State of Wisconsin
FY 2017-18 Single Audit
State of Wisconsin
FY 2017-18 Single Audit

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## CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letter of Transmittal</td>
<td>1</td>
</tr>
<tr>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td>Auditor’s Report</td>
<td>7</td>
</tr>
<tr>
<td>Auditor’s Reports on Federal Programs</td>
<td>13</td>
</tr>
<tr>
<td>Department of Administration</td>
<td>19</td>
</tr>
<tr>
<td>Department of Children and Families</td>
<td>25</td>
</tr>
<tr>
<td>Department of Health Services</td>
<td>35</td>
</tr>
<tr>
<td>Department of Public Instruction</td>
<td>53</td>
</tr>
<tr>
<td>University of Wisconsin System</td>
<td>57</td>
</tr>
<tr>
<td>Wisconsin Technical College System</td>
<td>63</td>
</tr>
<tr>
<td>Other Agencies</td>
<td>67</td>
</tr>
<tr>
<td>State of Wisconsin Schedule of Findings and Questioned Costs for the Year Ended June 30, 2018</td>
<td>69</td>
</tr>
</tbody>
</table>
March 28, 2019

Senator Robert Cowles and
Representative Samantha Kerkman, Co-chairpersons
Joint Legislative Audit Committee
State Capitol
Madison, Wisconsin 53702

Dear Senator Cowles and Representative Kerkman:

We have completed our annual financial and compliance audit of the State of Wisconsin. This audit satisfies state agencies’ audit requirements under the federal Single Audit Act of 1984, as amended, and of the federal Office of Management and Budget Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). The audit also assists us in fulfilling our audit responsibilities under s. 13.94, Wis. Stats.

Our report contains the auditor’s reports on internal control over financial reporting and on compliance with program requirements, and our audit opinion on the State of Wisconsin’s Schedule of Expenditures of Federal Awards. In fiscal year (FY) 2017-18, state agencies administered $11.9 billion in federal financial assistance. We qualified our opinion on compliance related to cash management requirements for two federal programs.

We tested internal controls and compliance with laws and regulations for 16 federal programs that were selected for review using risk-based assessment criteria established by the federal government and specified in Uniform Guidance. Although state agencies generally complied with federal requirements, we made 14 recommendations to improve administration of federal programs.

State agencies reported taking steps to address prior audit concerns from the FY 2016-17 single audit (report 18-5). However, we report new and continuing internal control deficiencies and areas of federal noncompliance. The federal government will work with state agencies to resolve the new and continuing concerns we identified.

We appreciate the courtesy and cooperation extended to us by state agency staff during our audit. Agency responses to individual findings are included within the agency chapters. As required by Uniform Guidance, agency corrective action plans to address these findings are included separately in the auditee section of this report.

Respectfully submitted,

Joe Chrisman
State Auditor

JC/CS/ss
Wisconsin state agencies administered $11.9 billion in federal financial assistance during fiscal year (FY) 2017-18 including $10.7 billion in cash assistance, $917.0 million in noncash assistance, and $196.9 million in outstanding loan balances. As a condition of receiving federal funds, state agencies must meet the audit requirements of the federal Single Audit Act of 1984, as amended, and of the federal Office of Management and Budget Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance).

We performed this audit for FY 2017-18 at the request of state agencies that administered federal financial assistance and to assist us in fulfilling our audit responsibilities under s. 13.94, Wis. Stats. We focused our audit on the internal controls over 16 selected federal programs and tested compliance with laws and regulations related to these programs.

In performing this audit, we are required by federal rules to:

- render an opinion on the State’s basic financial statements;

- issue a report on the State’s internal control and compliance related to financial reporting; and

- issue a report on the State’s compliance with requirements applicable to each major program, on its internal control over compliance, and on its Schedule of Expenditures of Federal Awards.

Our opinion on the State’s FY 2017-18 financial statements was included in the State’s Comprehensive Annual Financial Report (CAFR), which was issued by the Wisconsin Department of Administration (DOA) in December 2018 and is available
on DOA’s website. The other required auditor’s reports, along with the agencies’ responses to our findings and their corrective action plans, are included in this single audit report. This single audit report, along with other required information, has been submitted to the federal government as required by Uniform Guidance.

As shown in Table 1, 10 programs accounted for 83.7 percent of the $11.9 billion in federal financial assistance state agencies administered during FY 2017-18.

Table 1

<table>
<thead>
<tr>
<th>Federal Program</th>
<th>Primary Recipient</th>
<th>Expenditures</th>
<th>Percentage of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid Cluster</td>
<td>DHS</td>
<td>$5,203,696,757</td>
<td>43.9%</td>
</tr>
<tr>
<td>Student Financial Assistance Cluster</td>
<td>UW System</td>
<td>1,029,804,326</td>
<td>8.7</td>
</tr>
<tr>
<td>Supplemental Nutrition Assistance Program (SNAP) Cluster</td>
<td>DHS</td>
<td>914,204,116</td>
<td>7.7</td>
</tr>
<tr>
<td>Highway Planning and Construction Cluster</td>
<td>DOT</td>
<td>791,615,858</td>
<td>6.7</td>
</tr>
<tr>
<td>Research and Development Cluster</td>
<td>UW System</td>
<td>585,054,220</td>
<td>4.9</td>
</tr>
<tr>
<td>Unemployment Insurance</td>
<td>DWD</td>
<td>475,155,856</td>
<td>4.0</td>
</tr>
<tr>
<td>Child Nutrition Cluster</td>
<td>DPI</td>
<td>258,436,062</td>
<td>2.2</td>
</tr>
<tr>
<td>Children’s Health Insurance Program (CHIP)</td>
<td>DHS</td>
<td>242,130,562</td>
<td>2.0</td>
</tr>
<tr>
<td>Temporary Assistance for Needy Families (TANF) Cluster</td>
<td>DCF</td>
<td>218,463,952</td>
<td>1.8</td>
</tr>
<tr>
<td>Title I Grants to Local Educational Agencies</td>
<td>DPI</td>
<td>207,018,161</td>
<td>1.7</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td></td>
<td><strong>9,925,579,870</strong></td>
<td><strong>83.7</strong></td>
</tr>
<tr>
<td><strong>Other Federal Programs</strong></td>
<td></td>
<td><strong>1,929,433,393</strong></td>
<td><strong>16.3</strong></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>$11,855,013,263</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>

1 Includes cash assistance; noncash assistance, such as food commodities; and outstanding loan balances.

2 In accordance with federal requirements, consists of insurance benefits paid from employer contributions and direct federal funding.

The Department of Health Services (DHS) is responsible for the Medicaid Cluster, which is the largest federal program administered by the State. In addition, DHS disbursed more than $914.0 million in federal funds and benefits under the Supplemental Nutrition Assistance Program (SNAP) Cluster for Wisconsin’s FoodShare program and $242.1 million under the Children’s Health Insurance Program (CHIP).

The University of Wisconsin (UW) System administered federal student financial assistance totaling $1.0 billion under the Student Financial Assistance Cluster,
which was the second-largest federal program administered by the State during FY 2017-18. UW System also disbursed $585.1 million under a variety of research and development grants.

The Department of Transportation (DOT) is responsible for administering the Highway Planning and Construction Cluster, which was the fourth-largest federal program administered by the State during FY 2017-18.

Other state agencies administered other large federal programs, including:

- the Department of Workforce Development (DWD), which expended funds under the Unemployment Insurance (UI) program;

- the Department of Public Instruction (DPI), which provided funds to local schools and other entities under the Child Nutrition Cluster and the Title I Grants to Local Educational Agencies program; and

- the Department of Children and Families (DCF), which expended funds under the Temporary Assistance for Needy Families (TANF) Cluster.

Uniform Guidance establishes the process for selecting the grant programs to be audited. Uniform Guidance categorizes federal programs as “type A” (large programs) and “type B” (smaller programs). For the State, type A programs had expenditures of $30.0 million or more in federal funds. The type A and B programs selected for audit were those determined to be subject to a higher risk of noncompliance based on the risk factors established by Uniform Guidance.

The audit of FY 2017-18 focused on the twelve type A programs and four type B programs listed in Section I of the Schedule of Findings and Questioned Costs. These programs were administered by seven state agencies, including UW System, and accounted for 73.0 percent of the $11.9 billion in federal financial assistance administered by state agencies. Table 2 shows the amount of federal financial assistance administered by each state agency.

We also followed up on the status of corrective actions to address prior-year findings reported in our FY 2016-17 single audit report (report 18-5). Our FY 2017-18 single audit report includes those findings that are required to be reported under Uniform Guidance, including findings related to the audit of the State’s financial statements. In addition, we noted certain additional internal control or compliance matters that we conveyed to agency management in separate communications.
### Table 2

**Summary Schedule of Expenditures of Federal Awards**  
**by Wisconsin State Agency for the Year Ended June 30, 2018**

<table>
<thead>
<tr>
<th>State Agency</th>
<th>Individual Programs and Other Clusters</th>
<th>Research and Development Cluster</th>
<th>Student Financial Assistance Cluster</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of Health Services</td>
<td>$6,730,837,574</td>
<td>$</td>
<td>$</td>
<td>$6,730,837,574</td>
</tr>
<tr>
<td>University of Wisconsin System</td>
<td>97,142,099</td>
<td>585,054,220</td>
<td>1,029,804,326</td>
<td>1,712,000,645</td>
</tr>
<tr>
<td>Department of Transportation</td>
<td>863,809,022</td>
<td>–</td>
<td>–</td>
<td>863,809,022</td>
</tr>
<tr>
<td>Department of Public Instruction</td>
<td>828,799,855</td>
<td>–</td>
<td>–</td>
<td>828,799,855</td>
</tr>
<tr>
<td>Department of Workforce Development</td>
<td>618,905,119</td>
<td>–</td>
<td>–</td>
<td>618,905,119</td>
</tr>
<tr>
<td>Department of Children and Families</td>
<td>592,715,850</td>
<td>–</td>
<td>–</td>
<td>592,715,850</td>
</tr>
<tr>
<td>Department of Administration</td>
<td>150,926,215</td>
<td>–</td>
<td>–</td>
<td>150,926,215</td>
</tr>
<tr>
<td>Department of Natural Resources</td>
<td>134,642,011</td>
<td>–</td>
<td>–</td>
<td>134,642,011</td>
</tr>
<tr>
<td>Department of Military Affairs</td>
<td>67,175,627</td>
<td>–</td>
<td>–</td>
<td>67,175,627</td>
</tr>
<tr>
<td>Department of Veterans Affairs</td>
<td>49,919,709</td>
<td>–</td>
<td>–</td>
<td>49,919,709</td>
</tr>
<tr>
<td>Department of Justice</td>
<td>41,235,670</td>
<td>–</td>
<td>–</td>
<td>41,235,670</td>
</tr>
<tr>
<td>Wisconsin Technical College System</td>
<td>27,734,578</td>
<td>–</td>
<td>–</td>
<td>27,734,578</td>
</tr>
<tr>
<td>Department of Agriculture, Trade and Consumer Protection</td>
<td>14,612,852</td>
<td>–</td>
<td>–</td>
<td>14,612,852</td>
</tr>
<tr>
<td>Public Service Commission</td>
<td>14,180,221</td>
<td>–</td>
<td>–</td>
<td>14,180,221</td>
</tr>
<tr>
<td>Elections Commission</td>
<td>2,434,757</td>
<td>–</td>
<td>–</td>
<td>2,434,757</td>
</tr>
<tr>
<td>Board for People with Developmental Disabilities</td>
<td>1,470,200</td>
<td>–</td>
<td>–</td>
<td>1,470,200</td>
</tr>
<tr>
<td>Wisconsin Historical Society</td>
<td>1,106,313</td>
<td>–</td>
<td>–</td>
<td>1,106,313</td>
</tr>
<tr>
<td>Department of Tourism</td>
<td>834,128</td>
<td>–</td>
<td>–</td>
<td>834,128</td>
</tr>
<tr>
<td>Child Abuse and Neglect Prevention Board</td>
<td>662,992</td>
<td>–</td>
<td>–</td>
<td>662,992</td>
</tr>
<tr>
<td>Department of Corrections</td>
<td>513,478</td>
<td>–</td>
<td>–</td>
<td>513,478</td>
</tr>
<tr>
<td>Department of Safety and Professional Services</td>
<td>386,984</td>
<td>–</td>
<td>–</td>
<td>386,984</td>
</tr>
<tr>
<td>State Public Defender Board</td>
<td>55,971</td>
<td>–</td>
<td>–</td>
<td>55,971</td>
</tr>
<tr>
<td>Office of the Commissioner of Insurance</td>
<td>53,492</td>
<td>–</td>
<td>–</td>
<td>53,492</td>
</tr>
<tr>
<td><strong>Total State of Wisconsin</strong></td>
<td><strong>$10,240,154,717</strong></td>
<td><strong>$585,054,220</strong></td>
<td><strong>$1,029,804,326</strong></td>
<td><strong>$11,855,013,263</strong></td>
</tr>
</tbody>
</table>
Auditor’s Report
Independent Auditor’s Report on Internal Control over Financial Reporting and on Compliance and Other Matters

Honorable Members of the Legislature The Honorable Scott Walker, Governor

We have audited the financial statements and the related notes 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 State of Wisconsin, which collectively comprise the State’s basic financial statements, as of and for the year ended June 30, 2018, and have issued our report thereon dated December 20, 2018.

We conducted our audit 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, which is issued by the Comptroller General of the United States. The basic financial statements and related auditor’s opinions have been included in the State of Wisconsin’s Comprehensive Annual Financial Report (CAFR) for the fiscal year ended June 30, 2018.

Our report includes a reference to other auditors who audited the financial statements of the Environmental Improvement Fund, the University of Wisconsin (UW) System Fund, the College Savings Program Trust Fund, the Wisconsin Housing and Economic Development Authority, the UW Hospitals and Clinics Authority, and the UW Foundation, as described in our report on the State of Wisconsin’s basic financial statements. The financial statements of the Environmental Improvement Fund, the UW System Fund, the College Savings Program Trust Fund, the Wisconsin Housing and Economic Development Authority, and the UW Hospitals and Clinics Authority were audited in accordance with auditing standards generally accepted in the United States of America and Government Auditing Standards. This report does not include the results of the other auditors’ testing of internal control over financial reporting or compliance and other matters that were reported on separately by those auditors. Although the financial statements of the UW Foundation were audited in accordance with auditing standards generally accepted in the United States of America, they were not audited in accordance with Government Auditing Standards and, accordingly, this report does not include reporting on internal control over financial reporting or instances of reportable noncompliance associated with the UW Foundation.

Internal Control over Financial Reporting

Management of the State of Wisconsin is responsible for establishing and maintaining effective internal control over financial reporting (internal control). In planning and performing our audit of the financial statements, we considered the State’s internal control to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the
effectiveness of the State’s internal control. Accordingly, we do not express an opinion on the effectiveness of the State’s internal control.

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

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and, therefore, material weaknesses or significant deficiencies may exist that were not identified. However, we identified certain deficiencies in internal control that we consider to be material weaknesses or significant deficiencies.

We consider the deficiencies in internal control, described in Section II of the Schedule of Findings and Questioned Costs as Findings 2018-008 and 2018-009, when combined, to be a material weakness. We consider the deficiencies in internal control, described in Section II of the Schedule of Findings and Questions Costs as Findings 2018-001 through 2018-007, and Finding 2018-010 to be significant deficiencies. Because the Department of Employee Trust Fund’s (ETF’s) financial activity is also reported separately from the State’s CAFR, Finding 2018-006 was also included in the Independent Auditor’s Report on Internal Control over Financial Reporting and on Compliance and Other Matters for ETF’s financial statements (report 18-10).

Compliance and Other Matters

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

Responses to Findings

Agency-specific responses to the findings identified in our audit are described in Section II of the Schedule of Findings and Questioned Costs. Agency-specific corrective action plans for the findings identified in our audit are included in the Corrective Action Plans chapter. The responses and corrective action plans were not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on them.
Purpose of This Report

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

LEGISLATIVE AUDIT BUREAU

Joe Chrisman
State Auditor

December 20, 2018
Auditor’s Reports on Federal Programs
Honorable Members of the Legislature

The Honorable Tony Evers, Governor


Report on Compliance for Each Major Federal Program

We have audited the State of Wisconsin’s compliance with the types of compliance requirements described in the federal Office of Management and Budget (OMB) Compliance Supplement that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2018. The State of Wisconsin’s major federal programs are identified in the Summary of Auditor’s Results section of the accompanying Schedule of Findings and Questioned Costs.

The State of Wisconsin’s basic financial statements include the operations of the Wisconsin Housing and Economic Development Authority, the Wisconsin Economic Development Corporation, the University of Wisconsin Hospitals and Clinics Authority, and the Wisconsin Court System. These entities expended $307.8 million in federal awards that are not included in the State of Wisconsin’s Schedule of Expenditures of Federal Awards for the year ended June 30, 2018. As discussed in Note 1D, our federal compliance audit, as described under the Auditor’s Responsibility section of this report, did not include the operations of these entities.

Management’s Responsibility

Management of each Wisconsin state agency is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditor’s Responsibility

Our responsibility is to express an opinion on compliance for each of the State of Wisconsin’s major federal programs based on our audit of the types of compliance requirements referred to in the first paragraph. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in Government Auditing Standards, which is issued by the Comptroller General of the United States; and the audit requirements of 2 CFR Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Those standards and Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance occurred with the types of compliance requirements that could have a direct and material effect on a major federal federal program.
program. An audit includes examining, on a test basis, evidence about the State of Wisconsin’s compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our qualified and unmodified opinions on compliance for each major federal program. However, our audit does not provide a legal determination on the State of Wisconsin’s compliance.

**Basis for Qualified Opinion on Certain Major Federal Programs**

As described in the accompanying agency report narratives and in Section III of the Schedule of Findings and Questioned Costs, the State of Wisconsin did not comply with requirements regarding the following:

<table>
<thead>
<tr>
<th>Finding Number</th>
<th>CFDA Number</th>
<th>Major Federal Program</th>
<th>Type of Compliance Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018-101</td>
<td>84.287</td>
<td>Twenty-First Century Community Learning Centers</td>
<td>Cash Management</td>
</tr>
<tr>
<td>2018-101</td>
<td>84.367</td>
<td>Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants)</td>
<td>Cash Management</td>
</tr>
</tbody>
</table>

Compliance with such requirements is necessary, in our opinion, for the State of Wisconsin to materially comply with the requirements applicable to these programs.

**Qualified Opinion on Certain Major Federal Programs**

In our opinion, except for the noncompliance described in the Basis for Qualified Opinion section, the State of Wisconsin complied, in all material respects, with the types of compliance requirements referred to in the first paragraph that could have a direct and material effect on the Twenty-First Century Community Learning Centers (CFDA #84.287) and Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants) (CFDA #84.367) federal programs, for the year ended June 30, 2018.

**Unmodified Opinion on Each of the Other Major Federal Programs**

In our opinion, the State of Wisconsin complied, in all material respects, with the types of compliance requirements referred to in the first paragraph that could have a direct and material effect on each of its other major federal programs identified in the Summary of Auditor’s Results section of the accompanying Schedule of Findings and Questioned Costs, for the year ended June 30, 2018.

**Other Matters**

The results of our auditing procedures disclosed instances of noncompliance, which are required to be reported in accordance with Uniform Guidance and which are described in the accompanying agency report narratives and in Section III of the Schedule of Findings and Questioned Costs as Findings 2018-100, 2018-200 through 2018-203, 2018-300 through 2018-305, 2018-400, and 2018-900. Our opinion on each major federal program is not modified with respect to these matters.
Wisconsin state agencies’ responses, including corrective action plans, to the noncompliance findings identified in our audit are in the accompanying agency report narratives and the Corrective Action Plans chapter. The responses and corrective action plans were not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on them.

**Report on Internal Control over Compliance**

Management of the State of Wisconsin is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to in the first paragraph. In planning and performing our audit, we considered the State of Wisconsin’s internal control over compliance with the types of compliance requirements that could have a direct and material effect on a major federal program. This consideration was solely to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with Uniform Guidance. This consideration was not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the State of Wisconsin’s internal control over compliance.

Our consideration of the internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies 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 deficiency in internal control over compliance described in the accompanying agency report narrative and in Section III of the Schedule of Findings and Questioned Costs as Finding 2018-101 to be a material weakness.

