disposition information. The Procurement Division will schedule quarterly inventory audits and reconciliation processes to ensure all federal program assets are accounted for and that records align with actual inventory. Any discrepancies identified during these audits will be resolved promptly. The Fixed Asset Director will create a protocol to facilitate regular communication and updates among Programs/Divisions responsible for asset acquisition, maintenance, and recordkeeping. Monthly status reports on federal asset records will be required from each Program/Division to ensure data accuracy and timely updates.

Finding 2021-042 and 2018-044: Matching, Level of Effort, Earmarking

Current Status: Repeated. Finding 2022-047.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: VIDE acknowledges the audit finding related to matching, level of effort, earmarking requirements, and recognizes the need for stronger internal controls and improved documentation to ensure full compliance with federal regulations. To address the finding, VIDE is committed to enhancing monitoring. VIDE will establish a dedicated team within the Federal Grants Office to conduct quarterly reviews of documentation, including student counts, poverty data, and funding allocations, and to document all monitoring activities and findings. The dedicated team will also report any identified issues to management and recommend corrective actions. The IDEA State Office will establish clear procedures for Local Educational Agencies (LEAs) to report student counts and poverty data, develop a process for verifying the accuracy of this data, and ensure all necessary data is collected and documented to support level of effort and earmarking calculations. To ensure all relevant staff understand the new policies and procedures, VIDE will provide comprehensive training.

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Program:

U.S. Department of Education

Government Department/Agency:

Department of Education (VIDE)

Consolidated Grant to the Outlying Areas

ALN: 84.403A

Award #: S403A170004, S403A180004,
S403A190004, S403A200004

Award Periods: 07/01/2017 - 09/30/2020

07/01/2018 - 09/30/2021

07/01/2019 - 09/30/2022

07/01/2020 - 09/30/2021

Finding 2021-043: Cash Management

Current Status: Repeated. Finding 2022-048.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: VIDE acknowledges the findings related to cash management processes under the U.S. Department of Education Consolidated Grant. VIDE is committed to implement corrective actions to enhance cash management procedures and maintain compliance with U.S. Department of Education conditions. VIDE will reinforce its procedure that mandates completion of all drawdown requests within 24 hours after receiving the request from the TPFA. To maintain compliance and prevent any delays in processing drawdown requests, VIDE will ensure designated individuals are trained to process requests when the primary staff member is unavailable. VIDE will conduct weekly reconciliations of all drawdown requests and disbursements, developing a process for investigating and resolving discrepancies, and maintaining detailed records of all reconciliations.

Finding 2021-044: Equipment and Real Property Management

Current Status: Repeated. Finding 2022-049.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

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Corrective Action Plan: VIDE acknowledges the finding regarding the management and documentation of federally funded equipment. VIDE will ensure the reliability of its asset tracking system and ensure the maintenance of a centralized record of all assets acquired with federal funds, to include property description, serial number or other identification number, source of property, titleholder, acquisition date, cost of the property, percentage of Federal participation, location, use and condition of the property, and disposition information. The Procurement Division will schedule quarterly inventory audits and reconciliation processes to ensure all federal program assets are accounted for and that records align with actual inventory. Any discrepancies identified during these audits will be resolved promptly. The Fixed Asset Director will create a protocol to facilitate regular communication and updates among Programs/Divisions responsible for asset acquisition, maintenance, and recordkeeping. Monthly status reports on federal asset records will be required from each Program/Division to ensure data accuracy and timely updates.

Finding 2021-045 and 2020-038: Reporting

Current Status: Repeated. Finding 2022-050.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: VIDE acknowledges the audit finding concerning the failure to comply with the Federal Funding Accountability and Transparency Act (FFATA) reporting requirements for first-tier subawards. VIDE plan will prioritize the development and implementation of detailed reporting policies and procedures, with a focus on FFATA requirements. These policies will include clear procedures for identifying and tracking all subawards subject to FFATA reporting, specific guidelines for collecting and reporting required data elements, and established timelines for data submission. Roles and responsibilities for all involved personnel, including program staff, grants management staff, and the Federal Grants Office, will be clearly defined within these policies. To enhance our subaward tracking capabilities, VIDE will implement a dedicated system for tracking subawards and collecting the required data. This may involve enhancing our existing grants management system or implementing a new system specifically designed to capture all necessary data elements for FFATA reporting. Comprehensive training on the use of this system will be provided to all relevant staff. VIDE will also strengthen its data verification and validation procedures. This will include establishing a formal process for reviewing and verifying the accuracy and completeness of subaward data before submission. Data quality checks will be implemented within the tracking system, and regular reconciliations will be conducted between subaward data and other relevant records to ensure consistency and accuracy. To ensure that all relevant personnel are well-versed in the new policies and procedures, VIDE will conduct mandatory training sessions. These sessions will cover FFATA reporting requirements in detail, VIDE's new policies and procedures for subaward reporting, and proper data collection and submission procedures.

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Program:

U.S. Department of Education

COVID-19 - Education Stabilization Fund
State Educational Agency (Outlying Areas)
(ESF-SEA)

ALN: 84.425A

Award #: S425A200004, S425A210004

Award Period: 06/22/2020 - 09/30/2021
01/13/2021 - 09/30/2022

COVID-19 - Education Stabilization Fund
Governors (Outlying Areas) (ESF-Governor)

ALN: 84.425H

Award #: S425H200003, S425H210003

Award Period: 06/29/2020 - 09/30/2021
01/13/2021 - 09/30/2022

Government Department/Agency:

Department of Education (VIDE)
Office of Management and Budget
(OMB)

Finding 2021-046: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities

Current Status: Repeated. Finding 2022-052.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: VIDE acknowledges the audit finding related to payroll activities and recognizes the need for stronger internal controls to ensure full compliance with federal regulations. To address the identified discrepancies and prevent future occurrences, VIDE will enhance timesheet management and strengthen rate verification processes. To improve timesheet management, VIDE will implement a system to ensure all timesheets are submitted and readily available. This will include electronic timesheet submission, mandatory supervisor review and approval before payroll processing, and secure electronic storage and archiving of timesheets. VIDE will also strengthen its rate verification process by implementing a standardized procedure that includes a checklist for comparing NOPA rates with payroll system rates. Payroll staff will be required to complete this checklist at the start of each pay cycle and maintain a tracker to flag any discrepancies. To ensure all employees and supervisors understand the new policies and procedures, VIDE will conduct mandatory training sessions. These sessions will cover proper timesheet completion and submission, rate verification requirements, and the importance of adhering to the new guidelines.

Finding 2021-047: Cash Management

Current Status: Corrective action was taken. Finding not repeated in current year.

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Finding 2021-048: Equipment and Real Property Management

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2021-049: Reporting

Current Status: Repeated. Finding 2022-053.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: VIDE acknowledges the deficiencies identified in the reporting processes for the COVID-19 Education Stabilization Fund (ESF-SEA). VIDE is committed to enhancing our reporting practices to ensure compliance with federal requirements and to prevent future occurrences. VIDE will implement a structured review and approval process for all performance and special reports, ensuring that each report is vetted by the appropriate officials. Training will be provided for all staff involved in report preparation and submission.

Finding 2021-050: Subrecipient Monitoring

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2021-051: Special Tests and Provisions - Participation of Private School Children

Current Status: Repeated. Finding 2022-054.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: VIDE acknowledges the findings related to the participation of private school children in the COVID-19 Education Stabilization Fund (ESF-SEA) program. VIDE is committed to rectifying these issues and enhancing our systems to ensure equitable services for private school children. OMB will develop and implement a formal policy and procedures that outline the process for ensuring the participation of private school children in compliance with federal regulations. This will include guidelines for timely consultation with nonpublic schools and documentation of services provided. OMB will create a consultation schedule to ensure that timely consultations with nonpublic schools are conducted each fiscal year. The schedule will outline key dates for initiating and completing consultations to meet compliance requirements.

OMB will collaborate with the Department of Education to develop control measure to ensure that all private schools expenditures are equal on a per-pupil basis to the expenditures for participating public school children and their teachers and other educational personnel.

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Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Human Services (DHS)

Head Start Cluster

ALN: 93.356, 93.600

Award #: Various

Award Periods: Various

Finding 2021-052 and 2020-040: Allowable Costs/Cost Principles - Payroll Activities

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2021-053, 2020-041, 2019-052, 2018-049, 2017-041, 2016-021, 2015-030 and 2014-028: Equipment and Real Property Management

Current Status: Repeated. Finding 2022-058.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: An internal asset listing at DHS is maintained. However, the Department of Human Services will work collaboratively with the Department of Property and Procurement to ensure adherence to Federal regulations related to equipment and its related maintenance. The Office of Management and Budget is also reviewing and following up with the agency leadership of DPP and DHS to validate that the process is updated, maintained to monitor equipment acquired with Federal funds.

Finding 2021-054: Special Tests and Provisions - Program Governance

Current Status: Repeated. Finding 2022-061.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Governing Board transitioned to virtual meetings due to the Pandemic with pre-empted the FY22 training and has incorporated electronic voting from board members into its procedures. Therefore, regular trainings occur that enable the governing body to perform its legal, fiscal and oversight responsibilities.

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Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Justice (DOJ)

Child Support Enforcement

ALN: 93.563

Award #: Various

Award Year: Various

Finding 2021-055, 2020-042, 2019-041, 2017-063 and 2016-038: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities

Current Status: Repeated. Finding 2022-070.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: DOJ will ensure each timesheet contains approval by the respective employee's supervisor before it is forwarded to DOF Payroll Division for processing.

Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Human Services (DHS)

Social Services Block Grant

ALN: 93.667

Award #: 1901VISOSR, 2001VISOSR, 2101VISOSR

Award Year: 10/01/2018 - 09/30/2020

10/01/2019 - 09/30/2021

10/01/2020 - 09/30/2022

Finding 2021-056 and 2020-051: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities

Current Status: Repeated. Finding 2022-071.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Stats Timeforce system has been implemented. Time and attendance is no longer a manual process eliminating these types of variance. The system is automated wherein designated employees utilize a fingerprint to log their time. The time once vetted and approved, is released to the Department of Finance for check processing. The process is automated to fall in line with designed ERP cost center listed on the employee's Notice of Personnel Action. Invoice transactions are vetted by the CFO. Any transactions over \$50K is then approved by the Commissioner or her designee.

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Summary Schedule of Prior Audit Findings

Finding 2021-057 and 2020-053: Period of Performance

Current Status: Repeated. Finding 2022-072.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: As part of the close-out process, all open purchase orders are now submitted to the Department of Finance to be closed. Additionally, the grant close out process has now shifted to OMB to ensure the grant is no longer available for transactions entries or liquidations. Additionally, a dedicated Fiscal Analyst is being inserted into the workflow to ensure compliance.