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 agency report narratives and in Section III of the Schedule of Findings and Questioned Costs as Findings 2018-100, 2018-200 through 2018-203, 2018-300, 2018-302, 2018-304, 2018-305, 2018-400, 2018-700, and 2018-900, to be significant deficiencies.
Wisconsin state agencies’ responses, including corrective action plans, to the internal control over compliance findings identified in our audit are in the accompanying agency report narratives and the Corrective Action Plans chapter. The responses and corrective action plans were not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no auditing opinion on them.

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 Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

**Report on Schedule of Expenditures of Federal Awards**

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 for the State of Wisconsin as of and for the year ended June 30, 2018, and the related notes to the financial statements, which collectively comprise the State of Wisconsin’s basic financial statements. We have issued our report thereon dated December 20, 2018, which contains unmodified opinions on those financial statements. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. We have not performed any procedures with respect to the audited financial statements subsequent to December 20, 2018. The accompanying Schedule of Expenditures of Federal Awards is presented for purposes of additional analysis, as required by 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, 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.

LEGISLATIVE AUDIT BUREAU

Joe Chrisman
State Auditor

March 27, 2019
The Wisconsin Department of Administration (DOA) provides support services to other state agencies, manages certain housing and economic development activities, and performs other functions prescribed by law. DOA is also responsible for providing the Governor with fiscal management information and the policy alternatives required for preparing Wisconsin’s biennial budget. In FY 2017-18, DOA administered $150.9 million in federal financial assistance.

We tested DOA’s internal controls for federal cash management processes performed by DOA and tested compliance with requirements of the Cash Management Improvement Act (CMIA) of 1990, as specified in 31 CFR Part 205. We identified concerns with the timing of draws of federal funds (Finding 2018-100 and Finding 2018-101).

In addition, we followed up on DOA’s progress in addressing Findings 2017-100 through 2017-104 of our FY 2016-17 audit (report 18-5). DOA implemented corrective actions to address these findings. The Summary Schedule of Prior Audit Findings on page 97, which is prepared by management, describes the status of each finding as of the end of our audit period.


*Criteria:*

The CMIA of 1990, as amended, requires that the State enter into an agreement with the U.S. Department of the Treasury for certain federal programs to ensure that neither the State nor the federal government earns interest income at the expense of the other. This agreement is referred to as the Treasury-State Agreement (TSA). For other federal programs, CMIA regulations in 31 CFR s. 205.33 require the State to
minimize the time between when the State draws down federal funds from the federal government and when the State disburses funds for federal program purposes. The regulations further specify that the timing and amount of the draws from the federal government are to be as close as administratively feasible to the State’s actual cash outlay.

The State Controller’s Office (SCO) in DOA is responsible for drawing funds from the federal government for most of the federal programs administered by Wisconsin state agencies through its central federal draw process. For each federal program for which it is responsible for drawing federal funds, SCO determines the timing and amount of the draws by using a report from the State’s enterprise resource planning system, STAR, which includes the State’s accounting system. This STAR report identifies the earliest date the federal funds should be drawn in addition to the amount that may be drawn, both of which are based on information derived from federal program transactions processed in STAR. These transactions include transactions that directly result in a payment as well as other non-payment transactions, such as those that allocate costs.

**Condition:**

A payment may be scheduled in STAR to be disbursed at a future date, rather than immediately after the date the transaction was approved in STAR. However, after a payment transaction is approved in STAR, the central federal draw process begins regardless of the scheduled disbursement date. For those payments scheduled in STAR to be disbursed at a future date, particularly those scheduled to be disbursed five days or more in the future, SCO’s procedures did not minimize the time between when the State drew down federal funds from the federal government and when the State disbursed funds for federal program purposes. For example, one payment for the Social Security-Disability Insurance federal program (CFDA #96.001) was approved in STAR on February 28, 2018, with a scheduled disbursement date of March 9, 2018. The related federal funds were requested on March 1, 2018, and received on March 2, 2018, seven days prior to the disbursement date. As another example, one payment for the Twenty-First Century Community Learning Centers federal program (CFDA #84.287) was approved in STAR on August 2, 2017, with a scheduled disbursement date of August 14, 2017. The related federal funds were requested on August 3, 2017, and received on August 4, 2017, 10 days prior to the disbursement date.

In addition, SCO did not provide sufficient information to agencies to enable them to understand the implications of scheduling payments in STAR to be disbursed at a future date.

Although compensating controls were identified for major federal programs included in the FY 2017-18 TSA, these compensating controls were not applicable to major federal programs not included in the TSA.

**Questioned Costs:**

None.

**Context:**

During FY 2017-18, SCO drew down federal funds of approximately $7.4 billion for federal programs administered by state agencies, including grants from the U.S.
departments of Education and Health and Human Services. We reviewed a selection of draws of federal funds and a selection of expenditure transactions for each major federal program for which SCO was responsible for drawing federal funds. For each selected item, we compared the date the federal funds were drawn and received from the federal government to the State’s payment disbursement date. An assessment of all payment transactions was not completed due to the complexities of both compiling and analyzing the necessary data. Of the $7.4 billion of federal funds SCO drew down during FY 2017-18, federal programs included in the TSA accounted for approximately $6.5 billion and federal programs not included in the TSA accounted for approximately $0.9 billion.

Effect:
When five days or more elapse between the date a payment transaction was approved and the date the payment was disbursed, it indicates the draw of federal funds was initiated before it was appropriate and, therefore, the State did not minimize the time between drawing and disbursing funds for federal program purposes. For the selected payment transactions we reviewed, certain payment disbursements were scheduled five or more days in the future. We found SCO consistently drew federal funds before these payments were disbursed for federal program purposes.

We found instances in which agencies scheduled payment disbursements to occur five or more days after the dates payment transactions were approved for major federal programs. For example, the Wisconsin Department of Public Instruction indicated that it regularly scheduled payment disbursements for aids payments 11 days in the future. These payments represented more than 90 percent of the payment transactions associated with two major federal programs. In addition, we determined that 22 of the 182 payments (12.1 percent) made by the Wisconsin Department of Health Services during FY 2017-18 for the Social Security-Disability Insurance program were scheduled to be disbursed five or more days after the payment transactions were approved. For example, one payment for $117,862 was approved in STAR on January 19, 2018, and was disbursed 12 days later on January 31, 2018.

Cause:
SCO indicated that its central federal draw process was initially designed based on its understanding of STAR processing and reporting capabilities at the time of implementation in FY 2015-16. STAR is a complex system, and the processing that creates the STAR report used by SCO is several steps removed from the entry of a payment transaction, increasing the difficulty of including payment transactions in that report based on the scheduled disbursement date.

Although agencies are permitted to schedule payments in STAR to be disbursed at a future date, SCO’s communication of the central federal draw process to agencies, which is in the Wisconsin Accounting Manual Section 10, Sub-section 01, does not include the level of detail that would be needed for agencies to understand how doing so may affect the State’s compliance with federal regulations. Therefore, agencies for which SCO draws the federal funds may not have known of the need to implement compensating controls to address this risk.
We recommend the Wisconsin Department of Administration:

- promptly notify relevant agency staff about how scheduling payments to be disbursed in the future may affect the State’s compliance with federal regulations; and

- take additional steps to minimize the time between when the State draws down federal funds from the federal government and when the State disburses funds for federal program purposes, particularly for payments scheduled to be disbursed at a future date.

**Finding 2018-100: Timing of Draws of Federal Funds**

This finding represents a significant deficiency in internal controls for the following federal programs:

**Career and Technical Education—Basic Grants to States** (CFDA #84.048)

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**Questioned Costs:** None

**Substance Abuse and Mental Health Services Projects of Regional and National Significance** (CFDA #93.243)

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**Questioned Costs:** None
**Social Security-Disability Insurance** (CFDA #96.001)

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**Questioned Costs:** None

**Response from the Wisconsin Department of Administration:**
The Department of Administration agrees with the recommendation.

**Finding 2018-101: Timing of Draws of Federal Funds**

This finding represents material noncompliance and a material weakness in internal controls for the following federal programs:

**Twenty-First Century Community Learning Centers** (CFDA #84.287)

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**Questioned Costs:** None

**Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants)** (CFDA #84.367)

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**Questioned Costs:** None

**Response from the Wisconsin Department of Administration:** The Department of Administration agrees with the recommendation.
The Wisconsin Department of Children and Families (DCF) administers programs such as adoption assistance, foster care, and child support enforcement. It also administers the Wisconsin Shares child care subsidy program and Wisconsin’s work-based public assistance program, Wisconsin Works (W-2). In FY 2017-18, DCF administered $592.7 million in federal financial assistance.

We tested DCF’s internal controls and compliance with grant requirements for three type A programs: Temporary Assistance for Needy Families (TANF) (CFDA #93.558), Child Support Enforcement (CSE) (CFDA #93.563), and Child Care and Development Fund (CCDF) Cluster (CFDA #93.575/93.596). Our audit findings are the following:

- Collection of Child Care Provider Overpayments (Finding 2018-200);
- Reconciliation of Child Care Payments (Finding 2018-201);
- Monitoring of Child Care Providers (Finding 2018-202); and

In addition, we followed up on DCF’s progress in addressing Finding 2017-200 of our FY 2016-17 audit (report 18-5) as well as Findings 2015-013, 2015-014, 2015-018, 2015-019, and 2015-022 of our FY 2014-15 audit (report 16-5), which were included in the Summary Schedule of Prior Audit Findings in report 18-5.
DCF implemented corrective actions to address our concerns related to Findings 2015-013, 2015-014, 2015-018, 2015-019, and 2017-200, and to partially address the remaining finding (Finding 2015-022). It will be important for DCF to continue to work to resolve this finding. The Summary Schedule of Prior Audit Findings on page 97, which is prepared by management, describes the status of each finding as of the end of our audit period as well as ongoing steps to address findings that were not fully corrected.

**Finding 2018-200: Collection of Child Care Provider Overpayments**

**Criteria:**
DCF receives funding from the U.S. Department of Health and Human Services’ CCDF and uses this funding, in addition to State and other funding, to increase availability, affordability, and quality of Wisconsin’s child care program services. DCF is required by 45 CFR s. 98.60 to recover child care payments that are the result of fraud from the party responsible for committing the fraud. In addition, DCF is responsible for the effective management and oversight of the child care program by ensuring that payments made under the program are reasonable and for necessary costs.

**Condition:**
DCF staff are responsible for performing investigations to assess whether overpayments have occurred due to either participant or provider errors or fraud. When DCF staff identify that an overpayment was made as a result of an error or fraud, an initial notice is sent to either the participant or provider informing them of the overpayment amount. DCF subsequently enters the overpayment into an administrative tracking system to initiate the collection process. The overpayments, when collected, are credited back to the child care program through a reduction of current year expenditures.

In January 2017, DCF implemented a new administrative system, which replaced a former system used to track payments to child care providers. At the time of our review in February 2019, DCF continued to collect overpayments from participants, and those provider overpayments that DCF continued to track from the former administrative system, but DCF had not begun the collection process for provider overpayments identified within the new administrative system. From January 2017 through June 2018, DCF identified $259,308 in provider overpayments using the new administrative system, but it has not collected any portion of these amounts.

**Questioned Costs:**
Undetermined.

**Context:**
We interviewed staff at DCF to gain an understanding of DCF efforts to identify, detect, and recover fraudulent payments. DCF staff informed us that efforts to recover identified overpayments in the new administrative system were
not being completed. During FY 2017-18, DCF conducted 69 of approximately 221 provider investigations using the new administrative system.

Effect:

DCF did not fully comply with the federal fraud detection and repayment processes requirements because it did not take steps to recover the identified overpayments in a timely manner. Because DCF did not collect overpayments identified through its investigation efforts, it did not credit the child care program for the overpayments.

Cause:

Information on overpayments DCF identified for providers and recorded in the new administrative system was not automatically communicated to DCF staff responsible for collecting overpayments. Although DCF detected in fall 2017 that the information was not automatically being transmitted as anticipated, it did not complete system changes to address this issue nor did it implement alternative procedures due to other priorities.

☑ Recommendation

We recommend the Wisconsin Department of Children and Families take steps to correct the identified system issues or implement alternative procedures to ensure provider overpayments are collected in a timely manner.

Finding 2018-200: Collection of Child Care Provider Overpayments

**Child Care and Development Fund Cluster** (CFDA #93.575, 93.596)

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**Questioned Costs:** Undetermined

**Response from the Wisconsin Department of Children and Families:**
The Department of Children and Families agrees with the recommendation.

Finding 2018-201: Reconciliation of Child Care Payments

**Criteria:**

DCF receives funding from the U.S. Department of Health and Human Services’ CCDF, and uses this funding, in addition to State and other funding, to increase the availability, affordability, and quality of Wisconsin’s child care program services. According to 42 USC 9857 and 9858, DCF may use these funds for child care subsidies; activities that improve the quality, availability, or access of child care.
services; and on other activities the State deems appropriate to promote, educate, and improve child care services. DCF is responsible for the effective management and oversight of the child care program, including the implementation of effective controls, to ensure that payments made under the program are reasonable, necessary, and accurate.

**Condition:**

During FY 2017-18, DCF used a third-party provider to administer an electronic benefits transfer (EBT) system for child care subsidy benefits and certain direct payments to child care providers. The new EBT system was phased in during FY 2016-17 and was processing all payments by April 2017. In processing payments under the child care program, information from DCF’s subsidy determination system is provided to the third-party provider detailing each participant’s monthly child care subsidy amount(s) and the provider(s) that has been selected by the participant. The participant uses the EBT card to pay the provider for child care services. DCF relies on a summary report from the third-party provider to reimburse the third-party provider daily for payments processed through the EBT system. The third-party provider also provides detailed information of payments made to providers, and this information is interfaced to the subsidy determination system used to track participant subsidy information.

Although the third-party provider provides DCF an audit report identifying that it has an effective system of internal controls, the audit report also identifies complementary controls that DCF should implement to ensure the subsidy determination system is operating as intended and information or reports from the system are providing accurate data. To provide this assurance, DCF could reconcile the daily summary report with detailed payment information in the subsidy determination system. However, at the time of our fieldwork in February 2019, DCF had not performed such a reconciliation.

**Questioned Costs:**

None.

**Context:**

We interviewed DCF staff and reviewed supporting documentation of the payment processing procedures for the child care subsidy benefits and other payments processed through the EBT system. We also assessed the current reconciliation activities that DCF has conducted since it began relying on the third-party provider to administer child care benefit payments. We requested information from DCF to compare detailed payment totals for FY 2017-18 from DCF’s system to the amounts paid by DCF to the third-party provider. We were unable to fully reconcile the payments based on the available data. Of approximately $255.6 million in payments DCF made to the third-party provider for benefits administered for the child care program, there was a difference of approximately $45,000 identified with detail from DCF’s subsidy determination system.
**Effect:**
Because DCF did not reconcile the payments made to the third-party provider with the detailed payment information, DCF cannot be assured that all payments were allowable costs of the program.

**Cause:**
DCF has attempted to reconcile the payment totals from the summary report to the detailed payments reported within the subsidy determination system noting that the variances identified are at an acceptable level. However, DCF also acknowledged that further work is needed to fully reconcile third-party provider payments between the daily summary reports and the detailed payment information. DCF continues to work with the third-party provider to develop reports that can be used to fully reconcile daily summary reports and to provide additional assurances that the summary report agrees with the detailed payment information.

**Recommendation**
We recommend the Wisconsin Department of Children and Families take steps to fully reconcile third-party provider payments with the daily summary reports and the detailed payment information in the subsidy determination system.

**Finding 2018-201: Reconciliation of Child Care Payments**

**Child Care and Development Fund Cluster** (CFDA #93.575, 93.596)

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**Questioned Costs:** None

**Response from the Wisconsin Department of Children and Families:**
The Department of Children and Families agrees with the recommendation.

**Finding 2018-202: Monitoring of Child Care Providers**

**Criteria:**
DCF receives funding from the U.S. Department of Health and Human Services’ CCDF, and uses this and other funding to increase the availability, affordability, and quality of Wisconsin’s child care program services. As required by 45 CFR s. 98.41, DCF must verify that child care providers comply with all applicable health and safety requirements. These child care providers include licensed family and group facilities; licensed day camps; and schools that provide child care (child care providers). These requirements address 10 specific areas, and
child care provider employees must be trained in each area. In addition, 45 CFR s. 98.42 requires DCF to monitor child care provider compliance with these health and safety requirements annually.

**Condition:**
Staff in DCF’s Bureau of Early Care Regulation are responsible for completing annual monitoring of each child care provider and performing monitoring visits to ensure compliance with licensing rules. As a part of this annual monitoring, DCF is responsible for ensuring the required health and safety requirements are also being met. DCF has established annual monitoring plans for child care provider facilities that receive child care program payments. DCF uses monitoring checklists that detail the health and safety requirements for different types of child care providers, including family and group facilities. The health and safety requirements include a variety of items that affect the health and safety of the children in care, such as whether the facility has unobstructed exits and whether it provides training to employees on emergency procedures. The number of health and safety requirements vary by provider type. For example, there are 64 requirements for family facilities and 67 requirements for group facilities.

Through our review of the checklists completed by staff during the monitoring visits of 25 child care providers, we found DCF did not monitor for at least one health and safety requirement for 19 of the providers. Insufficient monitoring occurred for 10 providers DCF reviewed in 2017 and 9 providers it reviewed in 2018. The number of requirements that were not monitored varied. For example, of the 8 family facilities reviewed for our audit, DCF monitored all health and safety requirements for 3 facilities, but did not monitor more than 10 of the 64 requirements for 3 other facilities.

**Questioned Costs:**
None.

**Context:**
We interviewed DCF’s staff to gain an understanding of DCF’s process for completing and documenting monitoring visits for child care providers participating in the child care program. We reviewed federal requirements, DCF’s administrative rules, and DCF’s listing of health and safety requirements for each provider type. DCF was responsible for monitoring approximately 3,100 child care providers that received payments from the child care program. We reviewed the monitoring completed for 25 child care providers, including 13 providers DCF monitored during 2017 and 12 providers it monitored during 2018.

**Effect:**
DCF did not annually monitor the health and safety requirements as required. Because DCF did not monitor all health and safety requirements for each child care provider it reviewed, health and safety infractions could have been undetected, which could potentially endanger the children served by the child care providers.
Cause:
The federal government implemented regulations that required annual monitoring of health and safety requirements in November 2016. At that time, DCF’s Bureau of Early Care Regulation updated its monitoring procedures to require an annual review of all health and safety requirements. Prior to this change, DCF required monitoring of health and safety requirements over a two-year period, consistent with how it assesses child care provider compliance with other licensing rules. Although DCF updated its procedures, it did not take additional steps to ensure staff responsible for monitoring child care providers followed the new requirements in monitoring child care provider health and safety requirements.

☑️ Recommendation

We recommend the Wisconsin Department of Children and Families take steps to ensure all applicable health and safety requirements are monitored annually for child care providers.

Finding 2018-202: Monitoring of Child Care Providers

Child Care and Development Fund Cluster (CFDA #93.575, 93.596)

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Questioned Costs: None

Response from the Wisconsin Department of Children and Families: The Department of Children and Families agrees with the recommendation.

Finding 2018-203: Federal Award Monitoring for Child Support Enforcement

Criteria:
DCF receives funding from the U.S. Department of Health and Human Services for the CSE program. DCF uses CSE program funds to enforce support obligations owed by non-custodial parents, locate absent parents, establish paternity, and obtain child and spousal support. The CSE program has no established federal award limit. The federal government reimburses DCF for all applicable program expenditures, up to the federal financial participation (FFP) rate of 66.0 percent, as established by 45 CFR s. 301.1.

DCF is responsible for the oversight of the CSE program. For example, 2 CFR s. 200.328 requires DCF to monitor federal award activities to ensure compliance with applicable requirements, and 2 CFR s. 200.309 requires DCF to
charge only allowable costs incurred during the period of performance of the award.

**Condition:**

Staff within DCF’s Bureau of Finance are responsible for recording and monitoring the activity of federal awards administered by DCF. DCF staff record expenditures for the CSE program in STAR, which includes the State’s accounting system, and perform reviews of financial transactions to ensure DCF complies with state and federal requirements.

During our FY 2017-18 audit, we found that DCF’s internal controls were not sufficient to ensure it identified and corrected errors in recording CSE program expenditures to the appropriate funding source or the federal award in a timely manner. We identified two errors for the CSE program in STAR.

First, in February 2018, DCF staff recorded $3.5 million in program expenditures to an incorrect federal grant award in STAR that resulted in allocating expenditures inappropriately to a prior-year grant award. After we identified this transaction, DCF transferred the expenditures to the correct federal award in February 2019.

Second, in January 2018, DCF staff recorded $218,027 in expenditures in a manner that failed to correctly apply the 66.0 percent FFP rate and resulted in only state funds being used for these costs. After we identified this transaction, DCF corrected the transaction in STAR and requested an additional $143,898 reimbursement from the federal government in February 2019.

**Questioned Costs:**

None.

**Context:**

During FY 2017-18, DCF processed approximately 450 non-payroll transactions for the CSE program in STAR. We selected and reviewed 101 transactions to determine whether DCF used the accounting code that pertained to the time period of the grant award, applied the correct FFP rate, and used the expenditure for an allowable activity. We identified concerns with 2 of the 101 transactions we reviewed.

**Effect:**

DCF errors in recording CSE program expenditures in STAR resulted in instances in which DCF did not request reimbursement from the federal government or identify and correct other errors in a timely manner.

**Cause:**

Although DCF had several processes in place to review the CSE program expenditures recorded in STAR, those processes were not sufficient to identify delays in receiving federal reimbursement and to ensure that all expenditures...
were recorded to the appropriate federal award. DCF staff indicated that, prior to the implementation of STAR, DCF ensured that it applied the correct FFP rate to CSE program expenditures on a semiannual basis. Subsequent to the implementation of STAR, and due to staff turnover, DCF changed its processes and began allocating expenditures manually as they were processed and performing a review of activities after the federal-award period ended. This process may identify errors in amounts DCF has requested for federal reimbursement, such as the $218,027 transaction we identified. However, because these transactions were not identified by DCF within one year, we concluded DCF’s current process does not ensure that errors are detected in a timely manner.

☑️ Recommendation

We recommend the Wisconsin Department of Children and Families improve its internal control of the Child Support Enforcement program, including by establishing a review process to detect instances of noncompliance with federal requirements in a timely manner.

Finding 2018-203: Federal Award Monitoring for Child Support Enforcement

**Child Support Enforcement** (CFDA #93.563)

<table>
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</thead>
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<td>1804WICSES</td>
<td>2018</td>
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</tbody>
</table>

**Questioned Costs:** None

**Response from the Wisconsin Department of Children and Families:**
The Department of Children and Families agrees with the recommendation.
The Wisconsin Department of Health Services (DHS) provides services to clients in communities and institutions, regulates certain care providers, and supervises and consults with local public and volunteer agencies. It administers state and federal programs involving public health, mental health, substance abuse, long-term care, services to people with disabilities, and medical care. In FY 2017-18, DHS administered $6.7 billion in federal financial assistance.

We tested DHS’s internal controls and compliance with grant requirements for three type A programs: Supplemental Nutrition Assistance Program (SNAP) Cluster (CFDA #10.551/10.561), Social Security-Disability Insurance (CFDA #96.001), and Medicaid Cluster (CFDA #93.775/93.777/93.778). We also tested DHS’s internal controls and compliance with grant requirements for Substance Abuse and Mental Health Services Projects of Regional and National Significance (CFDA #93.243), which is a type B program. Our audit findings are the following:

- Computer Data Matches (Finding 2018-300);
- Medical Assistance Program Payments to Terminated Providers (Finding 2018-301);
- Subrecipient Monitoring for the Supplemental Nutrition Assistance Program (Finding 2018-302);
- Medical Assistance Program Payments for Ineligible Services to Inmates (Finding 2018-303);
- Subrecipient Monitoring for the Substance Abuse and Mental Health Services Projects of Regional and National Significance Program (Finding 2018-304); and
- Medical Assistance Program Provider Overpayments (Finding 2018-305).

We also identified concerns with federal cash management processes, specifically the timing of draws of federal funds (Finding 2018-100) performed by DOA that affect grants administered by DHS. This finding is discussed in the DOA chapter, and DOA will be responsible for implementing corrective actions and resolving the finding with the federal government.

In addition, we followed up on DHS’s progress in addressing Findings 2017-300 through 2017-302 of our FY 2016-17 audit (report 18-5) as well as Finding 2015-023 of our FY 2014-15 audit (report 16-5), which were included in the Summary Schedule of Prior Audit Findings in report 18-5. DHS implemented corrective actions to address our concerns related to Finding 2015-023 and to partially address the remaining findings (Findings 2017-300 through 2017-302). It will be important for DHS to continue to work to resolve these findings. The Summary Schedule of Prior Audit Findings on page 97, which is prepared by management, describes the status of each finding as of the end of our audit period, as well as ongoing steps to address findings that were not fully corrected.

**Finding 2018-300: Computer Data Matches**

**Criteria:**

The U.S. Department of Health and Human Services provides funding to DHS for the Medical Assistance (MA) Program. Funding under this program is used to provide financial assistance to states for medical payments on behalf of adults, children, pregnant women, and the aged who meet income and resource requirements, and other categorically eligible groups. Local agency caseworkers perform eligibility determination functions, such as obtaining information from individuals applying for participation in the program and entering the information into the statewide Client Assistance for Reemployment and Economic Support (CARES) computer system, which is used for determining eligibility for various income maintenance programs.

DHS is required under 42 CFR s. 435.948 to verify the reasonableness of wage and other information that is obtained from applicants and that is used in making eligibility determinations. DHS is allowed to determine which information from various computer databases is useful for verifying the reasonableness of the information in CARES. DHS completes data matches with the following:

- information from the U.S. Social Security Administration (SSA), including social security numbers and supplemental security income payments;

- unemployment compensation (UC) information maintained by the Department of Workforce Development’s (DWD) Division of Unemployment Insurance;
- state wage information collected by the Division of Unemployment Insurance in DWD, which is Wisconsin’s state wage information collection agency (SWICA).

As required by 42 CFR s. 435.952, DHS must promptly perform the data matches. Local agency caseworkers then follow up on data match discrepancies to ensure eligibility determinations are based on the most recent and reliable data. DHS policy generally requires that caseworkers resolve 80 percent of all data match discrepancies within 45 days of the data match date and document the actions taken to resolve each discrepancy. If it is determined that benefits were provided to ineligible individuals or excessive benefits were provided to eligible individuals, DHS must take steps to recover the overpayments and return the federal share to the federal government.

**Condition:**

We again determined that caseworkers did not resolve a sufficient percentage of SWICA data match discrepancies within 45 days. Using SWICA data match discrepancy and resolution data provided by DHS, we found that 70.8 percent of data match discrepancies were resolved within 45 days between April 2017 and March 2018, compared to 58.9 percent the prior year. We also observed that 5 of the 25 data match discrepancies we reviewed were not resolved within 45 days, including 3 that ultimately were referred for further investigation. On average, the 5 data match discrepancies we reviewed took 238 days beyond the required 45 days to resolve.

**Questioned Costs:**

Undetermined.

**Context:**

We found DHS completed required data matches with SSA, UC, and SWICA. In total, we reviewed 65 data match discrepancies that occurred between April 2017 and March 2018, including 25 SWICA data match discrepancies. We noted no issues with those involving the SSA and UC data matches. Furthermore, we found that the resolution rate for UC data match discrepancies we reviewed improved compared to the prior year, noting that caseworkers resolved 97.2 percent of the UC discrepancies within 45 days compared to 96.9 percent the prior year.

**Effect:**

Because caseworkers were not consistently following up in a timely manner on the SWICA-identified data match discrepancies, it is unknown whether the most accurate information available was used to make eligibility determinations. It is also possible that some individuals received services for which they were not eligible and for which DHS received federal reimbursement.

**Cause:**

SSA data matches are entirely automated within CARES, and UC data matches include some automation. Because SWICA data matches require manual action from caseworkers, these data matches may require more time to resolve than the SSA and
UC data matches. Despite DHS’s ongoing efforts to make additional system enhancements and provide education for caseworkers, DHS has not met its policy requirements of resolving 80 percent of data match discrepancies within 45 days. Additional improvement is needed to ensure caseworkers resolve and document data match discrepancies in a timely manner.

**Recommendation**

*We again recommend that the Wisconsin Department of Health Services take additional action to ensure caseworkers follow up in a timely manner on data match discrepancies between CARES and other databases and document the resolution.*

**Finding 2018-300: Computer Data Matches**

**Medical Assistance Program** (CFDA #93.778)

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**Questioned Costs:** Undetermined

**Response from the Wisconsin Department of Health Services:** The Department of Health Services agrees with the recommendation.

**Finding 2018-301: Medical Assistance Program Payments to Terminated Providers**

**Criteria:**

The U.S. Department of Health and Human Services provides funding to DHS for the MA Program. Funding under this program is used to assist states in maintaining and expanding health care services to certain categories of low-income persons. Both the State and the federal government provide MA Program funding.

As required by 42 CFR ss. 431.107 and 447.10, DHS is to ensure each provider of medical services that participates in the MA Program and receives payment is licensed in accordance with federal, state, and local laws and regulations. Chapter DHS 105, Wis. Adm. Code, further requires all MA Program providers to be certified in order to provide medical services, and s. DHS 106.06 (4), Wis. Adm. Code, authorizes DHS to suspend or terminate the certification of health care providers under the MA Program. Providers that are suspended or terminated from the MA Program are ineligible to receive MA Program payments, except for medical services provided prior to the date of the suspension or termination, and DHS may recover payments made in error.

**Condition:**

DHS authorizes the MA Program fiscal agent to terminate providers because they are no longer certified; for example, for failure to renew a required license. The fiscal agent enters information on terminated providers into the Medicaid
Management Information System (MMIS), which verifies an MA Program provider’s status when the provider’s claim for payment is processed. The fiscal agent establishes the effective termination date as the date the termination event occurred. However, information on a termination event is rarely available to the fiscal agent prior to the event and, therefore, termination information is typically entered into MMIS subsequent to the date that the provider became ineligible to provide services under the MA Program. Therefore, the fiscal agent may pay claims that were processed between the effective termination date and the date the termination information was entered into MMIS.

During our FY 2017-18 audit, we identified 57 providers that appeared to have received payments for all or a portion of 6,991 MA Program claims that were for services they provided after their effective termination dates. Many of these claims were submitted for payment within a week of the providers’ effective termination dates and, when the claims were processed, MMIS identified the providers as eligible based on the available information in the system. However, because claims were for services provided after their effective termination dates, the providers were ineligible to receive payment.

We reviewed 17 of the 6,991 claims in detail and found claim payments were made for services provided following a termination for 13 of the 17 claims. For example, DHS determined that one provider was no longer licensed on May 31, 2018, yet a $397 claim for services provided on June 14, 2018, was paid on June 15, 2018. The termination information for this provider was entered into MMIS on July 2, 2018. These 13 claims resulted in a total of $5,974 in improper payments, of which $3,511 is estimated to be the federal share. In response to our review, in December 2018 DHS requested that the fiscal agent reprocess these 13 claims and begin to recoup the improper payments.

We found that $5,206 of $5,974 improper payments we identified related to three pharmacy providers. Because pharmacy providers typically submit their MA Program claims as soon as they dispense medications to MA recipients, a delay in recording effective termination dates in MMIS may increase the likelihood of improper payments to this provider type. We found that the three pharmacy providers had received similar payments for an additional 1,274 claims during FY 2017-18 totaling $113,084, of which $66,459 is estimated to be the federal share.

**Questioned Costs:**

We determined that a total of $69,970 in improper MA Program payments was paid with federal funds during FY 2017-18. First, we questioned $3,511 as the federal share for 13 claims that were determined to be ineligible because the date of service for the claims paid was subsequent to the effective termination date established for the provider. In addition, we questioned $66,459 for the remaining 1,274 claims DHS paid during FY 2017-18 for three pharmacy providers because these claims were similar to the claims we reviewed in detail. We also question an undetermined amount for other claims for services provided after the provider’s termination date for which DHS received federal funds.
Context:
As of June 30, 2018, DHS had more than 85,000 eligible providers within the MA Program. During FY 2017-18, the fiscal agent processed over 24.6 million claims in MMIS. To review if payments were made only to eligible providers, we obtained a listing of MA providers that were terminated during FY 2017-18 and the effective termination date for each provider. The fiscal agent terminated 7,551 providers during FY 2017-18. We compared the service dates of FY 2017-18 MA Program claims payments processed for these terminated providers with the providers’ effective termination dates and identified 57 terminated providers that appeared to have received payments for services provided subsequent to their effective termination dates. For 17 of the 57 terminated MA Program providers, we further reviewed one MA Program claim for each provider to determine if DHS received federal reimbursement for claims paid to ineligible providers during FY 2017-18.

Effect:
We identified that DHS paid MA Program claims to providers who were ineligible to receive payments because, prior to the services being provided, providers were determined to be no longer eligible based on applicable laws and requirements. DHS received federal reimbursements for payments made to ineligible providers resulting in an improper payment of federal funds.

Cause:
DHS did not have a process in place during FY 2017-18 to identify MA program claims that may have been paid for services provided after the provider’s effective termination date and before the date when the termination information was recorded in MMIS. Further, DHS did not seek reimbursement from terminated providers for improper payments made to them.

Although the Office of the Inspector General (OIG) at DHS began developing a process in January 2018 to identify potential claims paid to ineligible providers, it had not yet implemented a process to begin recouping payments from these identified claims during the audit period. OIG plans to assess potential improper payments beginning in 2019.

☑️ Recommendation

We recommend the Wisconsin Department of Health Services:

- determine and recoup improper Medical Assistance Program payments it made to 57 ineligible providers for services they provided after their termination dates; and

- implement a timely process to identify and recover payments made to ineligible Medical Assistance Program providers for services they provide after their termination dates.
Finding 2018-301: Medical Assistance Program Payments to Terminated Providers

**Medical Assistance Program** (CFDA #93.778)

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**Questioned Costs:** $69,970

**Response from the Wisconsin Department of Health Services:** The Department of Health Services agrees with the recommendation.

Finding 2018-302: Subrecipient Monitoring for the Supplemental Nutrition Assistance Program

**Criteria:**
DHS receives funding from the U.S. Department of Agriculture for the Supplemental Nutrition Assistance Program (SNAP), also known as FoodShare. DHS awards a portion of the SNAP program funding to 10 multi-county income maintenance consortia, which are made up of county staff, and nine tribes to support administration of the program by DHS.

Federal programs at DHS are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Uniform Guidance includes three requirements related to DHS’s monitoring of subrecipients. First, 2 CFR s. 200.331 (a) (1) requires DHS to communicate certain information to subrecipients at the time of the subaward, including the Federal Award Identification Number, the date of the federal award to DHS, and the total amount of federal funds obligated. Second, 2 CFR s. 200.331 (b) requires DHS to evaluate each subrecipient’s risk of noncompliance for purposes of determining the appropriate nature and level of subrecipient monitoring. Third, 2 CFR s. 200.331 (d) through (f) requires DHS to 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.

**Condition:**
For FY 2017-18, we found that DHS did not comply with two of the three Uniform Guidance requirements for SNAP subrecipients. First, DHS did not communicate all of the required information within contracts or other communications to SNAP subrecipients. For example, we found DHS did not clearly identify the awards as subawards of federal funds, or provide the Federal Award Identification Number, the date the federal government awarded the federal funds to DHS, and the total amount of federal funds obligated, including the current obligation.

Second, DHS did not have a formal process for performing risk assessments of SNAP program subrecipients and lacked sufficient documentation to support that it conducted a risk assessment for each subrecipient during the audit period.
Although DHS performed some subrecipient monitoring activities of SNAP subrecipients, DHS cannot be assured that the monitoring activities it completed were sufficient without first completing a formal risk assessment.

**Questioned Costs:**
None.

**Context:**
DHS annually distributes state and federal funds to 10 multi-county income maintenance consortia, not including Milwaukee County, and to nine tribes statewide, to support SNAP administrative costs. Each SNAP program subrecipient performs a variety of administrative tasks such as program enrollment, caseload management, reporting, fraud control, quality assurance, and benefit card issuance to program participants.

During FY 2017-18, DHS provided $56.1 million in federal funds to fund SNAP subrecipient administrative costs. DHS has an annual contract with each subrecipient. These contracts included a requirement for the subrecipient to provide DHS with audit reports and specific requirements for selected grant programs. We reviewed DHS’s 2018 consortium income maintenance contracts to identify whether DHS included within these contracts information required to be communicated to SNAP subrecipients. We also reviewed whether DHS completed required risk assessments for each SNAP subrecipient during FY 2017-18.

**Effect:**
DHS did not comply with the subrecipient monitoring requirements for SNAP. As a result, SNAP subrecipients did not receive all the required information at the time of the SNAP subaward. Also, because DHS did not evaluate each subrecipient’s risk of noncompliance, it cannot be assured that the nature and level of subrecipient monitoring procedures it completed were sufficient to ensure that the subrecipients used the funds appropriately.

**Cause:**
Although DHS has taken steps in recent years to improve its subrecipient monitoring of the federal programs it administers, such as developing formal policies and procedures for communicating required information within subaward documents and performing risk assessments for subrecipients, implementation of these policies and procedures was not completed during the audit period for SNAP. DHS staff responsible for SNAP did not implement contract templates that would have included information required by Uniform Guidance for its 2018 contracts with SNAP subrecipients, although it intends to do so for the 2019 SNAP subrecipient contracts. DHS staff responsible for SNAP received training on conducting formal risk assessments in spring 2018, yet DHS did not begin completing formal risk assessments of SNAP subrecipients until July 2018.

**Recommendation**
We recommend the Wisconsin Department of Health Services ensure that all award information is communicated to Supplemental Nutrition Assistance Program
Finding 2018-302: Subrecipient Monitoring for the Supplemental Nutrition Assistance Program

State Administrative Matching Grants for the Supplemental Nutrition Assistance Program (CFDA #10.561)

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Response from the Wisconsin Department of Health Services: The Department of Health Services agrees with the recommendation.

Finding 2018-303: Medical Assistance Program Payments for Ineligible Services to Inmates

Criteria:
The U.S. Department of Health and Human Services provides funding to DHS for the MA Program. Funding under this program is used to assist states in maintaining and expanding health care services to certain categories of low-income individuals. Federal and state laws specify the individuals who qualify for MA Program benefits, and 42 CFR s. 435.1009 generally prohibits individuals who are inmates of public institutions from receiving MA Program benefits.

2013 Wisconsin Act 20 authorized the MA Program to extend eligibility for coverage of certain medical services to inmates under the Affordable Care Act provisions for childless adults. DHS implemented these changes in April 2014. The MA Program State Plan identifies the specific requirements for an inmate to be eligible for the MA Program, including that the inmate is housed within a state prison and meets all applicable eligibility criteria. In addition, the State Plan limits coverage of medical services to services received as an inpatient, which is defined as being admitted to a hospital or other qualifying facility for at least 24 hours.

Other medical services provided to an inmate, such as outpatient hospitalizations, are not covered by the MA Program and are paid by the Department of Corrections (DOC).

Condition:
DHS establishes an inmate’s temporary eligibility for the MA Program based on an application from DOC. DOC is responsible for providing DHS with information necessary both to determine whether the inmate meets eligibility requirements and the duration of eligibility based on a qualifying inpatient medical stay. Generally, an inmate’s MA Program eligibility begins on the date the inmate is admitted to a hospital, or other qualifying facility, and ends on the discharge date. Using the
During our FY 2017-18 audit, we identified 70 medical service claims that were paid for inmate medical services that were not eligible under the State Plan. For example, we found that DHS paid 5 claims for outpatient services to inmates and 65 claims for services that were not related to an eligible inpatient stay at a hospital or other qualifying facility. These 70 claims resulted in a total of $15,714 in improper MA Program payments, of which $9,235 is estimated to be the federal share.

**Questioned Costs:**

We determined that a total of $9,235 in improper MA Program payments was paid with federal funds during FY 2017-18. First, we questioned $3,075 as the federal share for five claims that were determined to be ineligible because they were paid for an inmate’s outpatient services. Second, we questioned $6,160 for 65 claims for services provided to inmates that did not occur during an eligible inpatient stay. We also question an undetermined amount for other claims for services provided to inmates that may have been ineligible for the MA Program.

**Context:**

During FY 2017-18, the State’s MA Program fiscal agent processed over 24.6 million claims in the MMIS. To determine if DHS made payments only for eligible services provided to inmates, we reviewed data from DHS on MMIS claims paid on behalf of inmates. During FY 2017-18, DHS paid a total $14.3 million in medical services for 6,585 claims on behalf of 680 inmates. In total, there are approximately 23,700 adult inmates located in state prisons.

We reviewed the claims to determine if there was a qualifying inpatient medical stay for each inmate and the relevant dates each inmate was admitted and discharged. We found that some of the claims were not consistent with the State Plan. We completed a detailed review of 70 of the 6,585 claims in which there did not appear to be a qualifying inpatient medical stay for the inmate.