Finding 2021-058: Reporting

Current Status: Repeated. Finding 2022-073.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: Presently, there is a collaboration with Federal Partners to consolidate the reporting in the Payment Management System portal as there is no one report for the SSBG as required. Presently, report requests are not consistent with one consolidated grant. Additionally, the pre and post expenditures are submitted through the portal with a log of submission.

Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Human Services (DHS)

Children's Health Insurance Program

ALN: 93.767

Award #: Various

Award Year: 10/01/2015 - 09/30/2022

Finding 2021-059, 2020-054, 2019-056, 2018-056, 2017-059 and 2016-032: Reporting

Current Status: Corrected.

Finding 2021-060 and 2020-055: Special Tests and Provisions - Provider Eligibility

Current Status: On-going implementation. DHS staff will work with PMO to establish Standard Operating Policies and Procedures (SOPPs) on certification and recertification processes and procedures. DHS has hired the Program Integrity Director and is in the process of hiring the Medicaid Eligibility Quality Control (MEQC) staff, whose responsibility will be to review completed case files to ensure compliance.

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Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Human Services (DHS)

Medicaid Cluster

ALN: 93.775, 93.778

Award #: Various

Award Year: 10/01/2015 - 09/30/2022

Finding 2021-061, 2020-057, 2019-057 and 2018-057: Allowable Costs/Cost Principles - Non-Payroll Activities

Current Status: Repeated. Finding 2022-074.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: Isolated occurrence while the MAP program was being transitioned from one building to another. As the equipment could not be used at the new location, it was stored for future use. The Director of Asset Management has oversight of the storage of inventory to avert future occurrences.

Finding 2021-062, 2020-058, 2019-058, 2018-060, 2017-046, 2016-024 and 2015-035: Eligibility

Current Status: Repeated. Finding 2022-075.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: DHS staff will work with PMO, hired to assist with the Public Health Emergency Unwind and establish Standard Operating Policies and Procedures (SOPPs) on certification and recertification processes and procedures. DHS is also in the process of hiring a Program Integrity Director and Medicaid Eligibility Quality Control (MEQC) staff, whose responsibility will be to review completed case files.

Finding 2021-063, 2020-060, 2019-060, 2018-064 and 2017-049: Reporting

Current Status: Repeated. Finding 2022-076.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

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Corrective Action Plan: As Medicaid staffing shortages are addressed, reports are submitted for review via email. The Department has implemented a shared folder to ensure copies of the approval emails and any time extension requests are now stored in said folder to ensure access for audit purposes as the submission portal does not allow for attachments.

Finding 2021-064, 2020-061, 2019-061, 2018-065, 2017-055, 2016-028, 2015-040, 2014-033, 2013-018 and 2012-15: Special Tests and Provisions - Utilization Control and Program Integrity

Current Status: Repeated. Finding 2022-077.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: DHS has onboarded a Director of Program Integrity who will be responsible for establishing The Quality Control Unit, which will work with the Medicaid Fraud Control Unit on behalf of the Medicaid Program.

Finding 2021-065, 2020-062, 2019-062, 2018-066, 2017-052, 2016-025, 2015-036, 2014-035, 2013-019 and 2012-16: Special Tests and Provisions - Inpatient Hospital and Long-Term Care Facility Audits

Current Status: Repeated. Finding 2022-078.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: DHS is in the process of composing the solicitation for bid on the project to cover all periods outstanding.

Finding 2021-066, 2020-063, 2019-063, 2018-067 and 2017-054: Special Tests and Provisions - ADP Risk Analysis and System Security Review

Current Status: Repeated. Finding 2022-079.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: DHS secured a commitment from a vendor who was unable to perform the required services. DHS is currently working through the procurement process with DPP in order to identify a new vendor to perform the mandated services.

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Summary Schedule of Prior Audit Findings

Finding 2021-067, 2020-064, 2019-064, 2018-068 and 2017-051: Special Tests and Provisions - Provider Eligibility

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2021-068, 2020-065, 2019-065, 2018-069, 2017-053, 2016-026, 2015-038, 2014-034, 2013-022 and 2012-21: Special Tests and Provisions - Medicaid Fraud Control Unit

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2021-069 and 2020-068: Special Tests and Provisions - Medicaid National Correct Coding Initiative

Current Status: Repeated. Finding 2022-080.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: Although DHS stated that the documentation supporting DHS download and incorporation of the NCCI methodologies were available for review and the MMIS has the methodologies built into the system, OMB recommends that the documentations that DHS will implement internal controls to ensure that the NCCI methodologies are incorporated in the Medicaid Program.

Program:
U.S. Department of Homeland Security

Government Department/Agency:
Virgin Islands Territorial Emergency
Management Agency (VITEMA)

Disaster Grants - Public Assistance (Presidentially Declared
Disasters)

ALN: 97.036

Award #: FEMA-4335-DR, FEMA-4340-DR-VI, FEMA-4513-DR

Award Year: 09/20/2017 - 09/07/2025

09/07/2017 - 09/16/2025

04/02/2020 - 05/11/2023

Finding 2021-071 and 2020-069: Matching, Level of Effort, Earmarking

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2021-072, 2020-070, 2019-068 and 2018-073: Reporting

Current Status: Repeated. Finding 2022-081.

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Summary Schedule of Prior Audit Findings

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The formalized process related to financial and performance report preparation and submission is now in place with clear roles and responsibilities outlined. The Disaster Program Financial Specialist is responsible for preparing the reports quarterly and submitting them to the Territorial Public Assistance Officer for review. The review process includes thorough reconciliations between the reports and other supporting data, such as accounting records.

Program:
U.S. Department of Homeland Security

Government Department/Agency:
Virgin Islands Territorial Emergency
Management Agency (VITEMA)

Hazard Mitigation Grant Program
ALN: 97.039
Award #: FEMA-4335-DR, FEMA-4340-DR-VI
Award Periods: 09/20/2017 - 09/07/2025
09/07/2017 - 09/16/2025

Finding 2021-073: Period of Performance

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2021-074: Reporting

Current Status: Repeated. Finding 2022-083.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: A process related to financial and performance report preparation and submission will be formalized, and clear roles/responsibilities will be outlined. The Disaster Program Account Supervisors will be responsible for preparing the reports on a quarterly basis and submitting them to the Territorial Hazard Mitigation Officer for review. The review process will include thorough reconciliation between the reports and other supporting data, such as accounting records.

Program:
U.S. Department of Homeland Security

Government Department/Agency:
Department of Labor (VIDOL)

COVID-19 - Presidential Declared Disaster Assistance to
Individuals and Households - Other Needs
ALN: 97.050
Award #: 4513DRVISPLW
Award Period: 08/1/2020 - 12/27/2021

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Summary Schedule of Prior Audit Findings

Finding 2021-075: Activities Allowed or Unallowed - Non-Payroll Activities

Current Status: On-going implementation. VIDOL received modernization funds from the USDOL ARPA IT grant to develop a Trust Fund Accounting system and updated procedures in compliance with 2CFR 200.303. This system will improve document control, transaction handling, and record accessibility. VI Property and Procurement has approved soliciting vendors for implementation proposals. The project is scheduled to be completed by the end of Q1 FY2026. VIDOL's technical assistance team will oversee and support project deliverables and timelines.

Finding 2021-076: Cash Management

Current Status: On-going implementation. VIDOL received modernization funds from the USDOL ARPA IT grant to develop a Trust Fund Accounting system and updated procedures in compliance with 2CFR 200.303. This system will improve document control, transaction handling, and record accessibility. VI Property and Procurement has approved soliciting vendors for implementation proposals. The project is scheduled to be completed by the end of Q1 FY2026. VIDOL's technical assistance team will oversee and support project deliverables and timelines.

Finding 2021-077: Eligibility

Current Status: On-going implementation. VIDOL is using funds from the USDOL ARPA IT modernization grant to update its claims processing structure, moving from outdated physical records to a digital environment. This upgrade will include an audit review module to ensure internal controls and record retrieval. VIDOL plans to complete this by the 1st quarter of FY 2027. Meanwhile, staff will review the current year's records periodically for completeness and accuracy to prevent eligibility errors.

Finding 2021-078: Period of Performance

Current Status: On-going implementation. VIDOL received modernization funds from the USDOL ARPA IT grant to develop a Trust Fund Accounting system and updated procedures in compliance with 2CFR 200.303. This system will improve document control, transaction handling, and record accessibility. VI Property and Procurement has approved soliciting vendors for implementation proposals. The project is scheduled to be completed by the end of Q1 FY2026. VIDOL's technical assistance team will oversee and support project deliverables and timelines.

Finding 2021-079: Reporting

Current Status: On-going implementation. VIDOL received modernization funds from the USDOL ARPA IT grant to develop a Trust Fund Accounting system and updated procedures in compliance with 2CFR 200.303. This system will improve document control, transaction handling, and record accessibility. VI Property and Procurement has approved soliciting vendors for implementation proposals. The project is scheduled to be completed by the end of Q1 FY2026. VIDOL's technical assistance team will oversee and support project deliverables and timelines.

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Program:

ALN 10.551, 10.561 ALN 10.557	Supplemental Nutrition Assistance Program Cluster (SNAP) Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
ALN 11.022	Bipartisan Budget Act of 2018
ALN 15.875	Economic, Social, and Political Development of the Territories
ALN 17.225	Unemployment Insurance
ALN 20.205	Highway Planning and Construction Cluster
ALN 20.507	Federal Transit Cluster
ALN 21.019	COVID-19 - Coronavirus Relief Fund
ALN 21.023	COVID-19 - Emergency Rental Assistance Program
ALN 21.027	COVID-19 - Coronavirus State and Local Fiscal Recovery Funds
ALN 66.468	Drinking Water State Revolving Fund Cluster
ALN 84.027A	Special Education Cluster (IDEA)
ALN 84.403A	Consolidated Grant to the Outlying Areas
ALN 84.425A, 84.425H	COVID-19 - Education Stabilization Fund
ALN 93.356, 93.600	Head Start Cluster
ALN 93.563	Child Support Enforcement
ALN 93.667	Social Services Block Grant
ALN 93.767	Children's Health Insurance Program
ALN 93.775, 93.778	Medicaid Cluster
ALN 97.036	Disaster Grants - Public Assistance (Presidentially Declared Disasters)
ALN 97.039	Hazard Mitigation Grant Program
ALN 97.050	COVID-19 - Presidential Declared Disaster Assistance to Individuals and Household - Other Needs

Finding 2021-080, 2020-071, 2019-069, 2018-074 and 2017-088: Data Collection Form and Single Audit Reporting Package

Current Status: Repeated. The finding is included as part of Financial Statement Finding 2022-003 D.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Government has implemented a plan, in coordination with its external auditor, to move to current audits by Fiscal Year 2025. Once audits are current, the Government will provide current submissions to the FAC.