**Effect:**

We identified that DHS paid MA Program claims for medical services provided to inmates that were ineligible under the State Plan. DHS received federal reimbursements for these ineligible services resulting in an improper payment of federal funds.

**Cause:**

There were several factors that contributed to the improper MA Program payments we identified. First, DHS did not have a sufficient manual or automated process in place during FY 2017-18 to identify and deny inmate claims that were not eligible for payment. Although DHS made changes to the MMIS in 2014 to include inmates as a separate category of eligible participants, the current system configuration cannot identify potentially ineligible claims for the limited medical services permitted to be paid by the MA Program for inmates.
Second, the coordination between DHS and DOC is not sufficient to communicate all information necessary to limit MA Program payments for inmate medical services to those specified in the State Plan. For example, once an inmate is determined to be temporarily eligible for the MA Program, any provider may submit a claim for payment, even if it is not associated with an eligible inpatient medical stay. Although individually small in dollar amount, the number of claims we identified for professional services, or other medical services billed outside of an inpatient stay, indicates that either the duration of the inmate’s eligibility is not being established accurately or there is insufficient review to identify which inmate medical services should be paid by the MA Program.

Finally, DHS does not periodically review inmate claims to ensure the appropriate funding source was used and work with DOC to recover MA Program funds used incorrectly. Although the overall number of inmate claims is small in comparison to the overall number of MA Program payments, the limited medical services eligible for payment under the MA Program State Plan for inmates requires additional monitoring to ensure federal funds are not used for improper payments.

**Recommendation**

We recommend the Wisconsin Department of Health Services:

- work with the U.S. Department of Health and Human Services and the Wisconsin Department of Corrections to determine an appropriate repayment for instances of improper Medical Assistance Program payments made for the 6,585 medical claims paid on behalf of inmates identified during our audit;

- implement a process to identify and deny in a timely manner ineligible inmate claims submitted for Medical Assistance Program payment, such as through improved reporting of inmate information, automated enhancements, or a manual review process; and

- implement improvements in the communication of inmate Medical Assistance Program eligibility and payments with the Wisconsin Department of Corrections.

**Finding 2018-303: Medical Assistance Program Payments for Ineligible Services to Inmates**

**Medical Assistance Program** (CFDA #93.778)

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**Questioned Costs:** $9,235

**Response from the Wisconsin Department of Health Services:** The Department of Health Services agrees with the recommendation.
Finding 2018-304: Subrecipient Monitoring for the Substance Abuse and Mental Health Services Projects of Regional and National Significance Program

Criteria:
DHS receives funding from the U.S. Department of Health and Human Services’ Substance Abuse and Mental Health Services Administration for the Substance Abuse and Mental Health Services Projects of Regional and National Significance (Substance Abuse and Mental Health Services) program. To achieve the objectives of this program, DHS subawards funds to other entities and is considered to be a pass-through entity by the federal government. As a result, DHS is subject to Uniform Guidance.

Uniform Guidance includes three requirements related to DHS’s monitoring of subrecipients. First, 2 CFR s. 200.331 (a) (1) requires DHS to communicate certain information to subrecipients at the time of the subaward, including the Federal Award Identification Number, the date of the federal award to DHS, and the total amount of federal funds obligated. Second, 2 CFR s. 200.331 (b) requires DHS to evaluate each subrecipient’s risk of noncompliance for purposes of determining the appropriate nature and level of subrecipient monitoring. Third, 2 CFR s. 200.331 (d) through (f) requires DHS to monitor the activities of the subrecipient as necessary to ensure the subaward is used for authorized purposes, complies with the terms and conditions of the subaward, and achieves performance goals.

Condition:
During our FY 2017-18 audit, we identified that DHS did not comply with Uniform Guidance requirements for Substance Abuse and Mental Health Services subrecipients. First, for one subrecipient, DHS did not communicate the requirements specified in 2 CFR s. 200.331 (a) (1) nor did DHS obtain an audit report from the subrecipient. Second, DHS did not have a formal process for performing risk assessments of Substance Abuse and Mental Health Services program subrecipients and lacked sufficient documentation to support that it conducted a formal risk assessment for each subrecipient during the audit period. Although DHS performed some subrecipient monitoring activities of Substance Abuse and Mental Health Services program subrecipients, DHS cannot be assured that the monitoring activities it completed were sufficient without first completing a formal risk assessment.

Questioned Costs:
None.

Context:
During FY 2017-18, DHS administered eight different projects using Substance Abuse and Mental Health Services funding and subawarded a total of $6.2 million in federal funds to 28 Substance Abuse and Mental Health Services subrecipients to implement the objectives of the grant program. The subrecipients included other state agencies, counties, and nonprofit organizations. We reviewed DHS’s compliance with Uniform Guidance requirements for 10 of 28 subrecipients during FY 2017-18.

Effect:
DHS did not comply with the subrecipient monitoring requirements for the Substance Abuse and Mental Health Services program. For example, because DHS
did not evaluate each subrecipient’s risk of noncompliance, it cannot be assured that the nature and level of subrecipient monitoring procedures it completed were sufficient to ensure that the subrecipients used the program funds appropriately.

*Cause:*

Although DHS has taken steps in recent years to improve its subrecipient monitoring of the federal programs it administers, such as developing formal policies and procedures for communicating required information within subaward documents and performing risk assessments for subrecipients, implementation of these policies and procedures was not completed during the audit period for the Substance Abuse and Mental Health Services program. DHS staff responsible for the Substance Abuse and Mental Health Services program did not begin receiving training on conducting formal risk assessments until spring 2018, and they did not begin completing risk assessments of Substance Abuse and Mental Health Services subrecipients until June 2018. For one of the subrecipients we reviewed, DHS staff did not use the centrally developed contract, which would have included the information required to be communicated by Uniform Guidance, such as the requirement to submit an audit report.

☑️ **Recommendation**

*We recommend the Wisconsin Department of Health Services ensure that all information is communicated to Substance Abuse and Mental Health Services Projects of Regional and National Significance subrecipients in future contracts and conduct timely formal risk assessments of subrecipients to determine the appropriate monitoring required by Uniform Guidance.*

**Finding 2018-304: Subrecipient Monitoring for the Substance Abuse and Mental Health Services Projects of Regional and National Significance Program**

**Substance Abuse and Mental Health Services Projects of Regional and National Significance (CFDA #93.243)**

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**Questioned Costs:** None
Finding 2018-305: Medical Assistance Program Provider Overpayments

Criteria:
The U.S. Department of Health and Human Services provides funding to DHS for the MA Program. Funding under this program is used to assist states in maintaining and expanding health care services to certain categories of low-income individuals. DHS uses MA Program funding to make payments for services provided to eligible participants. DHS is required by 42 USC s. 1396a (a) (42) (A) to operate a program to audit provider records to ensure that proper payments are made under the MA Program.

42 CFR s. 433.316 requires MA Program overpayments, which are the amounts paid by DHS to a provider that are in excess of the amounts allowable for the services provided, to be refunded to the federal government within one year of discovery of such overpayments. Discovery of an overpayment is defined as the identification by DHS, the federal government, or the provider of the overpayment, and the communication to the provider that the overpayment is subject to recovery. Unless it is the result of fraud, the federal regulations provide that an overpayment is discovered on the date on which DHS first notifies a provider in writing of an overpayment and specifies the amount that is subject to recovery, unless notification already occurred in another manner.

42 USC s. 1396b (d) (2) (C) further requires that when DHS identifies an overpayment has occurred, it is required to recover or attempt to recover that overpayment. However, regardless of whether DHS is successful in recovering an overpayment, the return to the federal government of the federal share is required to be completed within one year of discovery of the overpayment.

Condition:
If DHS identifies an overpayment during an MA Program provider audit, DHS communicates its finding that an overpayment may have been made and the amount of the alleged overpayment in a “preliminary letter” to the MA Program provider. A provider may make payment after receiving this communication, and DHS remits a portion of the recovery to the federal government. Alternatively, if the provider contests the identified overpayment, DHS considers the provider’s additional documentation or circumstances and may issue an additional letter requesting repayment of an amount that takes the provider’s information into consideration. If voluntary repayment is not achieved, DHS sends a Notice of Intent to Recover (NIR) letter. The NIR letter includes information that is required by DHS s. 108.09, Wis. Adm. Code, for DHS to initiate a recovery from an MA Program provider.
In December 2015, several MA Program providers filed a lawsuit against DHS challenging its authority to recover certain MA payments that DHS identified as overpayments. In its September 2016 decision, the circuit court issued an injunction prohibiting DHS from recovering payments for noncompliance with MA Program requirements, other than those set forth in statute. Under the injunction, DHS may not issue an NIR letter or otherwise recover funds from an MA provider except for claims for which DHS is unable to verify from the provider’s records that a service was actually provided or for which an amount claimed was inaccurate or inappropriate for the service that was provided. DHS appealed the circuit court decision.

Upon consultation with its attorney, DHS’s initial interpretation was that the September 2016 injunction only applied to private duty nursing services. Based upon this interpretation, DHS continued to conduct audits, issue NIR letters, and recover identified overpayments as it had previously for all other services. However, in a March 2017 order, the circuit court clarified that the injunction was intended to apply to all services. The circuit court also stated that if DHS did not cease recovery efforts prohibited under the injunction, it would be found in contempt of court. Upon consultation with its attorney, DHS subsequently ceased completing NIR letters for contested provider overpayments it had identified. However, in instances in which the overpayment identified involves fraud or the provider voluntarily makes payment, DHS recovers overpayments and provides the federal government with its share of the recovered amounts.

In other instances, DHS continues to conduct audits of MA Program providers, identify potential overpayments, and communicate to the MA providers the identified overpayments. However, DHS may not issue an NIR letter or begin recovery efforts. As of June 30, 2018, DHS had 544 audits in which it had identified an overpayment but had not issued an NIR letter or otherwise begun seeking recovery of the overpayments. As of February 2019, DHS staff estimated that a total of $12.5 million in overpayments was outstanding from its audits. However, because DHS is no longer issuing NIR letters to begin recovery, it is not providing the federal government with its share of these overpayments in accordance with federal regulations.

**Questioned Costs:**

Undetermined.

**Context:**

As of June 30, 2018, DHS had more than 85,000 eligible providers within the MA Program. During FY 2017-18, the MA Program had federal expenditures of $5.2 billion. We reviewed the process used by DHS to audit MA provider records to ensure that proper payments are made under the MA Program. As part of this review, we obtained a listing of the MA provider audits performed during FY 2017-18 and found that DHS closed 44 audits during FY 2017-18, while 544 audits were outstanding as of June 30, 2018. In comparison, DHS completed 741 audits during FY 2016-17.
Effect:
DHS did not comply with federal regulations to return to the federal government in a timely manner the federal government’s share of the overpayments it identified from MA Program providers.

Cause:
DHS has interpreted federal regulations to mean that the one-year time period during which it must return to the federal government its share of overpayments begins when DHS issues an NIR letter. However, given the delays in recovery efforts resulting from the lawsuit and court injunction, DHS has not considered whether the issuance of preliminary letters may constitute an action that begins the time period for returning overpayments to the federal government. Although the overpayments communicated in DHS’s preliminary letters are characterized to the provider as amounts that may be recovered, this does not necessarily preclude them from being considered as discovery of an overpayment under the provisions in 42 CFR s. 433.316 (c) (1).

Further, federal regulations do not explicitly indicate that DHS must be able to recover the overpayment, such as through the issuance of an NIR letter, for the federal government’s share of the overpayment to be returned within one year. The federal regulations allow a one-year time period for returning the federal share of identified overpayments, in part, for DHS to make attempts to settle the overpayment amount and collect the amounts.

Although the federal regulations do not address the situation in which a state cannot attempt to recover payments as is the current circumstance for DHS, the injunction also does not exempt DHS from otherwise complying with federal regulations. Because the information DHS communicates to providers in preliminary letters includes an overpayment amount, DHS should consider this action to be the beginning of the period in which DHS has one year to return to the federal government its share of the overpayment amount.

☑ Recommendation

We recommend the Wisconsin Department of Health Services comply with the federal regulations and return to the federal government its share of Medical Assistance Program provider overpayment amounts it has identified and communicated to providers.

Finding 2018-305: Medical Assistance Program Provider Overpayments

**Medical Assistance Program** (CFDA #93.778)

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**Questioned Costs:** Undetermined Amount
Response from the Wisconsin Department of Health Services: The Department of Health Services disagrees with the recommendation.

(See corrective action plan on page 234.)
The Wisconsin Department of Public Instruction (DPI) provides guidance and technical assistance to support public elementary and secondary education in Wisconsin. It also provides assistance for the development and improvement of public and school libraries. In FY 2017-18, DPI administered $828.8 million in federal financial assistance.

We tested DPI’s internal controls and compliance with grant requirements for three type A programs: Title I Grants to Local Educational Agencies (CFDA #84.010), Special Education Cluster (CFDA #84.027/84.173), and Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants) (CFDA #84.367). We also tested internal controls and compliance with grant requirements for Twenty-First Century Community Learning Centers (CFDA #84.287) and Substance Abuse and Mental Health Services Projects of Regional and National Significance (Substance Abuse and Mental Health Services) (CFDA #93.243), which are type B programs. We identified concerns with subrecipient monitoring for the Substance Abuse and Mental Health Services program (Finding 2018-400).

We also identified concerns with federal cash management processes, specifically the timing of draws of federal funds (Finding 2018-100 and Finding 2018-101), performed by the Wisconsin Department of Administration (DOA) that affects grants administered by DPI. This finding is discussed in the DOA chapter, and DOA will be responsible for implementing corrective actions and resolving the finding with the federal government.
Finding 2018-400: Subrecipient Monitoring for the Substance Abuse and Mental Health Services Projects of Regional and National Significance Program

Criteria:

DPI receives funding from the U.S. Department of Health and Human Services’ Substance Abuse and Mental Health Services Administration for the Substance Abuse and Mental Health Services program. To achieve the objectives of this program, DPI subawards funds to school districts and is considered to be a pass-through entity by the federal government. As a result, DPI is subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance).

Uniform Guidance states in 2 CFR s. 200.330 that a pass-through entity must make case-by-case determinations about whether each agreement it makes for the disbursement of federal program funds casts the party receiving the funds in the role of a subrecipient or a contractor. It provides a definition for subrecipient and contractor and further states that, in making such a determination, the substance of the relationship is more important than the form of the agreement.

In addition, Uniform Guidance specifies in 2 CFR s. 200.331 other requirements related to subrecipients for pass-through entities. First, 2 CFR s. 200.331 (a) (1) requires DPI to communicate certain information to subrecipients at the time of the subaward, including the Federal Award Identification Number, the date of the federal award to DPI, and the total amount of federal funds obligated. Second, 2 CFR s. 200.331 (b) requires DPI to evaluate each subrecipient’s risk of noncompliance for purposes of determining the appropriate nature and level of subrecipient monitoring. Third, 2 CFR s. 200.331 (d) through (f) requires DPI to 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.

Condition:

We found DPI did not conduct an assessment to determine whether the three school districts funded by the Substance Abuse and Mental Health Services program should be classified as contractors or subrecipients using the definitions established under 2 CFR s. 200.330 of Uniform Guidance.

In addition, DPI did not comply with two of the three requirements for pass-through entities as specified in 2 CFR s. 200.331 of Uniform Guidance. First, DPI did not communicate all of the required information within contracts or other communications to the school districts for which it subawarded Substance Abuse and Mental Health Services program funding. For example, we found that within DPI’s contracts with the school districts, DPI did not identify the awards as subawards of federal funds from DPI nor did it provide the Federal Award Identification Number, the date the federal government awarded the federal funds...
Second, DPI did not have a formal process for performing risk assessments of the program subrecipients to determine the level of monitoring needed for each subrecipient. Although DPI staff responsible for the Substance Abuse and Mental Health Services program performed subrecipient monitoring through monthly meetings with all subrecipients and conducted periodic site visits, the sufficiency of this level of monitoring cannot be determined by DPI without performing the required risk assessments. Further, although DPI centrally obtains annual audit reports for all Wisconsin school districts and conducts risk assessments based on these audit reports, the DPI staff responsible for the program were not aware that the annual audit reports or the risk assessments should have been used to determine the level of monitoring needed for the program.

**Questioned Costs:**

None.

**Context:**

During FY 2017-18, DPI provided a total of $1.9 million to three school districts under The Wisconsin AWARE Project, which is one of two DPI projects that received federal funding through the Substance Abuse and Mental Health Services program. Although DPI also received funding and contracted with three school districts for a second project, The Wisconsin Safe Schools/Healthy Students Program, specific requirements of the awarding federal agency precluded these school districts from being considered subrecipients for this project.

**Effect:**

DPI did not comply with Uniform Guidance requirements for a pass-through entity for the Substance Abuse and Mental Health Services program. Because DPI staff did not identify the school districts as subrecipients, the subrecipients did not receive all the required information at the time of the subaward. Because DPI did not evaluate each subrecipient’s risk of noncompliance, it cannot be assured that the nature and level of subrecipient monitoring procedures it completed were sufficient to ensure that the subrecipients used the funds appropriately.

**Cause:**

DPI received a previous Substance Abuse and Mental Health Services grant award for a previous project in which subawarding of funds was not permitted. Therefore, DPI was not required to complete an assessment to determine if the school districts receiving federal funding for that project should have been considered subrecipients. DPI received an award from the same program for a subsequent project, AWARE, but the AWARE award documentation did not include the subawarding restriction. DPI did not ascertain that the federal awarding agency’s standard terms and conditions required DPI to administer AWARE under 2 CFR s. 200.330 of Uniform Guidance. Because DPI did not
consider the school districts to be subrecipients, it did not consider additional requirements of 2 CFR s. 200.331 of Uniform Guidance for the Substance Abuse and Mental Health Services program when administering AWARE.

☑️ Recommendation

We recommend the Wisconsin Department of Public Instruction complete the required assessment under Uniform Guidance for each Substance Abuse and Mental Health Services Projects of Regional and National Significance grant award in which it serves as a pass-through entity of federal funds. If the assessment identifies that those entities receiving federal funds should be considered subrecipients, it should comply with all of the requirements specified within Uniform Guidance for subrecipients.

Finding 2018-400: Subrecipient Monitoring for the Substance Abuse and Mental Health Services Projects of Regional and National Significance Program

Substance Abuse and Mental Health Services Projects of Regional and National Significance (CFDA #93.243)

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Questioned Costs: None

Response from the Wisconsin Department of Public Instruction: The Department of Public Instruction agrees with the recommendation.
The University of Wisconsin (UW) System provides postsecondary academic education for approximately 175,000 students. The System includes 13 four-year universities, 13 two-year branch campuses associated with a university, and UW System Administration. Each of the 13 universities awards bachelor’s and master’s degrees, and several also confer doctoral degrees. The 13 two-year branch campuses offer general education associate degrees and course credits that transfer to other degree-granting universities. UW System Administration consists of the UW System President’s staff who assist the Board of Regents in establishing and monitoring systemwide policies, financial planning for the system, and maintaining fiscal control.

Prior to July 1, 2018, the System also included UW Colleges, which were UW System’s two-year colleges, and UW Extension, which provided continuing education courses in classrooms and via distance education, as well as public service programs to Wisconsin residents. Effective July 1, 2018, the 13 colleges that were previously part of UW Colleges became two-year branch campuses that were merged with certain four-year universities. Similarly, UW-Extension merged certain divisions with UW-Madison and the others with UW System Administration effective July 1, 2018. The restructuring will be phased in during a two-year period.

In FY 2017-18, UW System administered $1.7 billion in federal financial assistance, including $585.1 million disbursed under the Research and Development Cluster and $1.0 billion administered under the Student Financial Assistance Cluster. We tested UW System’s internal controls and compliance with grant requirements for the Student Financial Assistance Cluster, which is a type A program. We also tested internal controls and compliance with grant requirements for Substance Abuse and Mental Health Services Projects of Regional and National Significance (CFDA #93.243), which is a type B program. We identified continuing concerns related...
to information technology controls related to the Student Financial Assistance Cluster (Finding 2018-700).

In addition, we followed up on the progress of UW institutions in addressing Findings 2016-006 through 2016-009 of our FY 2015-16 single audit (report 17-5), which were included in the Summary Schedule of Prior Audit Findings in report 18-5. UW institutions implemented corrective actions to address Findings 2016-006, 2016-007, and 2016-009, and to partially address Finding 2016-008. We also followed up on UW System Administration’s progress in addressing Finding 2017-003 of our FY 2016-17 single audit report (report 18-5), which was included in the Summary Schedule of Prior Audit Findings in report 18-5. UW System Administration continued to implement corrective actions to partially address Finding 2017-003. It will be important for UW institutions and UW System Administration to continue to work to resolve these findings. The Summary Schedule of Prior Audit Findings on page 97, which is prepared by management, describes the status of these findings as of the end of our audit period as well as ongoing steps to address the findings that were not fully corrected.

We also included the Wisconsin Humanities Council in our FY 2017-18 audit of UW System and audited the Promotion of the Humanities—Federal/State Partnership (CFDA #45.129) grant. The Wisconsin Humanities Council is a nonprofit organization associated with UW System through its relationship with UW-Extension, which is responsible for the fiscal and personnel administration of the Humanities Council. We tested internal controls and compliance with grant requirements for the Promotion of the Humanities—Federal/State Partnership grant. Our audit of this program found no issues that required reporting.

**Finding 2018-700: Information Technology Controls at the University of Wisconsin System**

*Criteria:*

UW institutions operate in a highly computerized environment and are responsible for maintaining confidential and sensitive information, such as student data. UW System Administration maintains the Shared Financial System (SFS), which is UW System’s accounting system, and the Human Resource System (HRS), which is UW System’s payroll and personnel system. These systems are used by all UW institutions. In addition, each institution maintains its own student information system to administer federal student financial assistance programs under the Student Financial Assistance Cluster, as well as other computer applications. To provide proper internal control, information technology (IT) security policies and procedures are necessary to ensure software and data stored and processed by the institutions are protected from accidental or intentional misuse or destruction. In addition, IT controls should be established to prevent inappropriate or inadvertent access to systems and data.

In developing systemwide IT security policies and procedures, UW System Administration consulted policies and procedures from UW institutions and other
educational institutions, as well as using the National Institute of Standards and Technology (NIST) *Special Publication 800-63* and *Special Publication 800-171*. NIST publications include standards that provide a framework for establishing a well-controlled IT environment and are most effective when implemented for all critical IT areas. The UW Information Assurance Council, which is made up of IT, legal, and audit staff representing different institutions, including UW System Administration, was established to identify and analyze risks related to IT security, develop policies to address these risks, and review the performance of the UW System IT security program. Chancellors and chief information officers at each institution are responsible for ensuring compliance with the policies.

**Condition:**

We reported weaknesses in UW System’s IT security policies, procedures, and controls during our audits for FY 2014-15 (Finding 2015-030), FY 2015-16 (Finding 2016-012), and FY 2016-17 (Finding 2017-003). We made recommendations for UW System Administration to develop systemwide IT security policies and procedures, assist UW institutions in implementing timely corrective actions related to our institution-specific concerns, and develop procedures for assessing the level of protection provided for UW systems and data.

In response to our prior-year recommendations, in December 2015 the UW System Board of Regents approved a high-level policy on information security that required UW System to develop and maintain a comprehensive IT security program. Further, five systemwide IT policies were established in September 2016 through the UW Information Assurance Council. These policies covered the following areas: authentication, data classification, security awareness, incident response, and acceptable use. In March 2018, UW System hired an associate vice president for information security who is responsible for leading the development and implementation of the UW System Information Security Program.

The Information Security Program document was published in April 2018 and provides a structure for developing and maintaining systemwide security policies and standards. The document includes nine proposed security policies and twelve proposed security standards in areas such as asset management, IT disaster recovery, secure software development, and security monitoring. The proposed policies and standards have been prioritized in a two-year work plan. However, as of June 30, 2018, UW System Administration did not make significant progress in the development of IT policies and procedures to cover critical areas under the NIST framework and meet the requirements of the Board of Regents policy to develop a comprehensive IT security program.

As part of our FY 2017-18 audit of the Student Financial Assistance Cluster, we reviewed policies and procedures at all of the UW System institutions for access controls and program change management related to student information systems. Our review found that some institutions did not have policies and procedures in place. Additionally, we found that some of the policies and procedures in place were not adequate or complete.
We also followed up on institution-specific recommendations from prior years and found institutions were working to address the concerns we noted in our prior audits in several areas. For example, institutions were implementing password controls in an effort to comply with UW System Administration policies and procedures and improving database controls.

**Questioned Costs:**
None.

**Context:**
We reviewed UW System’s Information Security Program document, including the timeline for implementation, and interviewed the Associate Vice President for Information Security for UW System Administration. We also reviewed access and program change management policies and procedures for the student information systems that are used to administer federal student financial aid programs under the Student Financial Assistance Cluster at all UW System institutions. We did not audit all IT security policies and procedures at all UW institutions or the IT controls over all computer applications used by the institutions. However, we believe a potential exists for similar weaknesses in those applications that we did not review.

**Effect:**
Although it can be difficult to determine how IT concerns such as those we identified affect material federal compliance areas, ineffective general IT controls in areas such as these may permit controls over individual systems to operate improperly and may allow noncompliance to occur and not be detected.

Weaknesses in IT security policies, procedures, and controls increase the risk that unauthorized or erroneous transactions could be processed or changes could be made to accounting, payroll, and student data. In addition, failure to provide an appropriate level of protection for UW systems and data increases the risk that personally identifiable information could be accidentally or maliciously exposed. Finally, ineffective or inconsistent general IT controls may lead to increased risks of cyberattacks and loss of data or intellectual property, which could lead to a significant financial loss.

**Cause:**
The Associate Vice President for Information Security was not hired until March 2018, and the Information Security Program document was not published until April 2018. According to UW System Administration, the implementation of the Information Security Program is expected to take at least two years.

IT staff at each UW institution are responsible for ensuring IT security policies, procedures, and controls are properly developed and maintained. Those institutions that have smaller IT staff may find challenges in meeting these responsibilities, maintaining proper separation of duties, and monitoring sufficiently all security policies and procedures. In addition, with changing
technologies, monitoring and assessment of current processes are necessary to evaluate changing data security risks.

**Recommendation**

*We recommend University of Wisconsin System Administration:*

- continue development and maintenance of a comprehensive IT security program, including developing systemwide IT security policies and procedures across the remaining critical IT areas, as recommended by National Institute of Standards and Technology publications;

- provide guidance and training to individual institutions regarding IT security policies and procedures, as needed; and

- complete development of and implement procedures for assessing the level of protection provided for UW systems and data.

**Finding 2018-700: Information Technology Controls at the University of Wisconsin System**

**Student Financial Assistance Cluster**

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**Questioned Costs:** None

*Response from University of Wisconsin System:* UW System Administration agrees with the recommendations.
The Wisconsin Technical College System (WTCS) creates policy and provides direction for the 16 technical college districts in the State of Wisconsin; administers state and federal aids; coordinates vocational and technical programs with other state agencies; and coordinates adult education and family literacy services with technical college districts and community-based organizations. In FY 2017-18, WTCS administered $27.7 million in federal financial assistance.

We tested WTCS’s internal controls and compliance with grant requirements for the Career and Technical Education—Basic Grants to States (CFDA #84.048) program, which is a type B grant. We identified concerns with subrecipient monitoring (Finding 2018-900).

We also identified concerns with federal cash management processes, specifically the timing of draws of federal funds (Finding 2018-100), performed by the Wisconsin Department of Administration (DOA) that affect grants administered by WTCS. This finding is discussed in the DOA chapter, and DOA will be responsible for implementing corrective actions and resolving the finding with the federal government.

Finding 2018-900: Monitoring of Subrecipients—Career and Technical Education—Basic Grants to States

Criteria:
WTCS receives federal funding from the Department of Education under the Career and Technical Education—Basic Grants to States program to more fully develop the academic, career, and technical skills of secondary students and
postsecondary students who elect to enroll in career and technical education programs.

During FY 2017-18, the Career and Technical Education—Basic Grants to States program was subject to Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Uniform Guidance includes three requirements related to monitoring of subrecipients by WTCS. First, 2 CFR s. 200.331 (a) (1) requires WTCS to communicate certain award information to subrecipients at the time of the subaward. Second, 2 CFR s. 200.331 (b) requires WTCS to evaluate each subrecipient’s risk of noncompliance for purposes of determining the appropriate nature and level of subrecipient monitoring. Third, 2 CFR s. 200.331 (d) through (f) requires WTCS to monitor the activities of the subrecipient as necessary to ensure that the subrecipient uses the subaward for authorized purposes, complies with the terms and conditions of the subaward, and achieves performance goals.

One way in which WTCS monitors subrecipients is through review of the Triannual Evaluation and Monitoring reports (triannual reports) that are prepared by the subrecipients and filed with WTCS three times per year. The reports are assigned to an education director at WTCS who is responsible for reviewing the reports, signing off on the reports to indicate a review was performed, and providing feedback to the subrecipients on any areas of concern. In addition, effective for reports submitted after November 15, 2017, the grants coordinator compiles any comments from the review of the reports in summary feedback lists and provides the lists to the subrecipients.

**Condition:**

We reviewed the award documentation for 4 of the 19 subrecipients provided funding in FY 2017-18. Although most of the required award information was communicated to subrecipients at the time of the subaward, our review identified that subrecipients were not provided the Federal Award Identification Number and the date of the federal award to the State.

We also identified that WTCS does not have a formal risk-assessment process in place to evaluate each subrecipient’s risk of noncompliance with federal requirements. A formal risk assessment is necessary to determine the appropriate nature and level of subrecipient monitoring.

We reviewed 23 of the triannual reports filed during FY 2017-18, and we found that 7 of the 23 reports did not indicate a review of the report had been performed. In addition, another 6 reports were not signed, although comments were noted on each report to indicate that some type of review had been performed and were included on the summary feedback list and provided to the subrecipient.

**Questioned Costs:**

None.
Context:
During FY 2017-18, WTCS expended $20.1 million under the Career and Technical Education—Basic Grants to States program. WTCS subgranted funding to the following subrecipients:

- 16 technical college districts and 2 community-based organizations for programs for postsecondary students;
- the Department of Corrections (DOC) for programs for incarcerated students; and
- the Department of Public Instruction (DPI) for programs for secondary school students.

During FY 2017-18, WTCS disbursed a total of $9.3 million to the technical college districts, community-based organizations, and DOC. WTCS is responsible for performing subrecipient monitoring procedures for the recipients of these funds. In addition, WTCS disbursed $8.8 million to DPI, which further subgranted $7.6 million of the funds to local school districts. DPI is responsible for the subrecipient monitoring procedures related to the secondary school districts.

We reviewed the award letters and grant guidance provided to subrecipients to identify whether the required award information had been reported to subrecipients. We also reviewed monitoring activities performed by WTCS for the Career and Technical Education—Basic Grants to States program during FY 2017-18, including gaining an understanding of the process WTCS used for reviewing subrecipient single audit reports, its procedures for monitoring subrecipients through the review of the triannual reports, and its more informal ongoing discussions with its subrecipients. There were a total of 233 triannual reports filed with WTCS during FY 2017-18.

Effect:
WTCS did not comply with all of the subrecipient monitoring compliance requirements for the Career and Technical Education—Basic Grants to States program. Therefore, there is a higher risk that WTCS, as well as the subrecipients, are not in compliance with all federal requirements.

Cause:
The award information was not communicated to subrecipients because WTCS did not believe it was relevant to the subrecipients, and WTCS provided award identifiers and dates that it thought would be more important to the subrecipients than those required by Uniform Guidance.

WTCS did not develop a formal risk-assessment process for its subrecipients or written procedures for the review of triannual reports. WTCS staff indicated that because there were few subrecipients and each is known to them, WTCS performs the same types of monitoring for all subrecipients. Further, WTCS staff indicated...
that if concerns were noted with a subrecipient, they would increase monitoring of that subrecipient through means such as site visits and increased communications with the subrecipient.

However, a formal risk-assessment process could allow WTCS to learn about issues such as key changes in subrecipient staffing or implementation of new systems for a subrecipient, which would increase the risk of noncompliance and, therefore, would require a higher level of monitoring.

**Recommendation**

We recommend the Wisconsin Technical College System implement policies and procedures and maintain documentation to ensure compliance with the Uniform Guidance subrecipient monitoring requirements, including:

- communicating all required award information to subrecipients at the time of the award;

- implementing and documenting a formal risk-assessment process to determine the level of monitoring required for each subrecipient; and

- maintaining documentation of subrecipient monitoring, including documentation that a consistent review of triannual reports was performed.

**Finding 2018-900: Monitoring of Subrecipients—Career and Technical Education—Basic Grants to States**

*Career and Technical Education—Basic Grants to States* (CFDA #84.048)

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<td>7/1/2017–9/30/2018</td>
</tr>
</tbody>
</table>

**Questioned Costs:** None

**Response from the Wisconsin Technical College System:** The Wisconsin Technical College System agrees with the recommendation.
Other Agencies

In addition to the departments of Administration, Children and Families, Health Services, Public Instruction, the University of Wisconsin System, and the Wisconsin Technical College System, we also audited federal programs or followed up on the status of prior audit findings at three other state agencies. The following is a summary of the work we performed at the departments of Natural Resources, Transportation, and Workforce Development.

Department of Natural Resources

The Wisconsin Department of Natural Resources (DNR) administers programs related to protecting and enhancing Wisconsin’s natural resources, including its air, land, water, forests, wildlife, fish, and plants. In FY 2017-18, DNR administered $134.6 million in federal financial assistance.

We tested DNR’s internal controls and compliance with grant requirements for Capitalization Grants for Clean Water State Revolving Funds (CFDA #66.458), which is a type A grant. We also tested internal controls and compliance with grant requirements for Capitalization Grants for Drinking Water State Revolving Funds (CFDA #66.468), which is a type B program. Our audit of these programs identified no issues that required reporting.

Department of Transportation

The Wisconsin Department of Transportation (DOT) administers both state and federal transportation programs, including those affecting highways, bridges,
airports, harbors, and railroads. In FY 2017-18, DOT administered $863.8 million in federal financial assistance.

For our FY 2017-18 audit, no grants administered by DOT were selected for audit based on risk factors established by Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). However, we followed up on DOT’s progress in addressing Findings 2017-500 through 2017-502 of the FY 2016-17 audit (report 18-5), which were included in the Summary Schedule of Prior Audit Findings in report 18-5. DOT implemented corrective actions to address our concerns related to Finding 2017-502. In addition, DOT took corrective actions to partially address the remaining findings (Findings 2017-500 and 2017-501). It will be important for DOT to continue to work to resolve these findings. The Summary Schedule of Prior Audit Findings on page 97, which is prepared by management, describes the status of each finding as of the end of our audit period, as well as ongoing steps to address findings that were not fully corrected.

**Department of Workforce Development**

The Department of Workforce Development (DWD) administers programs for unemployment insurance, workers’ compensation, equal rights in employment and housing, apprenticeship job training, employment services and training, vocational rehabilitation, and other related programs. Excluding unemployment insurance benefits, federal grants funded $210.8 million of DWD’s FY 2017-18 expenditures. In addition, the Wisconsin Unemployment Reserve Fund paid $407.4 million in regular unemployment insurance benefits and $0.7 million in federally funded benefits.

We tested DWD’s internal controls and compliance with grant requirements for Unemployment Insurance (CFDA #17.225), which is a type A grant. Our audit of this program identified no issues that required reporting.
Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) requires the auditor to prepare a schedule of findings and questioned costs that includes the following three sections:

1) a summary of the auditor’s results;

2) findings relating to the financial statements, which are required to be reported in accordance with Government Auditing Standards; and

3) findings and questioned costs for federal awards.

Section I

Summary of Auditor’s Results

As required by Uniform Guidance, the Wisconsin Legislative Audit Bureau is providing the following summary information related to the State of Wisconsin’s single audit for FY 2017-18:

Financial Statements

Type of auditor’s report issued: Unmodified

Internal control over financial reporting:
- Material weaknesses identified? Yes
- Significant deficiencies identified? Yes
- Noncompliance material to financial statements noted? No
Federal Awards

Internal control over major programs:
   Material weaknesses identified?  Yes
   Significant deficiencies identified?  Yes

   Type of auditor’s report issued on compliance for major programs:
       Unmodified for all major federal programs except for Twenty-First Century Community Learning Centers (CFDA #84.287) and Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants) (CFDA #84.367), which were qualified.

Any audit findings disclosed that are required to be reported in accordance with s. 200.515 (a) of Uniform Guidance?  Yes

Dollar threshold used to distinguish between type A and type B programs:  $30,000,000

Auditee qualified as a low-risk auditee?  No

The following were major federal programs, determined in accordance with s. 200.518 (b) of Uniform Guidance:

<table>
<thead>
<tr>
<th>Applicable CFDA Number</th>
<th>Major Federal Program</th>
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<tr>
<td>10.551/10.561</td>
<td>Supplemental Nutrition Assistance Program (SNAP) Cluster</td>
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<tr>
<td>17.225</td>
<td>Unemployment Insurance</td>
</tr>
<tr>
<td>66.458</td>
<td>Clean Water State Revolving Fund Cluster</td>
</tr>
<tr>
<td>66.468</td>
<td>Drinking Water State Revolving Fund Cluster</td>
</tr>
<tr>
<td>84.010</td>
<td>Title I Grants to Local Educational Agencies</td>
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<tr>
<td>84.027/84.173</td>
<td>Special Education Cluster</td>
</tr>
<tr>
<td>84.048</td>
<td>Career and Technical Education—Basic Grants to States</td>
</tr>
<tr>
<td>84.287</td>
<td>Twenty-First Century Community Learning Centers</td>
</tr>
<tr>
<td>84.367</td>
<td>Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants)</td>
</tr>
<tr>
<td>93.243</td>
<td>Substance Abuse and Mental Health Services Projects of Regional and National Significance</td>
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<tr>
<td>93.558</td>
<td>Temporary Assistance for Needy Families (TANF) Cluster</td>
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<tr>
<td>93.563</td>
<td>Child Support Enforcement</td>
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<tr>
<td>93.575/93.596</td>
<td>Child Care and Development Fund (CCDF) Cluster</td>
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<tr>
<td>93.775/93.777/93.778</td>
<td>Medicaid Cluster</td>
</tr>
<tr>
<td>96.001</td>
<td>Disability Insurance/SSI Cluster</td>
</tr>
<tr>
<td>Various</td>
<td>Student Financial Assistance Cluster</td>
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Section II

Financial Statement Findings

This schedule includes two deficiencies in internal control over financial reporting that, when combined, we consider to be a material weakness in internal control over financial reporting, and eight deficiencies that we consider to be significant deficiencies related to internal control over financial reporting. These deficiencies in internal control over financial reporting are required to be reported by auditing standards generally accepted in the United States of America and Government Auditing Standards. Findings 2017-001, 2017-002, 2017-006, and 2017-009 from the prior year (report 18-5) were no longer reportable. Repeat findings from report 18-5 are indicated with an asterisk (*). We did not follow up on the status of Finding 2017-003, as another external auditor completed the audit of the University of Wisconsin (UW) System’s financial statements for FY 2017-18. Because this finding also affects federal grant administration, we followed up on the status of this finding as part of our FY 2017-18 single audit work at UW System, and report a significant deficiency in internal control related to the Student Financial Assistance Cluster (Finding-2018-700).

Finding 2018-001: Financial Reporting at the Department of Health Services

Criteria:
The Department of Health Services (DHS) is responsible for ensuring the information that it submits for inclusion in the State’s basic financial statements is fairly presented and that misstatements are prevented, or detected and corrected in a timely manner.

Condition:
DHS staff improperly set up the Children’s Health Insurance Program (CHIP) grant in STAR, the State’s enterprise resource planning system, which includes the accounting, payroll, and purchasing systems for the State. This error resulted in several issues. CHIP expenditure transactions in STAR did not generate the anticipated federal reimbursement draws, which resulted in $182.4 million, or 75.3 percent, of CHIP expenditures for FY 2017-18 failing to be reimbursed in a timely manner. In addition, DHS staff anticipated that a $93.0 million transaction entered into STAR would automatically begin the federal reimbursement process for CHIP. Instead the entry resulted in the recording of negative CHIP revenue in STAR.

DHS made corrections in STAR to address these issues, which DHS discovered when it completed its year-end review in August 2018. Because the corrections were made in STAR in FY 2018-19, they were attributed to that year rather than to FY 2017-18. After we brought this error to DHS’s attention, it subsequently made an adjustment to the information submitted for the State’s basic financial statements.

Questioned Costs:
None.
Context:
DHS administers several federal programs including CHIP, which are accounted for in the State’s General Fund. DHS is responsible for ensuring that the information it records within STAR and subsequent adjustments it identifies are needed, accurate, and complete. The information reflects the financial activity of all programs DHS administers, which is presented in the State’s basic financial statements.