Program:

U.S. Department of Defense

National Guard Military Operations and Maintenance
(O&M) Projects

ALN: 12.401

Award #: W9127P-15-2-1000, W9127P-20-2-1000

Award Year: 10/01/2017 - 09/30/2020

Government Department/Agency:

Office of the Adjutant General
(OTAG)

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Summary Schedule of Prior Audit Findings

Finding 2020-020, 2019-025 and 2017-077: Allowable Costs/Cost Principles - Payroll Activities

Current Status: Repeated. Finding 2022-026.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: OTAG has improved their internal controls and fully implemented a policy and procedure where the employees have both a manual timesheet and electronic timesheet to verify the time worked. Policies and procedures have been updated to address the validation of payroll process activities. In addition, an Employee Relations Coordinator has been in place to ensure validation input. The Director of Administration and Business Management certifies, and the Agency Head approves of allowable cost/cost principles payroll activities. OTAG is working on the review process relative to the grant and the appropriate period of performance.

Finding 2020-021, 2019-026, 2017-078, 2016-045 and 2015-051: Cash Management

Current Status: Repeated. Finding 2022-027.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: OTAG was not able to complete the preparation and submission of the SF-270 report for Fiscal Year 2022. However, OTAG has developed a Policies and Procedures Manual for FY2023. In addition, a Reimbursement Specialist was hired to ensure separation of duties in financial reporting.

Finding 2020-022, 2019-027, 2017-079, 2016-046 and 2015-052: Matching, Level of Effort, Earmarking

Current Status: Repeated. Finding 2022-028.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: OTAG has updated their policies and procedures manual which includes tracking the match fulfillment for each expenditure. The master cooperative agreements through the appendices identifies the cost share and what is required by people performing management functions and procedures are updated annually and accordingly to reflect any changes.

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Summary Schedule of Prior Audit Findings

Finding 2020-023, 2019-028, 2017-080 and 2016-047: Period of Performance

Current Status: Repeated. Finding 2022-029.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: OTAG has updated policies and procedures to address pre-award costs, scope of work, and payout to vendors to abide with the 90 days close out process. OTAG is training new personnel and monitoring implementation.

Finding 2020-024, 2019-029, 2017-081, 2016-048, 2015-053 and 2014-049: Reporting

Current Status: Repeated. Finding 2022-027.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: OTAG was not able to complete the preparation and submission of the SF-270 report for Fiscal Year 2022. However, OTAG has developed a Policies and Procedures Manual for FY2023. In addition, a Reimbursement Specialist was hired to ensure separation of duties in financial reporting.

Program:
U.S. Environmental Protection Agency

Government Department/Agency:
Department of Public Works

Construction Grants for Wastewater Treatment Works
ALN: 66.418
Award #: Various

Finding 2020-034: Reporting

Current Status: The grant associated with the finding has concluded. No further action is required.

Program:
U.S. Department of Education

Government Department/Agency:
Department of Education (DOE)

Immediate Aid to Restart School Operations
ALN: 84.938A
Award #: S938A180004
Award Periods: 05/14/2018 - 09/30/2021

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Finding 2020-039: Allowable Costs/Cost Principles - Indirect Cost Activities

Current Status: On-going implementation. DOE management has drafted policies and procedures to ensure that the cost allocations are reviewed, and the information is accurate. Implementation and training are currently in process. Where revisions are required, allocations will be revisited to avoid overstatements.

Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Human Services (DHS)

CCDF Cluster

ALN: 93.575

Award #: 1701VICCDF, 1801VICCDF, 1901VICCDF

Award Year: 10/01/2016 - 09/30/2022

Finding 2020-046 and 2019-047: Eligibility

Current Status: Repeated. Finding 2022-064.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The DHS has implemented a checklist as an added internal control step to comply with the Federal requirements for review of provider enrollment applications by the provider relations staff.

Program:

U.S. Department of Agriculture

Government Department/Agency:

Department of Education (DOE)

Child Nutrition Cluster

ALN: 10.555, 10.559

Award #: 1VI300308

Award Year: 10/01/2017 - 09/30/2018

Finding 2018-030, 2017-019, 2016-068, 2015-068 and 2014-058: Allowable Costs/Cost Principles - Indirect Cost Activities

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2018-031, 2017-020, 2016-069, 2015-069 and 2014-059: Cash Management

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Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2018-032, 2017-021, 2016-070, 2015-070 and 2014-060: Equipment and Real Property Management

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2018-033 and 2017-022: Matching, Level of Effort, Earmarking

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2018-034, 2017-023, 2016-071: Period of Performance

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2018-035 and 2017-024: Procurement and Suspension and Debarment

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Health (DOH)

Epidemiology and Laboratory Capacity for Infectious Diseases

ALN: 93.323

Award #: CK000377-03

Award Year: 08/01/2014 - 07/31/2019

Finding 2017-060: Cash Management

Current Status: Corrective action was taken. Finding not repeated in current year.

Finding 2017-061: Equipment and Real Property Management

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Summary Schedule of Prior Audit Findings

Current Status: Repeated. Finding 2022-057.

Reason for Recurrence: The Government is focused on improving its procedures. There are areas that were addressed and other areas that are still in the process of implementing new internal controls and procedures. Further, various employee transition issues have impacted the continued progression towards completed remediation.

Corrective Action Plan: The Epidemiology Division has established robust procedures to manage and monitor property and equipment effectively, adhering to Property and Procurement guidelines. All equipment is meticulously inventoried, and employees sign acknowledgment forms listing the items assigned to them, such as laptops or cell phones, with serial numbers clearly documented and safeguarded. However, DOH recognize the need for improved coordination between the Epidemiology Division and Property and Procurement. To enhance asset management, the Department of Health will update Fixed Asset SOP to require that each division shares its asset inventory with Property and Procurement on a quarterly basis, ensuring more accurate and up-to-date records.

Finding 2017-062: Reporting

Current Status: Corrective action was taken. Finding not repeated in current year.

Program:

U.S. Environmental Protection Agency

Performance Partnership Grants

ALN: 66.605

Award #: Various

Award Year: 10/01/2009 - 03/31/2019

Government Department/Agency:

Department of Planning and Natural Resources (DPNR)

Finding 2017-082: Allowable Costs/Cost Principles - Indirect Cost Activities

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2017-083: Cash Management

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2017-084: Equipment and Real Property Management

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

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Finding 2017-085: Matching, Level of Effort, Earmarking

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2017-087: Reporting

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Human Services (DHS)

Aging Cluster

ALN: 93.044, 93.045, 93.053

Award #: 1601VISOSR, 1501VISOSR, 1401VISOSR

Award Year: 10/01/2015 - 09/30/2018

10/01/2014 - 09/30/2017

10/01/2013 - 09/30/2016

Finding 2016-034: Cash Management

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2016-037: Subrecipient Monitoring

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

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Program:

U.S. Department of Labor

Government Department/Agency:

Department of Labor (VIDOL)

Employment Service Cluster

ALN: 17.207, 17.801

Award #: ES260501455A78, ES275221555A78,
ES294431655A78, ES275221555A78, ES260501455A78,
ES246501355A78, DV64, 266241555578

Award Year: 07/01/2014 - 09/30/2017

07/01/2015 - 09/30/2018

07/01/2016 - 07/01/2019

07/01/2015 - 09/30/2018

07/01/2014 - 09/30/2017

07/01/2013 - 09/30/2016

10/01/2015 - 09/30/2016

Finding 2016-064: Cash Management

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Program:

U.S. Department of Health and Human Services

Government Department/Agency:

Department of Human Services (DHS)

Temporary Assistance for Needy Families Cluster

ALN: 93.558

Award #: 1501VITANF

Award Year: 10/01/2014 - 09/30/2015

Finding 2015-023 and 2014-020: Eligibility

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2015-024: Equipment and Real Property Management

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2015-026 and 2014-022: Special Tests and Provisions - Child Support Non-Cooperation

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

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Summary Schedule of Prior Audit Findings

Finding 2015-027 and 2014-023: Special Tests and Provisions - Penalty for Refusal to Work

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2015-028, 2014-025, 2013-017 and 12-14: Special Tests and Provisions - Income Eligibility and Verification System

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Program:

U.S. Department of Commerce

Coastal Zone Management Administration Awards

ALN: 11.419

Award #: Various

Award Year: 10/01/2014 - 09/30/2015

Government Department/Agency:

Department of Planning and Natural Resources (DPNR)

Finding 2015-043 and 2014-041: Equipment and Real Property Management

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Finding 2015-045: Reporting

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

Program:

U.S. Department of Commerce

Coral Reef Conservation Program

ALN: 11.482

Award #: NA11NOS4820004/NA13NOS4820011

Award Year: 10/01/2014 - 09/30/2015

Government Department/Agency:

Department of Planning and Natural Resources (DPNR)

Finding 2015-047: Equipment and Real Property Management

Current Status: In accordance with CFR 200.511, no further action is warranted. Two years have passed since the audit report in which the finding occurred was submitted to the FAC. The federal agency is not currently following up on the audit finding and a management decision was not issued.

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GOVERNMENT OF
THE UNITED STATES VIRGIN ISLANDS



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DEPARTMENT OF FINANCE

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	Finding 2022-001: Year-End Close Process			
39	A. Timeliness and Methodology of Close Process	Department of Finance and its Accounting Division, Management Team; Executive Assistant Directors, Directors, and Line Managers	Fiscal Year 2025	Aggressive timelines are established for a timely year-end process. The Department of Finance (DOF) is in the process of standardizing the reporting necessary to aid in a successful and timely audit by collectively working on templates that will assist the agencies in reporting the necessary data. Accountability measures must be in effect to remove employees that are ineffective, while recruiting for accounting talent. DOF is aware that to achieve uniformity across all agencies on finance matters, DOF will have to assess the needs, skillset, and resources for the agencies and provide a sole position that will be able to monitor the success. Additionally, the Government will establish a formal review and approval process for the Major Funds Calculation.
40	B. Deficits in Unrestricted Net Position	The Governor's Financial Team	On-going	The Government is continuing with its recovery efforts of working with federal partners, attracting new industries, improving financial controls, monitoring cash flows, and rebuilding equity.