Effect:
Because CHIP corrections in STAR were not attributed to the correct fiscal year and DHS did not reflect them in their original submission for the State’s basic financial statements, the Intergovernmental Revenue account was understated by $275.4 million on the Statement of Revenues, Expenditures, and Changes in Fund Balance. In addition, the Due from Other Governments account and Fund Balance were both understated by $275.4 million on the Balance Sheet.

Cause:
Those DHS staff who were aware of the CHIP corrections in STAR did not communicate them to the DHS staff who were responsible for preparing financial reporting information. If these staff would have been informed of these corrections, they may have adjusted the information that was submitted for the State’s basic financial statements.

Further, because the error in the setup of the CHIP grant in STAR was not a typical error, DHS’s current process to prepare financial information does not consider whether revenues recorded in the subsequent fiscal year should be recognized in the current fiscal year for purposes of financial reporting.

☑️ Recommendation

We recommend the Wisconsin Department of Health Services ensure that staff responsible for preparing financial information for the State’s basic financial statements are made aware of corrections that are made during the year-end review and change its financial reporting process to include an assessment of whether entries recorded in the subsequent fiscal year should instead be recognized in the current fiscal year.

Response from the Wisconsin Department of Health Services: The Department of Health Services agrees with the audit finding and recommendation.


Criteria:
The Injured Patients and Families Compensation Fund (IPFCF), which is administered by the Office of the Commissioner of Insurance, insures participating physicians and other health care providers in Wisconsin against medical malpractice claims that exceed the primary insurance thresholds established by
statutes. IPFCF is a proprietary fund, and IPFCF staff are responsible for preparing and submitting financial statements and required supplementary information to the Department of Administration (DOA) State Controller’s Office (SCO) for inclusion in the State’s basic financial statements. IPFCF is responsible for maintaining effective internal controls to ensure the financial information submitted to SCO is fairly presented and that misstatements are prevented, or detected and corrected in a timely manner.

**Condition:**
IPFCF’s process for preparing and reviewing financial information was not sufficient to prevent, or detect and correct in a timely manner, certain substantive misstatements.

**Questioned Costs:**
None.

**Context:**
We reviewed the FY 2017-18 financial statements and required supplementary information submitted to SCO for inclusion in the State’s basic financial statements, discussed the process used in compiling the information with IPFCF staff, and examined supporting documentation.

**Effect:**
Through our review, we identified the following misstatements:

- Current Investments was understated and Noncurrent Investments was overstated by $16.9 million on the Statement of Net Position.
- Net Change in Unrealized Gains and Losses on the Statement of Cash Flows was overstated by $9.7 million.
- Total liability for future benefit and loss liabilities was understated by $9.4 million in the Management’s Discussion and Analysis information.

IPFCF staff corrected the misstatements we identified and submitted revised information to SCO.

**Cause:**
IPFCF’s procedures for reviewing the financial statements and required supplementary information were not sufficient to prevent, or detect and correct in a timely manner, certain substantive misstatements. Although IPFCF staff indicated that they used SCO-provided checklists and an internally developed checklist in preparing and reviewing this information, these resources did not include all steps needed to prevent the misstatements that we identified.
**Recommendation**

We recommend the Wisconsin Office of the Commissioner of Insurance, Injured Patients and Families Compensation Fund, improve its process for preparing and reviewing the financial statements and required supplementary information, such as by identifying and specifying further analyses to assess reasonableness, as well as incorporating additional reviews to identify readily apparent misstatements.

Response from the Wisconsin Office of the Commissioner of Insurance: The Office of the Commissioner of Insurance recognizes, and agrees, with the interim findings.

**Finding 2018-003: Department of Administration Division of Enterprise Technology Security Concerns**

**Criteria:**

Section 16.97, Wis. Stats., specifies the Department of Administration’s responsibilities for the State’s information technology (IT) services, including DOA’s responsibility to ensure that all state data processing facilities develop proper privacy and security procedures and safeguards. As a part of DOA, the Division of Enterprise Technology (DET) provides a variety of services to state agencies, including managing the mainframe for all agencies; managing servers for DOA and other executive branch agencies; and maintaining DOA-related systems. In addition, DET performs programming and security functions, including maintaining the infrastructure for STAR.

Because the mainframe and servers contain financial data and confidential information, it is important that DET manage and maintain a secure environment. Managing a secure environment involves developing, approving, and following appropriate policies, standards, and procedures.

As defined by DET, IT policies are formal, brief, high-level statements or plans that reflect an agency’s general beliefs, goals, rules, and objectives for a specific subject area. Standards are mandatory actions or rules designed to support policies. Procedures are a documented series of steps that align with policies and standards. Well-written policies, standards, and procedures provide staff with a consistent methodology for performing their job functions.

DET uses the federal National Institute of Standards and Technology’s (NIST) framework as a guide to develop policies, standards, and procedures. Because of the diverse requirements of the agencies supported, DET’s policies, standards, and procedures must comply with Wisconsin statutes, as well as requirements of other laws and standards, such as the Internal Revenue Service (IRS) laws, Criminal Justice Information Services (CJIS) standard, Health Insurance Portability and Accountability Act (HIPAA), Payment Card Industry Data Security Standard (PCI DSS), and Family Educational Rights and Privacy Act (FERPA).

It is also important that DET establish settings that enforce its policies, standards, and procedures. Settings are technical configurations that enforce controls for a
computer or group of computers. For instance, password settings can enforce password length, which is prescribed by DET’s policies and standards. Implementation of settings enforces the controls that are in place and, therefore, ensures that approved standards are being followed.

Condition:
We first reported concerns regarding a lack of policies, standards, and procedures over the operations of DET’s data center during the FY 2014-15 audit. In that fiscal year and each subsequent fiscal year, we made recommendations to DET to develop policies, standards, and procedures and address specific concerns we identified with IT practices and settings (Finding 2017-004).

Although DET has taken steps to address some of the recommendations we made since the FY 2014-15 audit, corrective actions have not been fully implemented and, therefore, weaknesses continue to exist in IT security over the operations of DET’s data centers. For example:

- DET has not completed development of written procedures for all areas and noted in its FY 2016-17 corrective action plan that implementation would be ongoing through February 2020, which is more than four years after we first made our recommendation.

- DET has not completed development of an ongoing process to review settings and practices to ensure compliance with policies, standards, and procedures. It indicated this process would not begin until February 2019, which is more than three years since we first made our recommendation.

- Finally, DET indicated it completed its assessment of the risks related to concerns we identified in prior audits. However, it did not have documentation of these assessments.

It is reasonable to expect that more progress would have been made by June 30, 2018, to address these continuing concerns.

Questioned Costs:
None.

Context:
We reviewed the policies and standards developed by DET; interviewed the DOA Chief Information Officer, the DOA Deputy Administrator of Enterprise Operations, the DOA Chief Information Security Officer, and other DOA staff to gain an understanding of DET’s efforts to implement its FY 2016-17 corrective action plan; and tested security settings and practices.

Most state agencies use computer systems that are located on the mainframe or on servers maintained in the DET data centers and that are relied on to complete
critical functions, including processing checks, accounting for cash receipts, preparing financial statements, and administering federal grant programs.

**Effect:**

Procedures and settings that do not align with approved policies and standards weaken the level of security provided by DET. Failure to properly manage and maintain a secure environment at the DET data centers could result in inappropriate access, which could result in the issuance of erroneous or fraudulent checks or inappropriate viewing of confidential data.

Further, because DET hosts and supports a significant and growing number of executive branch agencies and systems at its data centers, risks at the data centers can affect the computing resources and data of a significant number of state agencies. For example, if a data center or the state network becomes compromised, there is an increased risk that harm could come to any of the systems or data of the agencies that use the data center or network.

**Cause:**

After recommendations from the FY 2014-15 audit, DET staff began developing policies and standards that would be used by DET and all executive branch agencies. However, delays occurred as DET had difficulty in obtaining consensus from the agencies. Subsequently, DET focused solely on the development of the policies, standards, and procedures for DET. DET staff indicated that the competing demands of day-to-day operations and the development of written procedures for each security area have slowed progress in addressing our recommendations. Although DET has initiated projects in response to some of the security concerns we identified in prior audits, DET has not proactively completed a documented risk assessment to identify additional areas of concern. Such an assessment would assist DET in setting appropriate priorities based on risk.

**Recommendation**

We recommend the Wisconsin Department of Administration Division of Enterprise Technology:

- complete written procedures for all areas;
- review all settings and practices to ensure they align with policies, standards, and procedures;
- complete projects initiated in response to security concerns we identified;
- develop, document, and implement a proactive process to identify, assess, and address risks; and
- report to the Joint Legislative Audit Committee by March 29, 2019, on its plans and timelines to address these ongoing concerns.
Response from the Wisconsin Department of Administration: The Department agrees this finding and the associated recommendations. DOA has completed many items identified in the previous audits including the creation and approval of policies and standards. DOA will continue to execute the plans identified in the previous Corrective Action Plan updates, as well as the provided Corrective Action Plan for this finding.

Finding 2018-004: Executive Branch Agency Information Technology Policies and Standards*

Criteria:
Wisconsin statutes give the Department of Administration responsibility for the State’s IT services. For example, s. 16.971 (2), Wis. Stats., specifies DOA shall:

- in cooperation with executive branch agencies, establish policies, procedures, and planning processes for the administration of IT services, which executive branch agencies must follow;

- ensure the policies, procedures, and processes address the needs of agencies, other than the Board of Regents of the University of Wisconsin System, to carry out their functions; and

- monitor adherence to these policies, procedures, and processes.

Further, s. 16.971 (2), Wis. Stats., requires DOA to provide oversight and monitoring of state agency IT operations, including the responsibility for ensuring:

- management reviews of IT organizations are conducted;

- all executive branch agencies develop and operate with clear guidelines and standards in the areas of IT systems development and employ good management practices and cost-benefit justifications; and

- all state data-processing facilities develop proper privacy and security procedures and safeguards.

Finally, Executive Order 99, which was issued on April 26, 2013, established the Information Technology Executive Steering Committee (ITESC) with the purpose of aligning enterprise IT deployment with statewide business goals. One of ITESC’s stated goals is to create and maintain enterprise IT policies.

NIST is a federal organization that is responsible for establishing standards, which DOA indicated would be used for developing the executive branch agency policies and standards. NIST Publication 800-53r4 was developed by NIST to “fulfill their statutory responsibilities under the Federal Information Security Management Act (FISMA) to develop information security standards and guidelines, including minimum requirements for federal information systems” and provides information
and guidance for all areas that should be considered for maintaining a secure IT environment. For example, NIST recommends organizations regularly perform vulnerability scanning to identify vulnerabilities and to remediate and minimize the opportunity for attacks to the organization’s networks and systems. In addition, NIST recommends organizations conduct regular external and internal penetration tests to identify vulnerabilities and areas that may be used to exploit the organization’s networks and systems.

**Condition:**

We first reported concerns regarding the lack of executive branch agency IT policies and standards during our FY 2015-16 audit. During our FY 2016-17 audit, we recommended that DOA review and revise its plans and timelines for the implementation of executive branch agency policies and standards; develop and implement plans to conduct vulnerability assessments and penetration testing; and complete a comprehensive risk assessment of all executive branch agency IT operations by December 31, 2018 (Finding 2017-005).

DOA agreed with the recommendations and developed a corrective action plan dated December 22, 2017. In its corrective action plan, DOA indicated it would:

- review and revise its plans and timelines for the establishment, approval, and implementation of these policies and standards, including meeting with the ITESC by April 30, 2018;
- develop a plan for implementing vulnerability assessments across all devices and networks within the DET data centers by April 30, 2018;
- develop a plan for penetration testing across all devices and networks within the DET Data Center by July 31, 2018, and begin implementation of penetration testing after the plan has been developed; and
- develop a plan and timeline by December 31, 2018, to identify executive branch agency systems and data, implement plans to complete vulnerability assessments beginning on December 31, 2018, and implement plans to complete penetration testing as part of a comprehensive risk assessment across all executive branch agencies after completion of the vulnerability assessments.

During FY 2017-18, DOA took steps to address some of our recommendations. For example, DOA met with ITESC on April 30, 2018, to discuss the status of the development and implementation of the executive branch agency policies and standards and to make revisions to the plans and timelines for completing the development and approval of the policies and standards. Subsequent to the audit period, in October 2018, all executive branch agency policies and standards were approved. In addition, DOA purchased a tool to be used for patch vulnerability assessments for all DET managed servers. However, DET’s timeline for completing implementation of the assessments is December 2018.
We are concerned that DOA did not take the other steps outlined in its corrective action plan. For example, DOA delayed the development and implementation of detailed plans and timelines for vulnerability assessments and penetration testing. In its corrective action plan, DOA indicated it would develop a plan for penetration testing across all devices and networks within the DET data centers and begin implementation of the penetration testing by July 31, 2018. However, according to an updated status on the recommendations as of July 1, 2018, DOA has delayed initiation of penetration testing until July 31, 2019. DOA also has delayed completion of a comprehensive risk assessment across all executive branch agencies. In its corrective action plan, DOA indicated this risk assessment would be completed by December 31, 2018. However, according to an updated status on the recommendations as of July 1, 2018, DOA has delayed completion of this risk assessment until December 31, 2019.

By not completing all corrective action steps identified in its December 2017 corrective action plan and by delaying other steps, DOA continues to lack comprehensive information regarding the systems and data within the State’s network and does not have reasonable certainty that the State’s network is secured. Therefore, DOA may not be aware of vulnerabilities that could affect the State’s network or the steps executive branch agencies are taking to reduce risks.

**Questioned Costs:**
None.

**Context:**
We interviewed the DOA Chief Information Officer, the DOA Deputy Administrator of Enterprise Operations, the DOA Chief Information Security Officer, and other DOA staff to gain an understanding of the steps that have been taken to develop executive branch agency IT policies and standards and monitoring and oversight of executive branch agency IT operations.

State agencies use computer systems that DOA is responsible for ensuring are properly secured and are relied on to complete critical functions, including processing checks, accounting for cash receipts, preparing financial statements, and administering federal grant programs.

**Effect:**
Because policies and standards were not implemented until October 2018, a lack of policies and standards existed throughout the audit period. A lack of policies and standards that apply to all executive branch agencies can lead to weaknesses in the State’s network. Because there are interconnections across agencies in the State’s network, weaknesses at one agency can affect security for other agencies.

Additionally, failure to monitor executive branch agencies’ environments and practices can also lead to vulnerabilities in the State’s network, known or unknown, because there is no assurance that all systems are meeting minimum level of security for the State’s IT environment, as determined by the policies and standards, or an acceptance of additional risk by appropriate personnel for the State. Weaknesses in the security of the network can lead to inappropriate access to
confidential or sensitive data, unauthorized changes to the data within the system, or a failure of the system.

Cause:
DOA prioritized the development of the executive branch agency policies and standards as a prerequisite to completing vulnerability assessments and conducting penetration testing. Additionally, DOA used the DET policies and standards, which were not completed until March 2018, as a template for the executive branch agency policies and standards, which resulted in DOA further delaying completion of steps to address the other recommendations. Finally, DOA indicated staff vacancies and competing projects influenced its ability to prioritize the development and completion of penetration testing, vulnerability assessments, and a comprehensive risk assessment. We note that the Bureau of Security, which is responsible for leading the work in this area, had five vacancies during FY 2017-18.

Recommendation

We recommend the Wisconsin Department of Administration:

- develop and implement a proactive process to identify, assess, and address risks for the parts of the State’s information technology environment that it is statutorily responsible for, including:
  - prioritizing its plans and timelines to complete vulnerability assessments and penetration testing across all state devices and networks within the Division of Enterprise Technology data centers as well as
  - completing a comprehensive risk assessment across all executive branch agencies; and
- report to the Joint Legislative Audit Committee by March 29, 2019, on its plans and timelines to address these concerns.

Response from the Wisconsin Department of Administration: The Department agrees with this finding and the associated recommendations. DOA has completed many items identified in the previous audits including the creation and approval of executive branch policies and standards by the ITESC. DOA will continue to execute the plans identified in the previous Corrective Action Plan updates, as well as the provided Correction Action Plan for this finding.

Finding 2018-005: STAR Security Concerns*

Criteria:
The Department of Administration is responsible for the maintenance of STAR. To provide proper internal control, information technology security policies and procedures are necessary to ensure data stored and processed in STAR are protected
from accidental or intentional misuse or destruction. IT controls should be established to prevent inappropriate or inadvertent access to STAR and its related databases and to provide staff with a consistent methodology for performing their job functions. Finally, NIST Special Publication 800-53r4 discusses the importance of creating policies and procedures, ensuring proper separation of duties, and maintaining a standard for access that seeks to provide a user with least privilege, which requires that only the minimum necessary rights are assigned to complete a task.

**Condition:**

DOA continues to make progress in addressing concerns related to STAR security. During our FY 2015-16 and FY 2016-17 audits of STAR, we identified weaknesses in policies, standards, and procedures related to security, as well as areas of inappropriate or excessive access to STAR. In response to recommendations from our FY 2015-16 and FY 2016-17 audits, the STAR Program Office adopted the security administration policies developed by the DOA Division of Enterprise Technology in the DET IT Security Policy Handbook, which are based on the NIST security framework. In addition, DOA developed security procedures in the STAR Security Administration Handbook, which was implemented in June 2017. Finally, DOA took steps to reduce some of the excessive or inappropriate access identified during our prior audits.

During our FY 2017-18 audit, we completed testing of security related to STAR Finance, STAR Procurement, STAR Human Capital Management (HCM), and the underlying databases; we reviewed and tested access related to the change management process; and we followed up on the progress DOA has made to address recommendations from our FY 2016-17 audit (Finding 2017-007). We found DOA continues to take steps to address the recommendations. For example, in February 2018, DOA implemented an annual user attestation procedure to review user access to STAR. In addition, we noted DOA took steps to further reduce some of the excessive or inappropriate access identified during prior audits and to implement new procedures in certain areas. However, some of the steps taken by DOA were later in the audit period or subsequent to the end of the audit period and, in other areas, we continued to identify access concerns and a lack of procedures. We determined that the detailed results of our review were too sensitive to communicate publicly. Therefore, we communicated the results in confidential interim memoranda to the DOA State Controller’s Office and the STAR Program Office.

**Questioned Costs:**

None.

**Context:**

We completed testing of security administration over the STAR Finance, STAR Procurement, and STAR HCM applications and the related databases. We interviewed staff in the STAR Program Office, the DOA State Controller’s Office, and the DOA Division of Personnel Management to gain an understanding of the security administration policies and procedures, and the steps taken to address our prior-year recommendations. In addition, we performed queries to test access to accounts and
roles in STAR, and we requested documentation to test in other areas of security administration.

STAR functions include processing vendor payments, accounting for cash receipts, tracking and maintaining employee information, tracking employee time, and processing payroll. STAR is used by the State Controller’s Office and most state agencies to report financial information, monitor budgets, administer federal grants, process payroll, process transactions, and manage assets.

Effect:
Although it can be difficult to determine how IT concerns such as those we identified affect the financial statements and material federal compliance areas, ineffective general IT controls in areas such as these may permit controls over individual systems to operate improperly and may allow financial statement misstatements and noncompliance to occur and not be detected.

Weaknesses in IT security controls increase the risk that unauthorized or erroneous transactions could be processed or changes could be made to accounting, payroll, and other data. In addition, failure to provide an appropriate level of protection for systems and data increases the risk that personally identifiable information could be accidentally or maliciously exposed.

Cause:
DOA continues to develop its procedures and controls over the STAR environment, and to learn about the complexities and intricacies of security in this environment. Because some procedures were not implemented until late in the audit period, or after the end of the audit period, risks continued to exist.

☑️ Recommendation

We recommend the Wisconsin Department of Administration:

- review and update its annual user attestation procedure by January 31, 2019, to ensure a comprehensive review of access to STAR is performed for the next review, adjust access as necessary as a result of the review, and maintain documentation of all access reviews;

- by June 30, 2019, complete a review of security practices and settings for STAR, document procedures and ensure controls over the applications conform to the policies in the Division of Enterprise Technology IT Security Policy Handbook, and document justifications for any exceptions to the established policies; and

- by June 30, 2019, take corrective actions related to the specific recommendations in the confidential interim memoranda provided during the audit.

Response from the Wisconsin Department of Administration: The Department of Administration agrees with the recommendations.

Criteria:
The Wisconsin Employee Benefit System (WEBS) is a DB2 system implemented by the Department of Employee Trust Funds in 1992 to administer Wisconsin Retirement System (WRS) data and serve as a central repository for benefit data for programs administered by the Department of Employee Trust Funds. WEBS is maintained on the Department of Administration Division of Enterprise Technology mainframe. To access WEBS, users require access to both the mainframe and to WEBS. WEBS contains information for all WRS participants, including sensitive information such as social security numbers, birthdates, earnings, and beneficiary information for state and local government employees. Due to the sensitive nature of this information WEBS access should be appropriately limited.

To ensure access remains appropriate, the ETF Bureau of Information Technology Services (BITS) completes an annual review of access to WEBS. As part of this review, BITS sends a listing of WEBS access to supervisors in each division, requests the supervisors review the access for appropriateness, and notify BITS of any needed changes to user’s access. BITS is responsible for updating the WEBS access based on the information provided by the division supervisors.

Condition:
We reviewed the process BITS performed to conduct the annual WEBS access review. We reviewed all responses BITS received from the division supervisors, and we identified access changes were requested by supervisors for 25 users. We found that BITS did not make the requested access changes for 21 of the 25 users. Further, one of the users who continued to have access was no longer employed at ETF. We did identify that this user’s access to the mainframe had been revoked. Therefore, the user would not have been able to access the WEBS system.

Questioned Costs:
None.

Context:
In performing our testing, we requested the emails sent by BITS to division supervisors, the responses from supervisors, and current WEBS access listings. Our review focused on supervisor responses and whether BITS made the access changes requested by supervisors.

Effect:
Inappropriate access to WEBS increases the risk that personal and confidential state and local employee information could be inappropriately changed or compromised. For example, access was not removed for one user who had the ability to change a beneficiary.

Cause:
BITS did not track the WEBS access review responses to ensure the access was removed as requested.
**Recommendation**

We recommend the Wisconsin Department of Employee Trust Funds review its procedures for tracking the responses from supervisors for WEBS access changes and update as necessary to ensure that access changes are made as requested.

**Response from the Wisconsin Department of Employee Trust Funds:** The Department of Employee Trust Funds agrees with the recommendation.

**Finding 2018-007: Financial Reporting Concerns—Other Postemployment Benefits Note Disclosures**

**Criteria:**

The Department of Administration State Controller’s Office is responsible for preparing the State of Wisconsin’s CAFR. This responsibility includes ensuring new accounting standards, issued by the GASB, are implemented as they become effective. For FY 2017-18, GASB Statement Number 75 Accounting and Financial Reporting for Postemployment Benefits Other Than Pensions became effective. This GASB standard changed accounting and financial reporting requirements for measuring the other postemployment benefit (OPEB) liability for OPEB plans, as well as requirements for both the notes and required supplementary information for the employers that participate in OPEB plans. OPEB refers to the benefits, other than pensions, that a state or local government employee may receive after they have left employment, generally upon retirement. An OPEB plan can include medical, prescription drug, dental, vision, and other health-related benefits, whether provided separately or through a pension plan, as well as death benefits, life insurance, and long-term care coverage, when provided separately from a pension plan. GASB’s overall goal with the issuance of new OPEB accounting standards was to improve the usefulness of OPEB information for making financial decisions and assessing accountability.

**Condition:**

The State, including the University of Wisconsin System and state authorities reported as component units of the State, participate in two OPEB programs: the State Retiree Health Insurance program and the State Retiree Life Insurance program. In our audit of the State’s CAFR, we reviewed the note disclosures prepared by SCO and considered the requirements of GASB Statement Number 75 that would apply to each of the programs. SCO did not initially include numerous note disclosures required by GASB Statement Number 75. For example, SCO did not include:

- amounts for each of the State’s component units that detailed each component’s share of the net OPEB liability, OPEB expense, and deferred inflows and outflows related to the State Retiree Life Insurance program; for example, SCO did not report that the component units’ share of the $493.5 million net OPEB liability for the State Retiree Life Insurance program was $45.5 million;
In addition, SCO did not include required supplementary information that is required by GASB Statement Number 75 for either the State Retiree Health Insurance program or the State Retiree Life Insurance program. After our inquiry, SCO updated the information to meet the requirements of GASB Statement Number 75 for both OPEB programs.

**Questioned Costs:**

None.

**Context:**

In conducting our audit of the State’s CAFR, we reviewed the accounting standards issued by GASB and assessed whether these standards were properly considered when preparing the financial statements and required note disclosures.

**Effect:**

Without the disclosures required by GASB, users of the financial statements may not be fully informed about relevant information pertaining to the OPEBs that the State provides to its employees upon retirement.

**Cause:**

SCO did not properly consider the requirements of GASB Statement Number 75 in preparing the note disclosures for the State’s CAFR.

**Recommendation**

*We recommend the Wisconsin Department of Administration ensure GASB standards are fully considered and the requirements of the standards are being met when preparing the State’s financial statements, required note disclosures, and required supplementary information.*

**Response from the Wisconsin Department of Administration:** The Department of Administration agrees with the recommendation.
Finding 2018-008: Financial Reporting for Changes to Infrastructure-related Capital Assets at the Department of Transportation

Criteria:
Generally accepted accounting principles (GAAP) require capital assets of governmental funds to be reported in the government-wide Statement of Net Position. This statement includes those capital assets for which the Department of Transportation (DOT) is responsible, including infrastructure capital assets, and other nondepreciable capital assets. DOT has established capitalization criteria that are used to determine which construction projects should be capitalized as well as when a construction project is considered to be complete for financial reporting purposes. Construction projects that will be capitalized are reported as other nondepreciable capital assets until considered complete, at which time they are reported as infrastructure capital assets. For FY 2017-18, DOT changed its capitalization criteria.

GAAP also establishes standards for changes that affect financial reporting. Specifically, GASB Statement Number 62, Codification of Accounting and Financial Reporting Guidance Contained in Pre-November 30, 1989 FASB and AICPA Pronouncements, defines accounting changes due to a change in accounting principle or a change in accounting estimate and also defines a correction of an error. GASB Statement 62 further prescribes the financial reporting and other disclosure requirements for each type of accounting change and for a correction of an error.

Condition:
DOT did not fully consider relevant GASB requirements for financial reporting of its change to the capitalization criteria. Specifically, DOT did not assess whether the change should be classified as a change in accounting principle, change in accounting estimate, or correction of an error in accordance with GASB Statement 62. At our request, DOT completed an assessment of the relevant GASB Statement 62 requirements and, as a result of that assessment, it modified its reporting of infrastructure capital assets and other nondepreciable capital assets.

Questioned Costs:
None.

Context:
DOT submits financial information to the Department of Administration State Controller’s Office, which is responsible for preparing the State’s CAFR. Infrastructure capital assets and other nondepreciable capital assets are separately reported on the Statement of Net Position and within the related note disclosures in the CAFR. Infrastructure capital assets and other nondepreciable capital assets reported by DOT account for 100.0 percent and 62.1 percent, respectively, of the total for each type of asset.

We evaluated the change made by DOT to its capitalization criteria and assessed the reporting of the change against GASB standards. We could not initially assess the appropriateness of how DOT reported the change in its capitalization criteria.
because DOT did not initially provide a comprehensive summary of its rationale for the change in capitalization criteria; had not fully assessed the related reporting requirements in GASB Statement 62; and provided us infrastructure-related information that contained substantive errors (see Finding 2018-009). In response to our request, DOT assessed the relevant GASB Statement 62 requirements and prepared a written summary of both the change in capitalization criteria, including DOT’s rationale, and an assessment of the how the changes would be reported in accordance with the requirements of GASB Statement 62.

**Effect:**
DOT initially reported prior-period adjustments to the beginning balances that decreased infrastructure capital assets and increased other nondepreciable capital assets by $713.2 million due to the change it made to its capitalization criteria. When completing the assessment we requested, DOT determined that the GASB Statement 62 requirements related to a change in estimate were applicable for the change in capitalization criteria that it had made, and that GASB required such changes to be applied only prospectively. As a result, DOT eliminated the prior-period adjustments.

**Cause:**
DOT did not consider all relevant GASB standards for the changes to its capitalization criteria, and it did not sufficiently communicate with others within DOT or to SCO about the changes to obtain guidance about relevant financial reporting requirements.

✔️ **Recommendation**

_We recommend the Wisconsin Department of Transportation further its understanding of relevant financial reporting standards, assess the application of these standards before preparing financial statement information, and seek guidance from the Wisconsin Department of Administration State Controller’s Office to do so._

**Response from the Wisconsin Department of Transportation:** The Department of Transportation agrees with the finding.

---

**Finding 2018-009: Determination of Infrastructure-related Capital Assets by the Department of Transportation**

**Criteria:**
GAAP requires capital assets of governmental funds to be reported in the government-wide Statement of Net Position. This statement includes those capital assets for which the Department of Transportation is responsible, including infrastructure capital assets and other nondepreciable capital assets. To properly determine the amounts to report for infrastructure capital assets and other nondepreciable capital assets, DOT must analyze a variety of data related to expenditures incurred during the year, disposals that occurred during the year, and projects in progress or completed during the year. The determined amounts
are considered to be estimates, and the procedures to produce them are complex. DOT’s documented procedures and our discussions with DOT staff indicated to us that, except for a change in the capitalization criteria used, DOT intended to use the same process as in prior years.

**Condition:**

In completing its procedures to determine the amounts to report for infrastructure capital assets and other nondepreciable capital assets, DOT did not appropriately compile and analyze data, determine the items that should be capitalized, or assess the classification of these items. This resulted in a variety of errors in the amounts reported for governmental activities on the Statement of Net Position. For example, DOT double-counted several projects in progress when calculating the amount it reported for other nondepreciable capital assets. As another example, DOT removed several infrastructure capital assets that had been appropriately capitalized in prior years and were not disposed of during FY 2017-18. During our FY 2016-17 audit, we also identified concerns with infrastructure (Finding 2017-008).

**Questioned Costs:**

None.

**Context:**

DOT submits financial information to the Department of Administration State Controller’s Office, which is responsible for preparing the State’s CAFR. The Statement of Net Position included in the CAFR reports total capital assets for governmental activities of $24.5 billion, of which approximately $20.5 billion represents infrastructure capital assets and other nondepreciable capital assets reported as a result of DOT’s process.

During our review, we compared DOT’s process for determining the amounts reported for infrastructure capital assets and other nondepreciable capital assets for FY 2017-18 to the process used for the prior year, and we considered the reasonableness and potential effect of changes in the process based on our understanding of the prior-year process.

**Effect:**

We identified multiple errors in the procedures DOT completed that resulted in DOT reporting inaccurate amounts for infrastructure capital assets and other nondepreciable capital assets for FY 2017-18. For example, DOT overstated the other nondepreciable capital assets by $622.4 million because it double-counted several projects in progress. As another example, DOT understated infrastructure capital assets by $136.2 million because it removed several infrastructure capital assets that had been appropriately capitalized in prior years. After discussing our concerns with DOT staff, they made revisions and submitted corrected information to SCO.

**Cause:**

Although both DOT’s documented procedures and staff indicated that the process used to determine the amounts reported for infrastructure capital assets and other
nondepreciable capital assets for FY 2017-18 was the same as the prior-year process, the actual process used for FY 2017-18 was not consistent with the prior-year process or with DOT’s documented procedures. In addition, DOT’s documented procedures were not sufficiently detailed to support successful completion of the process. Further, DOT staff did not sufficiently understand the process or how procedures related to each other and the determination and reporting of amounts for infrastructure capital assets and other nondepreciable capital assets. DOT staff were unable to explain how the procedures initially completed for FY 2017-18 would result in the reporting of appropriate amounts to SCO. When we explained our concerns with the procedures initially completed, DOT staff made multiple revisions in order to follow the prior-year process.

**Recommendation**

We recommend the Wisconsin Department of Transportation take steps to improve the process for determining the amounts to be reported for infrastructure capital assets and other nondepreciable capital assets, including developing staff understanding of the process, revising documented procedures to provide additional detail, and training staff in appropriate completion of the procedures.

**Response from the Wisconsin Department of Transportation:** The Department of Transportation agrees with the finding.

---

**Finding 2018-010: Accounting for Crossover Refunding Bonds**

**Criteria:**

The Department of Administration State Controller’s Office is responsible for preparing the State of Wisconsin’s CAFR. This responsibility includes ensuring new financial activity is accurately reflected in the financial statements in accordance with generally accepted accounting principles issued by the Governmental Accounting Standards Board (GASB).

A crossover refunding bond issuance is an issuance in which the proceeds are placed in escrow and used to make debt service payments on the refunding bonds until the crossover date, which is the call date or maturity date of the original bonds that are to be refunded. The original bonds continue to be reported as a liability on the financial statements because the entity remains liable for the original bonds. The crossover refunding bonds are also reported as a liability and the proceeds from the refunding bonds are reported as restricted cash until the crossover date of the original bonds.

In accordance with GASB Implementation Guide 2015-1, the refunding debt in a crossover refunding is not considered capital-related debt until the crossover date at which time the entity no longer has a liability for the bonds. At that time, the refunding bonds take on the characteristics of the original bonds, and if the original bonds were considered capital-related debt, the refunding bonds would be included in the calculation of net investment in capital assets in the government-wide financial statements.
**Condition:**
In FY 2017-18, the State issued crossover refunding bonds in which the State refunded $530.4 million in certain outstanding general obligation bonds and transportation revenue bonds. The accounting for the crossover refunding bonds was not completed accurately and the GASB implementation guide was not followed.

**Questioned Costs:**
None.

**Context:**
In conducting our audit of the State’s CAFR, we reviewed the accounting standards issued by GASB and assessed whether these standards were properly considered when preparing the financial statements and required note disclosures.

**Effect:**
The components of Net Position for governmental activities on the Statement of Net Position were misstated as follows:

- Net Investment in Capital Assets was understated by $192.1 million.
- Restricted for Debt Service was overstated by $432.4 million.
- Unrestricted, which is a deficit, was overstated by $240.3 million.

**Cause:**
SCO did not properly consider the GASB requirements related to financial reporting for crossover refunding debt. SCO did not gain an adequate understanding of GASB standards to ensure the appropriate accounting for the crossover refunding bonds in the government-wide Statement of Net Position.

☑ **Recommendation**

_We recommend the Wisconsin Department of Administration take additional steps to review and ensure new financial activity of the State is properly reported in the financial statements in accordance with Governmental Accounting Standards Board standards and guidance._

**Response from the Wisconsin Department of Administration:** The Department of Administration agrees with the recommendation.
Section III

Federal Award Findings and Questioned Costs

Uniform Guidance requires that audit findings be presented in sufficient detail for the auditee to prepare a corrective action plan and take corrective action, and for federal agencies and pass-through entities to make a management decision. The specific information that Uniform Guidance requires in audit findings can be found in the agency narratives on the page numbers referenced in this section. The agency narratives also include the agencies’ responses. Agencies’ corrective action plans for audit findings are included in the Corrective Action Plans chapter, which starts on page 203.

Repeat findings from report 18-5 are marked with an asterisk (*).

### U.S. DEPARTMENT OF AGRICULTURE

#### Wisconsin Department of Health Services

<table>
<thead>
<tr>
<th>Finding Number</th>
<th>CFDA Number</th>
<th>Federal Program</th>
<th>Finding</th>
<th>Amount Questioned</th>
</tr>
</thead>
</table>

**Total U.S. Department of Agriculture**

$ 0

### U.S. DEPARTMENT OF EDUCATION

#### Wisconsin Department of Administration

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<th>Finding Number</th>
<th>CFDA Number</th>
<th>Federal Program</th>
<th>Finding</th>
<th>Amount Questioned</th>
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<tr>
<td>2018-100</td>
<td>84.048</td>
<td>Career and Technical Education—Basic Grants to States</td>
<td>Timing of Draws of Federal Funds</td>
<td>$ 0</td>
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<td>2018-101</td>
<td>84.287</td>
<td>Twenty-First Century Community Learning Centers</td>
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<td>2018-101</td>
<td>84.367</td>
<td>Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants)</td>
<td>Timing of Draws of Federal Funds</td>
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#### Wisconsin Technical College System

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<th>Finding Number</th>
<th>CFDA Number</th>
<th>Federal Program</th>
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<tr>
<td>2018-900</td>
<td>84.048</td>
<td>Career and Technical Education—Basic Grants to States</td>
<td>Monitoring of Subrecipients—Career and Technical Education—Basic Grants to States</td>
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**Total U.S. Department of Education**

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## U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Wisconsin Department of Administration

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<th>Finding Number</th>
<th>CFDA Number</th>
<th>Federal Program</th>
<th>Finding</th>
<th>Amount Questioned</th>
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</thead>
<tbody>
<tr>
<td>2018-100 p. 19</td>
<td>93.243</td>
<td>Substance Abuse and Mental Health Services Projects of Regional and National Significance</td>
<td>Timing of Draws of Federal Funds</td>
<td>$ 0</td>
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### Wisconsin Department of Children and Families

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<tr>
<th>Finding Number</th>
<th>CFDA Number</th>
<th>Federal Program</th>
<th>Finding</th>
<th>Amount Questioned</th>
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<tr>
<td>2018-203 p. 31</td>
<td>93.563</td>
<td>Child Support Enforcement</td>
<td>Federal Award Monitoring for Child Support Enforcement</td>
<td>$ 0</td>
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<tr>
<td>2018-200 p. 26</td>
<td>93.575</td>
<td>Child Care and Development Block Grant</td>
<td>Collection of Child Care Provider Overpayments</td>
<td>Undetermined</td>
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<tr>
<td>2018-201 p. 27</td>
<td>93.575</td>
<td>Child Care and Development Block Grant</td>
<td>Reconciliation of Child Care Payments</td>
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<td>2018-202 p. 29</td>
<td>93.575</td>
<td>Child Care and Development Block Grant</td>
<td>Monitoring of Child Care Providers</td>
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<tr>
<td>2018-200 p. 26</td>
<td>93.596</td>
<td>Child Care Mandatory and Matching Funds of the Child Care and Development Fund</td>
<td>Collection of Child Care Provider Overpayments</td>
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<tr>
<td>2018-201 p. 27</td>
<td>93.596</td>
<td>Child Care Mandatory and Matching Funds of the Child Care and Development Fund</td>
<td>Reconciliation of Child Care Payments</td>
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<tr>
<td>2018-202 p. 29</td>
<td>93.596</td>
<td>Child Care Mandatory and Matching Funds of the Child Care and Development Fund</td>
<td>Monitoring of Child Care Providers</td>
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### Wisconsin Department of Health Services

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<tr>
<th>Finding Number</th>
<th>CFDA Number</th>
<th>Federal Program</th>
<th>Finding</th>
<th>Amount Questioned</th>
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<tbody>
<tr>
<td>2018-304 p. 46</td>
<td>93.243</td>
<td>Substance Abuse and Mental Health Services Projects of Regional and National Significance</td>
<td>Subrecipient Monitoring for the Substance Abuse and Mental Health Services Projects of Regional and National Significance Program</td>
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<tr>
<td>2018-300 p. 36</td>
<td>93.778</td>
<td>Medical Assistance Program</td>
<td>Computer Data Matches*</td>
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<td>2018-301 p. 38</td>
<td>93.778</td>
<td>Medical Assistance Program</td>
<td>Medical Assistance Program Payments to Terminated Providers</td>
<td>69,970</td>
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<tr>
<td>2018-303 p. 43</td>
<td>93.778</td>
<td>Medical Assistance Program</td>
<td>Medical Assistance Program Payments for Ineligible Services to Inmates</td>
<td>9,235</td>
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<tr>
<td>2018-305 p. 48</td>
<td>93.778</td>
<td>Medical Assistance Program</td>
<td>Medical Assistance Program Provider Overpayments</td>
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## Wisconsin Department of Public Instruction

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<tr>
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<th>CFDA Number</th>
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<td>2018-400</td>
<td>93.243</td>
<td>Substance Abuse and Mental Health Services Projects of Regional and National Significance</td>
<td>Subrecipient Monitoring for Substance Abuse and Mental Health Services Projects of Regional and National Significance Program</td>
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### Total U.S. Department of Health and Human Services

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<table>
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<tr>
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<tbody>
<tr>
<td>Total U.S. Department of Health and Human Services</td>
<td>$ 79,205</td>
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<tr>
<td>Plus an Undetermined Amount</td>
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## U.S. Social Security Administration

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<tr>
<th>Finding Number</th>
<th>CFDA Number</th>
<th>Federal Program</th>
<th>Finding</th>
<th>Amount Questioned</th>
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<tbody>
<tr>
<td>2018-100</td>
<td>96.001</td>
<td>Social Security-Disability Insurance</td>
<td>Timing of Draws of Federal Funds</td>
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### Total U.S. Social Security Administration

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<tr>
<td>Total U.S. Social Security Administration</td>
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## Findings Affecting Multiple Programs