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41	B. Journal Entries	Department of Finance Management Information System Unit, Enterprise Resource Planning (ERP) Project Manager, and Directors	Immediately	<p>Department of Finance recognized that it needs to have more feet on the ground to be able to approve journals. As such, training has been in effect and there are more people that will be able to assist with journals, especially when people are on leave etc.</p> <p>Additionally, certain journals are systematically generated, resulting in the same individual serving as both the creator and approver. These typically include year-end closing journals. Moving forward, the Department of Finance will ensure that proper documentation is maintained within the system.</p>
	Finding 2022-002: Revenue and Receivables			
43	A. Reconciliation of Subsidiary Registers	Assistant Chief of Processing, Tax Collector, and designated staff in collaboration with Director of Treasury and as needed, the Director of Accounting, Bureau of Internal Revenue, and Department of Finance Accounting Division	Fiscal Year 2025	<p>For purposes of interim financial reporting, the Bureau of Internal Revenue, Office of the Lieutenant Governor, and the Department of Finance have begun quarterly reconciliation meetings to reduce end of year adjustments, reconcile non-sufficient funds checks in a timely manner, and implement internal safeguards to allow for more efficient reconciliation.</p> <p>In addition, the Government will implement the policy of reconciling tax receivables on a quarterly basis.</p>

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44	B. Tax Return Processing Method	The management team of the Bureau of Internal Revenue; specifically, the Computer Operations and Processing Branches	On-going	The Bureau has launched its online gross receipts filing system. The Bureau is in the final testing stage of implementing the online income tax filing system.
44	C. Real Property Tax	The management team of the Office of the Lieutenant Governor; specifically, the Tax Assessor, Tax Collector, and the Chief of Staff	On-going	The Office of the Lieutenant Governor (LGO) will continue to work with appropriate agencies and review its records to remove from its tax rolls any entities that are exempt from paying taxes. LGO notes that Government agencies are generally not exempt from paying sewer fees which are collected via the tax bill on behalf of the Virgin Islands Waste Management Authority. Therefore, these entities will receive tax bills for sewer fees only.
45	D. Other Revenues	Department of Finance management, specifically, the Director of Treasury	Immediately	In an effort to provide adequate supporting documentation for sampled items, the Government will ensure that the procedures to attach the documents are fully adhered to. The Government will conduct spot checks to ensure employees are adhering to this process.
	Finding 2022-003: Grants Management			
47	A. Control Systems Over the Schedule of Expenditures of Federal Awards	Office of Management and Budget, Department of Finance's Accounting and Treasury Divisions	Fiscal Year 2025	The review of ALN, expenditures and cash receipts postings to grants will occur as part of the quarterly system closings. Continuous reconciliations of the SEFA with departments and agencies will also be implemented.

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48	B. Federal Grants and Contributions	Department of Finance management; specifically, the Director of Treasury	On-going	The Department of Finance monitors the federal receivables and provides the agencies with reports showing outstanding drawdowns. In addition, a private firm has been contracted to work directly with the agencies to reconcile the Government's federal receivables.
49	C. Federal Grants Accounting	Department of Finance Executive Assistant Commissioner, Director of Accounting and Financial Reporting, and Director of Treasury	On-going	The Government has implemented measures that will ensure strict adherence to its reconciliation and review policies and procedures.
50	D. Report Submission	Department of Finance Accounting Division	Fiscal Year 2025	The Government has implemented a plan, in coordination with external auditor, to move to current audits by Fiscal Year 2025. Once audits are current, the Government will provide current submissions to the FAC.
	Finding 2022-004: Capital Assets and Related Expenditures			
51	A. Record Keeping	The Commissioner, Department of Finance, Director of Accounting, and Fixed Assets Coordinator	Immediately	The Department of Finance will review the controls in place and update the necessary manuals to address all of the recommendations set forth.

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52	B. Reconciliation and Review of Subsidiary Registers	Various designated individuals within the Department of Property and Procurement, Lieutenant Governor's Office, the Department of Public Works, and the Department of Finance to formulate a Capital Assets team	Fiscal Year 2023	To verify that all assets in the subsidiary register are reviewed and updated with sufficient descriptions, corrected acquisition dates, and recalculated accumulated depreciation, the Capital Assets team—comprising key individuals from various departments and led by the Department of Property and Procurement and the Lieutenant Governor's Office—will identify land assets and confirm what is recorded in the books. An update to the policies and procedures will be expedited to specify how often they are revised and the frequency of working sessions for reconciliations. Revision of the Asset Policy and Procedural Manual is underway, along with continued collaboration between the Department of Finance, Department of Property and Procurement, and Department of Public Works regarding the development of the Capital Assets team.
53	C. Construction in Progress (CIP) Monitoring	The Commissioner, Department of Property and Procurement	Immediately	The Department of Property and Procurement in collaboration with key individuals in other agencies will provide findings internally for areas where this step was missed, including some accountability. The Capital Assets team has already begun deliberating on how the Government can capture this at the time of final payment. DPP will also review the policy and update accordingly.
53	D. Capital Assets Impairment Process	Various designated individuals within the Department of Property and Procurement and the Department of Public Works to formulate a Capital Assets team	Immediately	In an effort to implement a formal process whereby a periodic impairment assessment is conducted and to ensure that all disposals and retirements are consistently processed, the Government will identify key personnel from various departments and agencies to form a Capital Assets team in addition to full implementation of the fixed assets module within the ERP system. There is a project management software that houses all CIP information.

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54	E. Capital Assets - Business-Type Activities	Department of Finance, Director of Accounting and Financial Reporting and Capital Asset Coordinator	On-going	The Government will review the recommendations and collaborate with relevant parties.
	Finding 2022-005: Recording of Liabilities			
56	A. Retroactive Pay Liability	The management team of the Division of Personnel; specifically, the Information Technology Manager, Personnel Records Supervisor, OMB Director, and Budget Analysts	On-going	<p>The Division of Personnel (DOP) will work with the Office of Collective Bargaining (OCB) to develop a master file that will serve as a clearinghouse for collective bargaining agreements and negotiated pay rates for unionized public sector workers.</p> <p>The Government’s Chief Negotiator will take the lead in developing the master file containing negotiated pay rates. OCB management will coordinate with the Division of Personnel’s staff, to include the Director and Information Technology/Records Management staff, to first develop a firm number with regard to the Government’s retroactive obligation. This process has already started. The Division of Personnel can only confirm the research that was done based on the Retroactive Wage Commission project.</p> <p>DOP Information Technology staff is ready to work with the Office of Collective Bargaining/Chief Negotiator, designated as the lead, on the development of a master file that will serve as the clearinghouse for all collective bargaining agreements.</p>

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				<p>To assist with the past retroactive calculation and on-going payments to individuals and their respective survivors, the division is designing a central repository portal that will contain total obligations due and payments made to date.</p> <p>Additionally, on a bi-annual basis, the team will meet in order to compare negotiated employee salary rates to those contained in the official personnel records within the ERP system database. It must be noted that DOP functions as a facilitator with regard to the hiring process and relies on official financial information from OCB and the Office of Management and Budget (OMB). OCB negotiates and interprets contract language for unionized public sector workers while OMB certifies the availability of funding for the purpose of wage implementation. DOP then reviews, audits, and implements newly negotiated wages.</p>
57	B. Medical Malpractice Liability	The Commissioner, Department of Health	On-going	The Department of Health is in the process of submitting a Request for Proposal (RFP) to solicit an actuary to perform the evaluation.
57	C. Health Insurance Accrual	Department of Health Commissioner and Chief Financial Officer	On-going	The Government will maintain supporting documentation for the health insurance accrual for possible analysis by users.
58	D. Accounts Payable	Accounting Director with support from Executive Assistant Commissioner and Commissioner on achieving the funding and	Fiscal year 2025	The Department of Finance will work with Tyler Munis on utilizing the Accounts Payable Module and will work with Office of Management and Budget to hire an Accounts Payable Analyst who will be solely responsible to make the necessary monthly updates and adjustments while dedicating all of their time to work with D&A on entering invoices in timely.

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		Tyler Munis ERP Project Manager		The Accounting Analysts will ensure that the invoices are entered pursuant to Standard of Operating Procedures and Policies (SOPP) 130.
59	E. Landfill Closure and Post Closure Costs Liability	Waste Management Authority Management Team	On-going	The Government is working with its consultants to review the work and write a report to implement monitoring controls and ensure that all calculations are reviewed timely.
60	F. Quality of Census Data	The management team of the Government Employees' Retirement System Department of Finance and Division of Personnel; specifically, Administrator, Director, Member Services, and Director of Information Technology	On-going	A request for proposal is currently being advertised to obtain a vendor who will provide a census data management system to assist with maintaining current and accurate records.
61	G. Income Tax Refunds Payable	Bureau of Internal Revenue and Department of Finance Accounting Division	Fiscal Year 2025	A return to current audits will result in income tax refunds payable being evaluated through April 30th, as has been consistently done in prior years when audits were current.
61	H. Plan Funding Considerations	Management team of the Department of Finance, Virgin Islands Public Finance Authority, Government Employees' Retirement System of the	On-going	The Virgin Islands Public Finance Authority established the Matching Fund Special Purpose Securitization Corporation (the Corporation) to refund and restructure the Government's matching fund bonds.

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		U.S. Virgin Islands, and Legislature of the Virgin Islands		<p>Additionally, the Corporation placed a funding note with GERS, secured by a subordinate lien on the matching funds, and is projected to pay out \$3.8 billion to GERS through 2051.</p> <p>Policy decisions regarding postemployment benefit alternatives and the establishment of special funds for postemployment benefits are under the purview of the Legislature of the Virgin Islands.</p>
	Finding 2022-006: Management of the Medicaid Program			
63	Cost Report Audits, System Security Review, and Approvals	The Commissioner, Department of Human Services, Chief Financial Officer, and the Program Administrator	On-going	For the cost report audits, the Medicaid Assistance Program continues to work with the selected vendor to complete the requirements. For the Eligibility System, a vendor has been selected and the contract is in process. Additionally, the Medicaid Program will work closely to ensure all information is provided relative to the environment for the claims.
	Finding 2022-007: Unemployment Insurance Trust Fund			
64	Account Reconciliation Process	Unemployment Insurance Director	On-going	The Virgin Islands Department of Labor (VIDOL) hired a Financial Analyst to reconcile the Unemployment Insurance Trust Fund to ensure compliance with CMIA and Social Security Act clearance and depository regulations. The Trust Fund is in good standing and being reconciled daily. The Virgin Islands Department of Labor (VIDOL) policies and procedures manual was approved by the U.S. Department of Labor in October 2021.

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				The policies and procedures established address our ineffective internal controls, fiscal and administrative requirements for expending and accounting for all funds relative to the Unemployment Insurance Trust Fund accounts.
	Finding 2022-008: Workers Compensation Program			
65	Plan Valuation Methodology	Executive Assistant Commissioner, Director of Accounting and Reporting, Commissioner - DOF, Worker's Compensation Director - Labor Assistant Commissioner	On-going	The Department of Finance (DOF) will collaborate with VIDOL to consider the recommendations set forth. The newly implemented software, Ventiv, will assist in resolving the issues mentioned. Additionally, the Government Insurance Fund (GIF) will initiate a monthly Hospital Payables Inquiry request form for completion by the Workers Compensation Administration (WCA). The form will give the GIF a baseline from which we start and then track increases and decreases in payables going forward. It will also inform the GIF of any "special payment projects" undertaken or in progress at the WCA. This document will supplement the information provided to our actuary.
	Finding 2022-009: Payroll, Related Accruals, and Other Expenditures			
67	A. Payroll Expenditures	The management team of the Department of Finance; specifically, Director of Payroll, and	On-going	The Department of Finance will collaborate with the Department of Human Services and Payroll Division to determine and consider the recommendations set forth.

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		Departments and Agencies' payroll personnel		Additionally, the Department of Finance - Payroll Division will monitor overtime and work with the various agencies to ensure that it is appropriate and within the laws and collective bargaining agreements. In some cases, a state of emergency, overrides the normal overtime regulations appropriately.
68	B. Transactions with Personnel	The management team of the Office of the Governor and Department of Finance, specifically, Credit Card Administrator	On-going	The Department of Finance implemented a government credit card program in fiscal year 2021 that includes training and an active P.O. for card issuance. The Department will coordinate with the Office of the Governor to strengthen, recommunicate, and monitor so that all other reimbursements are made in compliance with policies.
69	C. Reporting for Expenditures	The Department of Finance, Executive Assistant Commissioner and Director of Accounting	On-going	The Government will continue to enforce the Standard of Operating Procedures and Policies (SOPP) that all invoices are attached in the ERP system and closely examine the invoice approval process. As part of the approval process, invoices will be closely reviewed to ensure expenditures are recorded in the proper period and are supported in the Accounts Payable module.
70	D. Formalize Emergency Payroll Procedures	The management team of the Department of Finance; specifically, Director of Payroll	On-going	With infrastructure improvements related to climate resilience and technological advancements in remote capabilities prompted by the global pandemic, the Government has made significant progress in strengthening controls to ensure the continuity of normal operations under adverse conditions. Protocols for emergency payroll processing are continuously reviewed and updated.
	Finding 2022-010: Bank Accounts			

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71	A. Strengthen Controls Over Bank Reconciliations	The management team of the Department of Finance; specifically, the Director of Treasury	On-going	The Commissioner of Finance will enforce Title 33, Subtitle 3, Chapter 115, Subchapter III, Subsection 3261 which outlines the procedures for unpaid checks. Also, the Director of Treasury will ensure that bank reconciliations are prepared and reviewed on a timely basis. The Government will also work with the Munis consultants regarding implementation of a process tracking to determine when bank reconciliations are reviewed and approved.
72	B. Cash Pooling and Allocation(s)	The management team of the Department of Finance; specifically, the Deputy Commissioner and Director of Treasury	On-going	The Director of Treasury, with oversight from the Assistant Commissioner, will enhance the documentation provided to support the pooling and subsequent allocation of the cash accounts. Additional human capital has been provided to ensure that bank reconciliations are prepared timely as the Government continue to strive to improve the link between the confirmed cash account balances and cash balance per fund presented within the year-end financial statements.
73	C. Check Sequences	The management team of the Department of Finance; specifically, the Deputy Commissioner and Directors of Treasury and Management Information System	On-going	The ERP system does automatically generate check numbers for some accounts. To ensure controls are in place over the sequence of checks, controls will be established on the check series used and check series not used.
	Finding 2022-011: Other Post Employment Benefit Valuation			

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74	A. Actuarial Valuation	Executive Assistant Commissioner, Department of Finance	On-going	The Government implemented a new census data management system that can easily be updated by the component unit, which will alleviate the delayed submission of data to the actuary.
74	B. Administration and Recordkeeping	Executive Assistant Commissioner, Department of Finance, and Division of Personnel	On-going	The Department of Finance has already begun collaborating with the Division of Personnel on this matter. Moving forward, we will continue to establish processes to address the findings noted. The Division of Personnel is now able to account for the receivables and payables of the Health Insurance Retiree Fund, as an employee was hired in January 2020 to monitor and track the accounting of the fund for the Group Health Insurance Unit.
75	C. Update of Mortality Tables	Executive Assistant Commissioner, Department of Finance	Performance of next experience study	For consistency, the mortality and other demographic assumptions used in the valuation are aligned with those applied in GERS pension valuations. Updated assumptions will be adopted upon completion of the next experience study for GERS.
77	Finding 2022-012: Accounting Standards Implementation	Property and Procurement, Economic Development Authority, Virgin Islands Housing Finance Authority, Department of Finance Accounting Division	Fiscal Year 2025	The Government is beginning the process of soliciting a professional services contract to implement GASB 87. Disclosures related to GASB 77 cannot be made as the underlying contracts are subject to confidentiality restrictions prohibiting disclosure.
78	Finding 2022-013: Irregularities related to	Commissioner of Property and Procurement	October 2025	The Government is finalizing its policies and procedures to ensure all necessary supporting documentation are retained, which will support adherence to internal policies and regulatory requirements.

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	Procurement Activities			The Government will review regularly to verify that all procurement activities are properly documented and compliant with applicable regulations.
80	Finding 2022-014: Procurement Regulations	Department of Property and Procurement Management Team	On-going	The Government will continue to take necessary measures to address noncompliance and perform periodic reviews of purchase orders, contracts, and profiles to ensure that internal policies and regulations are being adhered to.
	Finding 2022-015: Information Technology (IT) Environment			
82	User Access and Administration	The management team of the Bureau of Internal Revenue (including the Director of Processing and IT), Office of Lieutenant Governor, Department of Labor, specifically, the IT Director, the management team of Division of Family Assistance of the Department of Human Services, and the Department of Finance IT Director	On-going	<p>Several enhancements have been made in alignment with correspondences to end users. Continuation of improvements is well underway. The Lieutenant Governor’s Office has transitioned and upgraded its systems to address the issue of performing the re-certifications of user access security rights. Additionally, the MIS Director currently participates in regular meetings with the Bureau of Information Technology during which the implementation of a government-wide framework is being established.</p> <p>Only members of the Computer Operations Group are Administrators on the Bureau domain. Also, a password lockout and complexity policy are in effect. All users must take part in the Bureau annual Disclosure and Computer Awareness training. The Information Technology (IT) department has already created a recertification policy and are now working on the forms for supervisors to acknowledge.</p>

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				These documents will be ready by the next fiscal year. The password lockout policy will be implemented for the next fiscal year as well. The IT department have already had discussions with a vendor to provide this feature with Oracle Forms. VIDOL change management has been logged by emails and some word document forms that were created but not standardized. VIDOL change management has been logged by emails and some word document forms that were created but not standardized. VIDOL IT is working on implementing a standardized change management system for the next fiscal year.
84	Finding 2022-016: Collateral of Depository	The Commissioner of Finance	On-going	Collateral reports are specific to the financial institution and may not include all quasi-governmental or component unit accounts if not identified as a government account when established at the financial institution. The Government will work with its banks to ensure any accounts identified are included on the collateral report of the related institution.
85	Finding 2022-017: Landfill Consent Decrees	Office of the Governor, Chief of Staff and the Waste Management Authority Management Team	On-going	The Government of the Virgin Islands is currently seeking funding, through the Virgin Islands Legislature, to address the funding concerns and to organize the workflow to timely complete reports to meet EPA decrees concerning the various issues.
86	Finding 2022-018: Establishment of a Medical Malpractice Trust Fund	Commissioner, Department of Health and Medical Malpractice Action Review Committee	Immediately	The Department of Health has already established a Medical Malpractice fund which is called the Reciprocal Insurance Fund.

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87	Finding 2022-019: Casino Control Commission	The Department of Finance and Director of Accounting	On-going	The Government has requested and is receiving the requisite reporting from the Casino Control Commission on a quarterly basis as covered by the V.I. Code.
88	2022-020: Allowable Costs/Cost Principles - Payroll Activities	Chief Financial Officer and Deputy Commissioner of Human Resources	October 2024	DHS transitioned from a manual payroll process to the Government electronic Timeforce (STATS) system. All time and attendance are now vetted and approved through the various levels of applicable management, ultimately being approved by the Agency Head or designee. Payroll is generated based on the cost centers listed on the Notice of Personnel Action. Payroll is now reconciled by the Financial Analyst once it is posted by the Department of Finance to ensure that cost is applied appropriately. Additionally, a workflow is now established in the NOPA approval process to ensure the current org, objects and projects are listed on the Notice of Personnel Actions (NOPA) which is utilized for payroll purposes.
90	2022-021: Matching, Level of Effort, Earmarking	Chief Financial Officer and Deputy Commissioner of Human Resources	October 2025	DHS transitioned from a manual payroll process to the Government electronic Timeforce (STATS) system. All time and attendance are now vetted and approved through the various levels of applicable management, ultimately being approved by the Agency Head or designee. The payroll is generated based on the cost centers listed on the Notice of Personnel Action (NOPA). Processes are now in place ensuring each respective staff NOPA is updated at the start of each fiscal year to reflect new year's applicable ERP code. Additionally, once payroll costs are generated, it is reconciled by the dedicated Financial Analyst for SNAP. Additionally, a workflow is now established in the NOPA approval process to ensure the current org, objects and projects are listed on the Notice of Personnel Actions (NOPA) which is utilized for payroll purposes.

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92	2022-022: Special Tests and Provisions - EBT Card Security	Program Administrator	December 2024 March 2025	A Standard Operating Procedures and Procedures (SOPP) is being prepared to detail the EBT Reconciliation process. Additionally, a Director of Support Services will be hired to review all reports.
94	2022-023: Allowable Cost/Cost Principles - Payroll Activities	Payroll Director	October 31, 2025	VIDE acknowledges the audit findings regarding Child Nutrition Cluster payroll and is committed to strengthening internal controls for federal compliance. VIDE will enhance timesheet management by developing clear policies for completion, submission, approval, and secure retention, ensuring accurate effort documentation. Federal Grants and Payroll staff will collaboratively verify employee authorization, accurate project coding, and consistent pay rates (NOPA vs. payroll register); this reconciliation will occur periodically and before key reporting deadlines. We will also improve payroll register completeness by adjusting reporting configurations to consistently include all mandatory employer-paid benefits (e.g., retirement, health insurance) and resolve individual instances where hours worked were inaccurate. Finally, mandatory training will be conducted for relevant staff and supervisors on new timesheet procedures, federal time and effort requirements, NOPA reconciliation, and accurate payroll documentation. This comprehensive approach, supported by ongoing monitoring from the Office of Fiscal and Administrative Services, will ensure sustained compliance and robust financial management for the Child Nutrition Cluster.
96	2022-024: Cash Management	Tatia- Monell Hewitt, DOH CFO	December 2024	DOH will revise drawdown Standard Operating Procedures (SOPs) to mandate that all supporting documents include a signature or initial to certify that a proper review was conducted. DOH will update drawdown SOPs for Fiscal Year 2025, ensuring that all drawdown documentation includes a review confirmation.

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				DOH will also incorporate this updated procedure into Federal Grants update training in December 2024 and make it accessible to all staff on Business Process Improvement SharePoint site.
97	2022-025: Period of Performance	Tatia- Monell Hewitt, Department of Health, CFO	Immediately	The Department of Health will make sure that any external consultant confers with their financial division to validate process or actions taken before finalizing any adjustments. In addition, the Department of Health will conduct monthly reconciliation meetings to ensure all adjustments are completed and on time.
99	2022-026: Allowable Costs/Cost Principles - Payroll Activities and Period of Performance	Director of Administration and Business Management	December 2023	OTAG has improved their internal controls and fully implemented a policy and procedure where the employees have both a manual timesheet and electronic timesheet to verify the time worked. Policies and procedures have been updated to address the validation of payroll process activities. In addition, an Employee Relations Coordinator has been in place to ensure validation input. The Director of Administration and Business Management certifies, and the Agency Head approves of allowable cost/cost principles payroll activities. OTAG is working on the review process relative to the grant and the appropriate period of performance.
101	2022-027: Cash Management and Reporting	Director of Administration and Business Management	March 2025	OTAG was not able to complete the preparation and submission of the SF-270 report for Fiscal Year 2022. However, OTAG has developed a Policies and Procedures Manual for FY2023. In addition, a Reimbursement Specialist was hired to ensure separation of duties in financial reporting.
103	2022-028: Matching, Level of Effort, Earmarking	Director of Administration and Business Management	On-going	OTAG has updated their policies and procedures manual which includes tracking the match fulfillment for each expenditure.

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				The master cooperative agreements through the appendices identifies the cost share and what is required by people performing management functions and procedures are updated annually and accordingly to reflect any changes.
104	2022-029: Period of Performance	Director of Administration and Business Management	March 2025	OTAG has updated policies and procedures to address pre-award costs, scope of work, and payout to vendors to abide with the 90 days close out process. OTAG is training new personnel and monitoring implementation.
106	2022-030: Cash Management	OMB Director, DOF Commissioner	September 2025	The Government of the Virgin Islands (GVI) is implementing significant reforms to strengthen financial accountability and improve internal controls within its agencies. The Executive Order directing CFOs of the Government agencies to report to the Department of Finance aims to streamline financial oversight and ensure that public funds are being managed effectively. The introduction of a Public Finance Policy to standardize procedures and ensure compliance with Cash Management regulations (including CFRs and other compliance rules) is an important step in maintaining transparency and minimizing financial risks across the various government agencies.
108	2022-031: Equipment and Real Property Management	Assistant Commissioner	Immediately	The Asset Management Division (AMD) has consistently followed Federal equipment and maintenance guidelines. Assets are tagged, and records are created using the Tyler Munis Resource Planning system (ERP). The serial numbers, model numbers, acquisition dates, cost of equipment, and agency that received the items are included. In 2022, AMD conducted inventory for four agencies, ensuring that all assets were accounted for and managed according to Federal regulations.

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				Additionally, AMD have completed the Standard Operation Policies and Procedures (SOPP), which is currently in the approval process. Implementing SOPP is essential to enhancing internal controls and ensuring compliance with Federal regulations. Training sessions will be conducted for fixed assets employees across all Government agencies to provide detailed insights and updates on the processes. It has been identified that additional staff will be required to support this initiative effectively.
110	2022-032: Procurement and Suspension and Debarment	Chief Procurement Officer	Immediately	The Government has since updated its procurement laws and has issued revised procurement manuals, along with issuing position-specific Standard Operating Procedures. Processes for enforcing Internal controls and adherence to procurement laws have been established and are regularly reinforced.
112	2022-033: Reporting	Manager of Federal Grants Management Unit, Agency Heads - Various Departments and Agencies	Fiscal Year 2023	<p>The Government will conduct a high-level review of internal control policies and closely monitor reports for completeness, accuracy, timeliness, and consistency with the guidelines, policies, and procedures established by the Cognizant Agency.</p> <p>Additionally, to support this effort, an analyst will be assigned to track reporting schedules, oversee grant activity, and manage document storage for individual agencies. The analyst will regularly monitor the reporting schedule for each grant award to ensure timely submission of all required reports.</p>
114	2022-034: Activities Allowed or Unallowed	Unemployment Director	3 rd Qtr. 2026	VIDOL concurs with the auditors finding relative to the balance not reconciling with the general ledger. The underlying factor that caused the variance in this finding was related to the retrieved file for the audit, which did not cover the period of the review, thus the balances provided to the auditors would not reconcile with the source system and the Government ledger.

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				<p>To avoid future occurrences, VIDOL has updated the source system report writer that produces query on balances for accounting and tracking ledger balances. VIDOL has also recently issued a request for a proposal to have a contractor assist in installing a Trust Fund accounting system infrastructure and procedures. This system is anticipated to correct many accounting deficiencies and improve operations. Based on the project plan the launch timeline is anticipated by third quarter of 2026. Once this system is operational, adequate personnel are hired and trained, postings and ledger balance should allow for more accurate data on account balances. This system will also provide a structure wherein accrual, month end, and year end system closes can occur.</p>
116	2022-035: Eligibility	Director of Administration	3 rd Qtr. 2025	<p>The agency has commenced reviewing the agency retention policies and training with staff on keeping records and files in a systematic sequence. In the third quarter of FY2025, the agency will be launching an electronic record keeping system for claims files that will provide a more comprehensive and structured mechanism for record retention. VIDOL staff will also be engaging with USDOL to have programmatic technical assistance with record retention. The agency is also engaging with USDOL to implement data validation in the operations which is intended to verify that eligibility and records are maintained.</p> <p>The agency's Integrity unit will commence regular compliance reviews for claimant eligibility in the 2nd quarter of FY2025, this review will assist in mitigating past errors and provide feedback on corrective actions that will assist in proper record retention.</p>

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118	2022-036: Reporting	Director of Administration	4 th Qtr. 2026	VIDOL has obtained a federal grant award from USDOL, to assist in updating and redesigning of UI reporting and accounting system. This award is intended to rebuild the current reporting structure to assist with having complete, accurate, and timely processes in place. VIDOL has commenced work on preparing scope of works for the projects, and it is anticipated by 4th quarter of FY2026.
120	2022-037: Special Tests and Provisions - Employer Experience Rating	Director of Administration	3 rd Qtr. 2026	VIDOL concurs with the initial auditors on finding relative to the balance not reconciling with the general ledger. The underlying factor that caused the variance in this finding was related to the retrieved file for the audit, which did not cover the period of the review, thus the balances provided to the auditors would not reconcile with the source system and the Government ledger. To avoid future occurrences, VIDOL has updated the source system report writer that produces query on balances for accounting and tracking ledger balances. VIDOL has also recently issued a request for a proposal to have a contractor assist in installing a Trust Fund accounting system infrastructure and procedures. This system is anticipated to correct many accounting deficiencies and improve operations. Based on the project plan the launch timeline is anticipated by third quarter of 2026. Once this system is operational, adequate personnel are hired and trained, postings and ledger balance should allow for more accurate data on account balances. This system will also provide a structure wherein accrual, month end, and year end system closes can occur.
122	2022-038: Special Tests and Provisions - UI Reemployment	Director of Administration	2 nd Qtr. 2025	VIDOL will be implementing a RESEA case management system for reporting and program services. This case management system is currently in configuration phase of the project. Live production is expected by the 2nd quarter 2025.

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	Programs (WPRS and RESEA)			This system will be the official system of record for recording all services for RESEA claimants that participate in the program.
124	2022-039: Period of Performance	Manager of Federal Grants Management Unit, Commissioner of Department of Finance	Fiscal Year 2023	The office of Management and Budget will work with the Department of Finance to implement control measures that will prevent the approval of transaction beyond the period of performance.
126	2022-040: Reporting	Manager of Federal Grants Management Unit	Fiscal Year 2023	An analyst will be assigned to track reporting schedules, grant activity and store documents. The analyst will regularly monitor the reporting schedule for each grant award to ensure that all reports are submitted in a timely manner.
128	2022-041: Subrecipient Monitoring	Manager of Federal Grants Management Unit	Fiscal Year 2023	OMB will develop and enforce a robust framework that includes detailed monitoring procedures, regular compliance checks, and comprehensive oversight mechanisms. This framework will ensure that all subrecipients adhere to federal requirements, thereby promoting accountability and proper use of federal funds. These measures will help mitigate risks, enhance transparency, and ensure that subrecipients fulfill their obligations under federal statutes effectively.
130	2022-042: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Non-Payroll Activities and Procurement and Suspension and Debarment	Federal Grants Management Unit and Compliance Unit	June 30, 2026	<p>1. Hiring of Key Personnel:</p> <ul style="list-style-type: none"> ○ A Grants Administrator has been hired to oversee the grant management process and ensure compliance with all applicable 2CFR200 regulations as well as the grant award. The Grants Administrator was onboarded in October 2023. ○ An external Accounting firm has been engaged to provide additional oversight and expertise in financial management and compliance. The firm began providing support in January 2022.

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				<p>2. Development of Policies and Procedures:</p> <ul style="list-style-type: none"> ○ Comprehensive policies have been developed to ensure compliance with all applicable 2CFR200 regulations and the grant award. These policies include: <ul style="list-style-type: none"> • Internal controls for the vetting of subrecipients to ensure they meet all eligibility criteria. • Documentation of the awards granted, including detailed records of the grant agreement, budget, scope and period of performance adjustments. • Monitoring of expenditures to ensure funds are used for allowable activities and costs. • Communication to subrecipients on non-compliance issues and guidance for remediation activities or recoupment of costs. ○ Finalizing contract for the development of GVI overarching policies to include Fraud, Waste and Abuse policy which would include a whistleblower process to encourage reporting of any suspected fraud or non-compliance. <p>3. Internal Controls:</p> <ul style="list-style-type: none"> ○ Implementation of robust internal controls to ensure compliance with federal regulations. These controls include: <ul style="list-style-type: none"> • Regular reviews of financial transactions and documentation. • Segregation of duties to prevent conflicts of interest and ensure accountability. Grant Analyst assigned to projects, Grant Administrator reviews and oversees daily work and final sign offs required by Director.

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				<ul style="list-style-type: none"> • Training for staff on compliance requirements and internal control procedures. <p>4. Monitoring and Evaluation:</p> <ul style="list-style-type: none"> ○ Establishment of a monitoring and evaluation framework through the OMB Compliance Unit to assess the effectiveness of internal controls and compliance measures. This framework includes: <ul style="list-style-type: none"> • Regular reporting and review of compliance activities and findings. • Continuous improvement processes to address any identified weaknesses or gaps in controls. ○ Establish an Audit committee to oversee the implementation and effectiveness of internal controls and compliance measures. <p>5. Training:</p> <ul style="list-style-type: none"> ○ Instituted regular training sessions for all staff involved in grant management to ensure they are aware of and understand compliance requirements.
133	2022-043: Procurement and Suspension and Debarment	Chief Procurement Officer, DPP	Immediately	<p>The Government has since updated its procurement laws and has issued revised procurement manuals, along with issuing position-specific Standard Operating Procedures. Processes for enforcing Internal controls and adherence to procurement laws have been established and are regularly reinforced.</p> <p>The Government, in late January and early February 2025, conducted the Government-wide training on the updated procurement laws and re-established expectations as it pertains to processes and maintaining full and open competition.</p>

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				<p>The Government has begun providing User Agencies with access to GVIBUY to enable them to perform informal solicitations in the eProcurement system.</p> <p>Further targeted training on this process will continue over time, ensuring User Agencies prioritize full and open competition in their procurement activities and will give the Department of Property and Procurement more oversight and compliance powers.</p>
135	2022-044: Reporting	Manager of Federal Grants Management Unit	Fiscal Year 2023	OMB has established a reporting approval memo in which the OMB Director signs acknowledging the review and approval of the Treasury reports starting in calendar year 2024 reporting. OMB has improved the collection and storage of underlying supporting financial information for all projects being reported in the quarterly reports and can provide the necessary support upon request as of FY23.
137	2022-045: Subrecipient Monitoring	Manager of Federal Grants Management Unit	Fiscal Year 2025	OMB will identify and monitor the federal awarding agencies and will request single audit results for the applicable recipients beginning FY25 and include the results in the monitoring reviews. For revenue replacement projects, based on Treasury’s Final Rule FAQ (13.14), “Recipients’ use of revenue loss funds does not give rise to subrecipient relationships given that there is no federal program or purpose to carry out in the case of the revenue loss portion of the award.” As such, they are not subject to the Single Audit Act.
140	2022-046: Equipment and	Fixed Assets Director	March 2025	VIDE acknowledges the finding regarding the management and documentation of federally funded equipment.

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	Real Property Management			<p>VIDE will ensure the reliability of its asset tracking system and ensure the maintenance of a centralized record of all assets acquired with federal funds, to include property description, serial number or other identification number, source of property, titleholder, acquisition date, cost of the property, percentage of Federal participation, location, use and condition of the property, and disposition information. The Procurement Division will schedule quarterly inventory audits and reconciliation processes to ensure all federal program assets are accounted for and that records align with actual inventory. Any discrepancies identified during these audits will be resolved promptly. The Fixed Asset Director will create a protocol to facilitate regular communication and updates among Programs/Divisions responsible for asset acquisition, maintenance, and recordkeeping. Monthly status reports on federal asset records will be required from each Program/Division to ensure data accuracy and timely updates.</p>
142	2022-047: Matching, Level of Effort, Earmarking	Federal Grants Director	December 2024	<p>VIDE acknowledges the audit finding related to matching, level of effort, and earmarking requirements, and recognizes the need for stronger internal controls and improved documentation to ensure full compliance with federal regulations. To address the finding, VIDE is committed to enhancing monitoring.</p> <p>VIDE will establish a dedicated team within the Federal Grants Office to conduct quarterly reviews of documentation, including student counts, poverty data, and funding allocations, and to document all monitoring activities and findings. They will also report any identified issues to management and recommend corrective actions.</p>

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				The IDEA State Office will establish clear procedures for Local Education Agencies (LEAs) to report student counts and poverty data, develop a process for verifying the accuracy of this data, and ensure all necessary data is collected and documented to support level of effort and earmarking calculations. To ensure all relevant staff understand the new policies and procedures, VIDE will provide comprehensive training.
144	2022-048: Cash Management	Federal Grants Director	December 2024	VIDE acknowledges the findings related to cash management processes under the U.S. Department of Education Consolidated Grant. VIDE is committed to implement corrective actions to enhance cash management procedures and maintain compliance with U.S. Department of Education conditions. VIDE will reinforce its procedure that mandates completion of all drawdown requests within 24 hours after receiving the request from the TPF. To maintain compliance and prevent any delays in processing drawdown requests, VIDE will ensure designated individuals are trained to process requests when the primary staff member is unavailable. VIDE will conduct weekly reconciliations of all drawdown requests and disbursements, developing a process for investigating and resolving discrepancies, and maintaining detailed records of all reconciliations.
146	2022-049: Equipment and Real Property Management	Fixed Assets Director	March 2025	VIDE acknowledges the finding regarding the management and documentation of federally funded equipment. VIDE will ensure the reliability of its asset tracking system and ensure the maintenance of a centralized record of all assets acquired with federal funds, to include property description, serial number or other identification number, source of property, titleholder, acquisition date, cost of the property, percentage of Federal participation, location, use and condition of the property, and

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				disposition information. The Procurement Division will schedule quarterly inventory audits and reconciliation processes to ensure all federal program assets are accounted for and that records align with actual inventory. Any discrepancies identified during these audits will be resolved promptly. The Fixed Asset Director will create a protocol to facilitate regular communication and updates among Programs/Divisions responsible for asset acquisition, maintenance, and recordkeeping. Monthly status reports on federal asset records will be required from each Program/Division to ensure data accuracy and timely updates.
148	2022-050: Reporting	Federal Grants Director	July 2025	<p>VIDE acknowledges the audit finding concerning the failure to comply with the Federal Funding Accountability and Transparency Act (FFATA) reporting requirements for first-tier subawards. VIDE plan will prioritize the development and implementation of detailed reporting policies and procedures, with a focus on FFATA requirements. These policies will include clear procedures for identifying and tracking all subawards subject to FFATA reporting, specific guidelines for collecting and reporting required data elements, and established timelines for data submission. Roles and responsibilities for all involved personnel, including program staff, grants management staff, and the Federal Grants Office, will be clearly defined within these policies.</p> <p>To enhance our subaward tracking capabilities, VIDE will implement a dedicated system for tracking subawards and collecting the required data. This may involve enhancing our existing grants management system or implementing a new system specifically designed to capture all necessary data elements for FFATA reporting. Comprehensive training on the use of this system will be provided to all relevant staff. VIDE will also strengthen its data verification and validation procedures.</p>

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				This will include establishing a formal process for reviewing and verifying the accuracy and completeness of subaward data before submission. Data quality checks will be implemented within the tracking system, and regular reconciliations will be conducted between subaward data and other relevant records to ensure consistency and accuracy. To ensure that all relevant personnel are well-versed in the new policies and procedures, VIDE will conduct mandatory training sessions. These sessions will cover FFATA reporting requirements in detail, VIDE's new policies and procedures for subaward reporting, and proper data collection and submission procedures.
150	2022-051: Subrecipient Monitoring	Federal Grants Director	March 2025	VIDE acknowledges the need for strengthened controls to ensure subrecipient compliance with federal audit requirements, as specified in 2 CFR Part 200, Subpart F. VIDE is committed to implementing effective measures to ensure that all subrecipients adhere to federal regulations and that sufficient oversight is provided. VIDE will ensure all subrecipient agreements include explicit reporting requirements and compliance expectations under 2 CFR Part 200, Subpart F. In addition, training will be given to internal staff on subrecipient monitoring requirements and best practices to ensure consistent implementation.
152	2022-052: Allowable Costs/Cost Principles - Payroll Activities	Payroll Director	March 2025	VIDE acknowledges the audit finding related to payroll activities and recognizes the need for stronger internal controls to ensure full compliance with federal regulations. To address the identified discrepancies and prevent future occurrences, VIDE will enhance timesheet management and strengthen rate verification processes. To improve timesheet management, VIDE will implement a system to ensure all timesheets are submitted and readily available.

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				This will include electronic timesheet submission, mandatory supervisor review and approval before payroll processing, and secure electronic storage and archiving of timesheets. VIDE will also strengthen its rate verification process by implementing a standardized procedure that includes a checklist for comparing NOPA rates with payroll system rates. Payroll staff will be required to complete this checklist at the start of each pay cycle and maintain a tracker to flag any discrepancies. To ensure all employees and supervisors understand the new policies and procedures, VIDE will conduct mandatory training sessions. These sessions will cover proper timesheet completion and submission, rate verification requirements, and the importance of adhering to the new guidelines.
154	2022-053: Reporting	Federal Grants Director	March 2025	VIDE acknowledges the deficiencies identified in the reporting processes for the COVID-19 Education Stabilization Fund (ESF-SEA). VIDE is committed to enhancing our reporting practices to ensure compliance with federal requirements and to prevent future occurrences. VIDE will implement a structured review and approval process for all performance and special reports, ensuring that each report is vetted by the appropriate officials. Training will be provided for all staff involved in report preparation and submission.
157	2022-054: Special Tests and Provisions - Participation of Private School Children	Federal Grants Manager & OMB Compliance Unit	March 2025	VIDE acknowledges the findings related to the participation of private school children in the COVID-19 Education Stabilization Fund (ESF-SEA) program. VIDE is committed to rectifying these issues and enhancing our systems to ensure equitable services for private school children.

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				OMB will develop and implement a formal policy and procedures that outline the process for ensuring the participation of private school children in compliance with federal regulations. This will include guidelines for timely consultation with nonpublic schools and documentation of services provided. OMB will create a consultation schedule to ensure that timely consultations with nonpublic schools are conducted each fiscal year. The schedule will outline key dates for initiating and completing consultations to meet compliance requirements. OMB will collaborate with the Department of Education to develop control measure to ensure that all private schools expenditures are equal on a per-pupil basis to the expenditures for participating public school children and their teachers and other educational personnel.
159	2022-055: Special Tests and Provisions - Wage Rate Requirements	Federal Grants Director & OMB Compliance Unit	March 2025	VIDE acknowledges the findings regarding compliance with wage rate requirements under the COVID-19 Education Stabilization Fund (ESF-SEA) program. VIDE is committed to addressing these compliance gaps and strengthening our processes to ensure that all wage rate requirements are met. All existing and future contracts will be reviewed to ensure they contain appropriate language regarding compliance with wage rate requirements. Contract templates will be updated to include clauses that mandate compliance and outline the consequences of noncompliance. VIDE will establish a system requiring contractors to submit certified payroll reports on a weekly basis for all contract work performed. A designated team will be responsible for collecting, reviewing, and retaining these reports to verify compliance.
161	2022-056: Allowable	Payroll Director, DOH Commissioner	Immediately	DOH fully acknowledge and accept the auditor’s finding regarding DOH’s inability to reconcile the payroll expenses listed in the SEFA

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	Costs/Cost Principles - Payroll Activities			with those documented in the payroll register. This discrepancy arose because payroll adjustments were not completed in time to reflect accurately in the FY2022 SEFA. To address this, DOH team has received thorough training, and staff members now have the necessary access to make payroll adjustments in the Government Financial Management System as of FY2024. Moving forward, DOH will strengthen our SOPs by conducting monthly reconciliation meetings with all relevant program teams to ensure timely adjustments and continuous monitoring. Additionally, DOH will update procedures to guarantee that all new fiscal staff are granted complete financial system access and are trained on reconciliation and adjustment processes within two weeks of starting.
163	2022-057: Equipment and Real Property Management	Director, DOH Commissioner	Immediately	<p>The Epidemiology Division has established robust procedures to manage and monitor property and equipment effectively, adhering to Property and Procurement guidelines. All equipment is meticulously inventoried, and employees sign acknowledgment forms listing the items assigned to them, such as laptops or cell phones, with serial numbers clearly documented and safeguarded. However, DOH recognize the need for improved coordination between the Epidemiology Division and Property and Procurement.</p> <p>To enhance asset management, the Department of Health will update our Fixed Asset SOP to require that each division shares its asset inventory with Property and Procurement on a quarterly basis, ensuring more accurate and up-to-date records.</p>

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165	2022-058: Equipment and Real Property Management	Commissioner of DPP, DHS Fixed Asset Director	On-going	An internal asset listing at DHS is maintained. However, the Department of Human Services will work collaboratively with the Department of Property and Procurement to ensure adherence to Federal regulations related to equipment and its related maintenance. The Office of Management and Budget is also reviewing and following up with the agency leadership of DPP and DHS to validate that the process is updated, maintained to monitor equipment acquired with Federal funds.
167	2022-059: Reporting	Program Administrator	July 2025	Program is collaborating with the Director of Asset Management and the Fiscal Analyst to include SOPP verbiage to ensure that completion of said forms are timely and submitted as required. Efforts are being supported by the Federal Office of Head Start Grants Office.
169	2022-060: Special Test and Provision - Protection of Federal Interest in Real Property and Facilities	Program Administrator	March 2025	Program is collaborating the Office of Legal Council to include SOPP verbiage to ensure that completion of said forms. Efforts and technical assistance are being provided by the Federal Office of Head Start Grants Office. All outstanding reports will be submitted by the end of March 2025. This will be included in quarterly monitoring meeting.
171	2022-061: Special Test and Provision - Program Governance	Program Administrator	October 2023	The Governing Board transitioned to virtual meetings due to the Pandemic with pre-empted the FY22 training and has incorporated electronic voting from board members into its procedures. Therefore, regular trainings occur that enable the governing body to perform its legal, fiscal and oversight responsibilities.
173	2022-062: Activities Allowed	Chief Financial Officer	October 2024	A dedicated Fiscal Analyst has been hired and is now inserted into the approval workflow to ensure compliance.

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	or Unallowed and Allowable Costs/Cost Principles - Non-Payroll Activities			Additionally, any open purchase orders are now closed at the end of the grant year to ensure compliance.
175	2022-063: Activities Allowed or Unallowed and Allowable Costs/Cost Principles - Payroll Activities	Deputy Commissioner of Human Resources and Labor Relations	October 2024	The Division of Human Resources is now adjusting the Notice of Personnel Actions to reflect the requisite Project code at the beginning of each Fiscal year.
177	2022-064: Eligibility	CCDF Administrator	October 2024	The DHS has implemented a checklist as an added internal control step to comply with the Federal requirements for review of provider enrollment applications by the provider relations staff.
179	2022-065: Matching, Level of Effort, Earmarking	Chief Financial Officer	October 2025	The CCDF team is collaborating with the CFO to finalize and approve the Standard Operating Procedures (SOPPs) for Matching, Level of Effort, Earmarking (MLEE). The team is also ensuring that matching fund contributions are monitored, with one member overseeing this aspect while another manages programmatic activities to ensure alignment with MLEE expenditure goals. An MLEE Compliance Tracker will be developed, and staff will receive training on federal MLEE requirements. Internal reviews will begin in Q1 2026 to assess compliance. Monthly tracking reports and quarterly audits will provide ongoing oversight, enabling the timely identification and resolution of any discrepancies.

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180	2022-066: Period of Performance	Chief Financial Officer	October 2024	A dedicated Fiscal Analyst has been hired and is now inserted into the approval workflow to ensure compliance. Additionally, any open purchase orders are now closed at the end of the grant year to ensure compliance.
181	2022-067: Reporting	Chief Financial Officer	August 2024	A Federal Grants Financial Analyst specific to the CCDF program has been onboarded with responsibility for the accuracy and submission of the financial reports. Internal controls have been implemented whereas final review and approval is required by a supervisor.
183	2022-068: Special Tests and Provisions - Health and Safety Requirements	Program Administrator	Immediately	While DHS remains in compliance with this finding from previously audited years, the untimely submission resulted in this finding. Moving forward, a shared file will be established to ensure that the requisite information for each year is readily available for audit purposes.
185	2022-069: Special Tests and Provisions - Fraud Detection and Repayment	Program Administrator	Immediately	An internal audit process is in place and is being utilized. Specifically, this includes exchanging caseloads between workers and having the eligibility and subsidy determinations cross-checked by the different worker based on the federally and locally established policies.
187	2022-070: Activities Allowed or Unallowed and Allowable Costs/Cost	IV-D Director, Program Specialist, and Case Administrator Supervisor	November 2024	DOJ will ensure each timesheet contains approval by the respective employee's supervisor before it is forwarded to DOF Payroll Division for processing.

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	Principles - Payroll Activities			
188	2022-071: Activities Allowed or Unallowed and Allowable Costs/Cost Principles	Chief Financial Officer	October 2024	The Stats Timeforce system has been implemented. Time and attendance are no longer a manual process eliminating these types of variance. The system is automated wherein designated employees utilize a fingerprint to log their time. The time once vetted and approved, is released to the Department of Finance for check processing. The process is automated to fall in line with designed ERP cost center listed on the employee's Notice of Personnel Action. Invoice transactions are vetted by the CFO. Any transactions over \$50K is then approved by the Commissioner or her designee.
190	2022-072: Period of Performance	Chief Financial Officer	October 2023	As part of the close-out process, all open purchase orders are now submitted to the Department of Finance to be closed. Additionally, the grant close out process has now shifted to OMB to ensure the grant is no longer available for transactions entries or liquidations. Additionally, a dedicated Fiscal Analyst is being inserted into the workflow to ensure compliance.
192	2022-073: Reporting	Chief Financial Officer	October 2025	Presently, there is a collaboration with our Federal Partners to consolidate the reporting in the Payment Management System portal as there is no one report for the SSBG as required. Presently, report requests are not consistent with one consolidated grant. Additionally, the pre and post expenditures are submitted through the portal with a log of submission.
194	2022-074: Allowable	Medicaid Director	Immediately	Isolated occurrence while the MAP program was being transitioned from one building to another.

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	Costs/Cost Principles - Non-Payroll Activities			As the equipment could not be used at the new location, it was stored for future use. The Director of Asset Management has oversight of the storage of inventory to avert future occurrences.
196	2022-075: Eligibility	Director of Operations, Medicaid Director	March 2024	DHS staff will work with PMO, hired to assist with the Public Health Emergency Unwind and establish Standard Operating Policies and Procedures (SOPPs) on certification and recertification processes and procedures. DHS is also in the process of hiring a Program Integrity Director and Medical Eligibility Quality Control (MEQC) staff, whose responsibility will be to review completed case files.
198	2022-076: Reporting	Chief Financial Officer	October 2024	As Medicaid staffing shortages are addressed, reports are submitted for review via email. The Department has implemented a shared folder to ensure copies of the approval emails and any time extension requests are now stored in said folder to ensure access for audit purposes as the submission portal does not allow for attachments.
200	2022-077: Special Tests and Provisions - Utilization Control and Program Integrity	Medicaid Director	On-going	DHS has onboarded a Director of Program Integrity who will be responsible for establishing The Quality Control Unit, which will work with the Medical Eligibility Quality Control (MFCU) on behalf of the Medicaid Program.
202	2022-078: Special Tests and Provisions - Inpatient Hospital	Medicaid Director	May 2025	DHS is in the process of composing the solicitation for bid on the project to cover all periods outstanding.

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	and Long-Term Care Facility Audits			
204	2022-079: Special Tests and Provisions - ADP Risk Analysis and System Security Review	Medicaid Director, MIS Manager	March 2024	DHS secured a commitment from a vendor who was unable to perform the required services. DHS is currently working through the procurement process with DPP in order to identify a new vendor to perform the mandated services.
206	2022-080: Special Tests and Provisions - Medicaid National Correct Coding Initiative	Medicaid Director	March 2024	Although DHS stated that the documentation supporting DHS download and incorporation of the NCCI methodologies were available for review and the MMIS has the methodologies built into the system. OMB recommends that the documentations that DHS will implement internal controls to ensure that the NCCI methodologies are incorporated in the Medicaid Program.
208	2022-081: Reporting	Malinda Vigilant-Messer, Territorial Public Assistance Officer	Fiscal Year 2023	The formalized process related to financial and performance report preparation and submission is now in place with clear roles and responsibilities outlined. The Disaster Program Financial Specialist is responsible for preparing the reports quarterly and submitting them to the Territorial Public Assistance Officer for review. The review process includes thorough reconciliations between the reports and other supporting data, such as accounting records.
210	2022-082: Subrecipient Monitoring	Malinda Vigilant-Messer, Territorial Public Assistance Officer	Fiscal Year 2024	The formal process for completing and retaining Subrecipient Agreements is now operational to ensure compliance with programmatic obligations.

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				<p>As the Recipient, it is the Territory's responsibility to notify the Subrecipient when the federal funds are obligated and provide them with a subrecipient agreement which outlines the terms and conditions of the program. The Disaster Program Financial Specialist is responsible for reconciling that the subrecipient agreement has been signed by the Applicant and Governor's Authorized Representative and provided to the Territorial Public Assistance Officer. As such, no funds will be disbursed until the Subrecipient signs and returns the subrecipient agreement. These agreements are saved in a centralized location for documentation and audit purposes.</p>
213	2022-083: Reporting	Graciela Rivera, Territorial Hazard Mitigation Officer	On-going	<p>A process related to financial and performance report preparation and submission will be formalized, and clear roles/responsibilities will be outlined. The Disaster Program Account Supervisors will be responsible for preparing the reports on a quarterly basis and submitting them to the Territorial Hazard Mitigation Officer for review. The review process will include thorough reconciliation between the reports and other supporting data, such as accounting records.</p>