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<tr>
<th>Finding Number</th>
<th>CFDA Number</th>
<th>Federal Program</th>
<th>Finding</th>
<th>Amount Questioned</th>
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<tbody>
<tr>
<td>2018-700</td>
<td></td>
<td>Student Financial Assistance Cluster</td>
<td>Information Technology Controls at the University of Wisconsin System*</td>
<td>$ 0</td>
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### Total Findings Affecting Multiple Programs

<p>| | |</p>
<table>
<thead>
<tr>
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<tr>
<td>Total Findings Affecting Multiple Programs</td>
<td>$ 0</td>
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## Total Questioned Costs for the State of Wisconsin

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<thead>
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<tbody>
<tr>
<td>TOTAL QUESTIONED COSTS FOR THE STATE OF WISCONSIN</td>
<td>$ 79,205</td>
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<tr>
<td>Plus an Undetermined Amount</td>
<td></td>
</tr>
</tbody>
</table>
State of Wisconsin Summary Schedule of Prior Audit Findings

Federal Compliance Findings | Financial Statement Findings
pages 98-115 | pages 116-129
Status of Prior Year Audit Findings

Finding: Federal Cash Management Processes (2017-100)

Federal Programs: Foster Care—Title IV-E (CFDA #93.658), Children’s Health Insurance Program (CFDA #93.767), Medical Assistance Program (CFDA #93.778)

Status of Audit Finding: Corrective Action Taken

Person responsible for corrective action:
Sharon Hughes, Financial Management Supervisor
Department of Administration, Division of Executive Budget and Finance, State Controller’s Office
Sharon.Hughes@wisconsin.gov
Status of Prior Year Audit Findings

**Finding:** Subrecipient Monitoring for the Community Development Block Grant (2017-103, 2015-001, 2014-001, WI-13-1, WI-12-2)

**Federal Program:** Community Development Block Grants/State's Program and Non-Entitlement Grants in Hawaii (CFDA #14.228)

**Status of Audit Finding:** Corrective Action Taken

Person responsible for corrective action:
Sara Buschman, Administrator
Division of Energy, Housing and Community Resources
Saral.Buschman@wisconsin.gov

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**Finding:** Subrecipient Monitoring for the HOME Investment Partnerships Program (2017-101, 2015-004, 2014-006)

**Federal Program:** HOME Investment Partnerships Program (CFDA #14.239)

**Status of Audit Finding:** Corrective Action Taken

Person responsible for corrective action:
Sara Buschman, Administrator
Division of Energy, Housing and Community Resources
Saral.Buschman@wisconsin.gov

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**Finding:** Monitoring and Inspections of Rental Housing Units (2017-104, 2015-009, 2014-009)

**Federal Program:** HOME Investment Partnerships Program (CFDA #14.239)

**Status of Audit Finding:** Corrective Action Taken

Person responsible for corrective action:
Sara Buschman, Administrator
Division of Energy, Housing and Community Resources
Saral.Buschman@wisconsin.gov
**Finding:** Section 3 Reporting for the Community Development Block Grant (2017-102)

**Federal Program:** Community Development Block Grants/State's Program and Non-Entitlement Grants in Hawaii (CFDA #14.228)

**Status of Audit Finding: Corrective Action Taken**
Prior to June 30, 2018, DOA was able to review in the U.S. Department of Housing and Urban Development’s (HUD) SPEARS system the Section 3 Summary Report for the period ended September 30, 2016. DOA determined that the information entered in SPEARS was correct and, therefore, no correction was required; and that it is appropriate to exclude information for the Neighborhood Stabilization Program from the Section 3 Summary Report.

Person responsible for corrective action:
Sara Buschman, Administrator
Division of Energy, Housing and Community Resources
Saral.Buschman@wisconsin.gov
Status of Prior Year Audit Findings


Federal Program: Foster Care—Title IV-E (CFDA #93.658)

Status of Audit Finding: Corrective Action Taken

Person responsible for corrective action:
David Berndt, Title IV-E Program Coordinator
Department of Children and Families, Division of Safety and Permanence
David.Berndt@wisconsin.gov

Finding: Foster Care Rate Setting for the Balance of the State Cases (2015-014, 2014-017)

Federal Program: Foster Care—Title IV-E (CFDA #93.658)

Status of Audit Finding: Corrective Action Taken

Person responsible for corrective action:
David Berndt, Title IV-E Program Coordinator
Department of Children and Families, Division of Safety and Permanence
David.Berndt@wisconsin.gov


Federal Program: Temporary Assistance for Needy Families (CFDA #93.558)

Status of Audit Finding: Corrective Action Taken

In June 2018, the Bureau issued Operations Memo 18-J6 and a Policy Desk Aid to ensure that W-2 agencies understand the need to enter SSNs or SSN Application Dates for all W-2 applicants and participants and the timeframes in which these entries must occur per W-2 eligibility requirements. In collaboration with DHS, CWW was enhanced to support existing policy requiring all members of a W-2 group to provide either an SSN or an SSN application date. Invalid verification codes have been removed from the drop down list to reduce error rates.

Person responsible for corrective action:
Margaret McMahon, Director, Bureau of Working Families
Department of Children and Families, Division of Family and Economic Security
Margaret.McMahon@wisconsin.gov
Summary Schedule of Prior Audit Findings


Federal Program: Temporary Assistance for Needy Families (CFDA #93.558)

Status of Audit Finding: Corrective Action Taken
In June 2018, Operations Memo 18-11 was issued to clarify policy regarding required agency action and timeliness when a parent in the W-2 group fails to cooperate with child support requirements and to update policy to provide guidance on determining overpayments.

Person responsible for corrective action:
Margaret McMahon, Director, Bureau of Working Families
Department of Children and Families, Division of Family and Economic Security
Margaret.McMahon@wisconsin.gov

Finding: Foster Care—Title IV-E Subrecipient Monitoring (2017-200, 2015-022)

Federal Program: Foster Care- Title IV-E (CFDA #93.658)

Status of Audit Finding: Corrective Action Taken

Person responsible for corrective action:
Claudius Lebi, Financial Integrity and Audit Section, Chief
Department of Children and Families, Division of Management Services
ClaudiusO.Lebi@wisconsin.gov

Finding: Subrecipient Monitoring (2015-022)

Federal Programs: Temporary Assistance for Needy Families (CFDA #93.558), Child Support Enforcement (CFDA #93.563), Child Care and Development Fund Cluster (CFDA #93.575/93.596), Adoption Assistance (CFDA #93.659)

Status of Audit Finding: Partially Corrected
DCF developed a new Contract Monitoring 101 training. The first training was delivered June 28, 2018 with additional sessions planned. As part of the process, additional training needs were identified and planned. The additional planned training will be completed in state fiscal year 2019. DCF produced a preliminary monitoring dashboard for contract managers with roll out on July 5, 2018, with an additional dashboard suite to be completed in state fiscal year 2019.

Person responsible for corrective action:
Robert Nikolay, Administrator
Department of Children and Families, Division of Management Services
Robert.Nikolay@wisconsin.gov
DATE: July 31, 2018

TO: Brian Geib, Audit Supervisor
   Legislative Audit Bureau

FROM: Barry Kasten, Deputy Director
   Bureau of Fiscal Services
   Department of Health Services

SUBJECT: Status of Prior Audit Findings:

   Eligibility Documentation

Finding: Eligibility Documentation (2015-023, 2014-024, WI-13-11, WI-12-21, WI-11-2, WI-10-3)

Federal Programs: Children’s Health Insurance Program (CFDA #93.767), Medical Assistance Program
(CFDA #93.778), Money Follows the Person Rebalancing Demonstration (CFDA #93.791)

Status of Audit Finding: Corrective Action Taken

Person(s) Responsible for Corrective Action:

Jennifer Mueller, Associate Director, Bureau of Enrollment Policy and Systems, Division of
Medicaid Services, Department of Health Services

Rebecca McAtee, Director, Bureau of Enrollment Policy and Systems, Division of Medicaid
Services, Department of Health Services

Contact Information:

Jennifer.mueller@dhs.wisconsin.gov
608-267-3371

Rebecca.McAtee@dhs.wisconsin.gov
608-266-8628
Summary Schedule of Prior Audit Findings

Computer Data Matches

Finding: Computer Data Matches (2017-300, 2016-001, 2015-024, 2014-025, WI-13-12, WI-12-22, WI-11-3, WI-10-5, WI-09-4, WI-08-02, WI-07-6, WI-06-6, WI-05-6, WI-04-5)

Federal Program: Medical Assistance Program (CFDA #93.778)

Status of Audit Finding: Partially Corrected

The State of Wisconsin has put in place multiple systems updates to support discrepancy review and processing over the course of the past several years – these implementations are highlighted in the attached documentation. The first of these was the implementation of Error Prone Profiling that identifies areas of significant risk for either worker or consumer error within the eligibility workflow. The second systems implementation was including Discrepancies on the Dashboard for workers. This project gave workers more visibility into what discrepancies were open and timeliness of processing those discrepancies – as well as giving Consortia the ability to assign discrepancies to staff similar to cases for processing. The last systems implementation that was put into place that is noted in the documentation was MAGI implementation of SWICA supporting our MAGI population (which is the majority of our population). This project specifically improved our data exchanges for SWICA matches.
### Summary Schedule of Prior Audit Findings

#### Discrepancy Processing History (Sep 13 - Mar 16) - Summary Report

<table>
<thead>
<tr>
<th>Month-Year</th>
<th>Created Count</th>
<th>Unresolved Count</th>
<th>Resolved Count</th>
<th>Timeout Count</th>
<th>Timeout Timeliness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sep 13</td>
<td>105,670</td>
<td>1,011,120</td>
<td>22,412</td>
<td>24,612</td>
<td>73.7</td>
</tr>
<tr>
<td>Oct 13</td>
<td>77,959</td>
<td>132,532</td>
<td>51,521</td>
<td>20,775</td>
<td>69.5</td>
</tr>
<tr>
<td>Nov 13</td>
<td>20,542</td>
<td>187,320</td>
<td>43,555</td>
<td>34,345</td>
<td>76.4</td>
</tr>
<tr>
<td>Dec 13</td>
<td>19,115</td>
<td>180,804</td>
<td>72,818</td>
<td>54,982</td>
<td>75.8</td>
</tr>
<tr>
<td>Jan 14</td>
<td>32,456</td>
<td>247,256</td>
<td>58,533</td>
<td>58,533</td>
<td>77.2</td>
</tr>
<tr>
<td>Feb 14</td>
<td>39,651</td>
<td>237,472</td>
<td>96,376</td>
<td>39,476</td>
<td>41.1</td>
</tr>
<tr>
<td>Mar 14</td>
<td>39,603</td>
<td>119,730</td>
<td>63,879</td>
<td>22,816</td>
<td>59.3</td>
</tr>
<tr>
<td>Apr 14</td>
<td>84,228</td>
<td>277,872</td>
<td>54,327</td>
<td>32,946</td>
<td>59.5</td>
</tr>
<tr>
<td>May 14</td>
<td>68,745</td>
<td>192,209</td>
<td>58,029</td>
<td>20,806</td>
<td>68.9</td>
</tr>
<tr>
<td>Jun 14</td>
<td>169,924</td>
<td>33,872</td>
<td>53,366</td>
<td>18,891</td>
<td>51.3</td>
</tr>
<tr>
<td>Jul 14</td>
<td>61,939</td>
<td>148,350</td>
<td>58,860</td>
<td>19,660</td>
<td>65.5</td>
</tr>
<tr>
<td>Aug 14</td>
<td>15,125</td>
<td>129,176</td>
<td>42,734</td>
<td>24,374</td>
<td>54.6</td>
</tr>
<tr>
<td>Sep 14</td>
<td>15,125</td>
<td>129,176</td>
<td>42,734</td>
<td>24,374</td>
<td>54.6</td>
</tr>
<tr>
<td>Oct 14</td>
<td>15,125</td>
<td>129,176</td>
<td>42,734</td>
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</tr>
<tr>
<td>Nov 14</td>
<td>15,125</td>
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</tr>
<tr>
<td>Dec 14</td>
<td>15,125</td>
<td>129,176</td>
<td>42,734</td>
<td>24,374</td>
<td>54.6</td>
</tr>
<tr>
<td>Jan 15</td>
<td>55,942</td>
<td>90,810</td>
<td>52,010</td>
<td>51,706</td>
<td>56.5</td>
</tr>
<tr>
<td>Feb 15</td>
<td>15,125</td>
<td>129,176</td>
<td>42,734</td>
<td>24,374</td>
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</tr>
<tr>
<td>Mar 15</td>
<td>15,125</td>
<td>129,176</td>
<td>42,734</td>
<td>24,374</td>
<td>54.6</td>
</tr>
</tbody>
</table>
The outcome of the implementation of these 3 initiatives was improvements in the timeliness of discrepancy processes and improved accuracy between data exchanges as shown in the significant improvement in the ratios over time. The metrics collected in the first 3 quarters of SFY 2016 demonstrate that 74% of discrepancies are processed timely, and the ration of discrepancies received to discrepancies resolved is 99%.

One should also note that this data reflects all cases that would generate discrepancies (including SNAP and MA cases), and the systems solutions addressed above also cross all programs that would generate discrepancies.

The Department continues to work on improving the processes around discrepancies – we are currently engaged in a project with our partners at DCF that is specifically focused on discrepancies and are planning on using a future systems release to implement recommendations coming out of that workgroup. We have also streamlined and integrated some of our data exchanges (specifically Asset Verification - AVS) to better improve automated data matching. All of these improvements are intended to support the audit finding. AVS is slated to be in place June 2018 and Discrepancy systems changes are currently slated for October 2019.

**Person(s) Responsible for Corrective Action:**

Jennifer Mueller, Associate Director, Bureau of Enrollment Policy and Systems, Division of Medicaid Services, Department of Health Services

**Contact Information:**

Jennifer.mueller@dhs.wisconsin.gov  
608-267-3371
Children’s Health Insurance Program (CHIP) Participant Age Finding

Finding: Children's Health Insurance Program Participant Age (2017-301)

Federal Program: Children's Health Insurance Program (CFDA #93.767)

Status of Audit Finding: Partially Corrected

We are still working to repay HHS for identified errors – but the systems fix identified in the solution has been implemented as part of our June 2018 release.

Person(s) Responsible for Corrective Action:

Rebecca McAtee, Director, Bureau of Enrollment Policy and Systems, Division of Medicaid Services, Department of Health Services

Contact Information:

Rebecca.McAtee@dhs.wisconsin.gov
608-266-8628
SSBG Sub-recipient Monitoring

**Finding:** Social Services Block Grant Subrecipient Monitoring (2017-302)

**Federal Program:** Social Services Block Grant (CFDA #93.667)

**Status of Audit Finding: Partially Corrected**

The Wisconsin Department of Health Services has implemented policies and procedures and provided tools and training to the grant program divisions to ensure compliance with the Uniform Guidance sub-recipient monitoring requirements. Implementation of these policies and procedures and tools and training was provided to cover all sub-recipient grant programs including the Social Services Block Grant. Some division participation occurred in SFY18, full participation is expected to occur in SFY19. Implementation as an agency is not complete at this time.

**Person(s) Responsible for Corrective Action:**

Laurie Palchik, Director, Bureau of Strategic Sourcing, Division of Enterprise Services, Department of Health Services

**Contact Information:**

Laurie.Palchik@dhs.wisconsin.gov
608-266-9748
Status of Prior Year Audit Findings

Finding: Subrecipient Monitoring (2017-500)

Federal Programs:
Highway Planning and Construction (CFDA #20.205)
Airport Improvement Program (CFDA #20.106)

Status of Audit Finding: Partially Corrected

Highway Planning and Construction
The Planning Section is in the process of addressing remaining issues, which were not completed by June 30, 2018 due to timing of the receipt of the audit report. Training on the Uniform Guidance for planning staff will be completed by August 30, 2018. The section will also develop a formal process for tracking sub-recipients between agency divisions by October 1, 2018. In addition, the section will develop a self-certification document to be included in Regional Planning Council (RPC) work programs by December 20, 2018.

Person responsible for corrective action:
Charles Wade, Statewide Planning Section Chief
Division of Transportation Investment Management / Bureau of Planning and Economic Development
Charles.wade@dot.wi.gov

June Coleman, Local Roads programs & Finance Section Chief
Division of Transportation Investment Management / Bureau of Transit, Local Roads, Railroads & Harbors
JuneColeman@dot.wi.gov

Airport Improvement Program
The following items were not completed as of June 30, 2018 due to timing of receipt of the audit report.

The Bureau of Aeronautics (BOA) staff have worked with Federal Aviation Administration (FAA) staff to identify any potential sub-recipients. Through their combined efforts they identified that the BOA only has one sub-recipient, the Lawrence J. Timmerman Airport. Lawrence J. Timmerman Airport is managed by Milwaukee County and subject to an annual financial audit and a single audit of the grants they have received. These efforts will enable more accurate reporting in the SEFA report this fall.

WisDOT has developed a training program for individuals who deal with sub-recipients to ensure compliance with 2 CFR Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). The training on the Uniform Guidance will be held July 30, 2018.

The Bureau of Aeronautics (BOA) is in the process of developing a checklist to ensure all areas of sub-recipient compliance have been addressed. Training on sub-recipient compliance and the checklist will be held July 29, 2018 for individuals who deal with sub-recipients.
**Person responsible for corrective action:**
Mary Strait, Airport Program Engineer  
Division of Transportation Investment Management / Bureau of Aeronatics  
Mary.Strait@dot.wi.gov

**Finding:** Airport Improvement Program Reporting (2017-501)

**Federal Program:** Airport Improvement Program (CFDA #20.106)

**Status of Audit Finding:** Partially Corrected

This was not fully completed as of June 30, 2018 due to timing of receipt of the audit report.

As of June 30th, 2018, Bureau of Aeronautics (BOA) staff had developed draft policies and procedures for preparation of each of the required reports. Draft detailed procedures have been created for obtaining the information needed to populate the SF-271, SF-270 and SF-425 reports from the PeopleSoft system. BOA Management will review and approve the draft policies and procedures by December 31, 2018. The SF-271 and SF-270 reports are submitted annually to the FAA by December 31 for the year ended September 30.

**Person responsible for corrective action:**
Charlene Mathison, Program Accountant  
Division of Transportation Investment Management / Bureau of Aeronatics  
Charlene.Mathison@dot.wi.gov

**Finding:** Reporting for the Formula Grants for Rural Areas (2017-502)

**Federal Program:** Formula Grants for Rural Areas (CFDA #20.509)

**Status of Audit Finding:** Corrective Action Taken

**Person responsible for corrective action:**
Ian Ritz, Transit Section Chief  
Division of Transportation Investment Management / Bureau of Transit, Local Roads, Railroads and Harbors  
Ian.ritz@dot.wi.gov
Status of Prior Year Audit Findings

**Finding:** Eligibility, TRIO—McNair Post-Baccalaureate Achievement (2016-007)

**Federal Program:** TRIO—McNair Post-Baccalaureate Achievement (CFDA #84.217)

**Status of Audit Finding:** Corrective Action Taken

Person responsible for corrective action:
Name, Title: Dr. Matt Evans, McNair Program Director
Division or Unit (If applicable): EDI and Student Affairs
Email address evansmm@uwec.edu

**Finding:** Time and Effort Reporting—TRIO Cluster (2016-008)

**Federal Programs:** TRIO—Student Support Services (CFDA #84.042), TRIO—Upward Bound (CFDA #84.047)

**Status of Audit Finding:** Partially Corrected
The Time and Effort form has been created in BP Logix and is in the testing phase. The intent is to begin using the form for the July 2018 Time and Effort Certifications.

However, we are sending paper copies in a timely manner. We are also tracking the forms to ensure certifications are returned on time and following up when that is not happening.

Person responsible for corrective action:
Name, Title: Jackie Kriesel, Controller
Division or Unit (If applicable): University Accounting – Administration and Finance
Email address: kriesejd@uwec.edu

**Finding:** Annual Performance Reports and Earmarking—TRIO Cluster (2016-009)

**Federal Program:** TRIO—McNair Post-Baccalaureate Achievement (CFDA #84.217)

**Status of Audit Finding:** Corrective Action Taken

Person responsible for corrective action:
Name, Title: Dr. Matt Evans, McNair Director
Division or Unit (If applicable): EDI and Student Affairs
Email address evansmm@uwec.edu
Status of Prior Year Audit Findings

**Finding:** Time and Effort Reporting—TRIO Cluster (2016-008)

**Federal Program:** TRIO—Upward Bound (CFDA #84.047)

**Status of Audit Finding:**
Corrective Action taken

Person responsible for corrective action:

SuAnn Detampel
Controller
detampes@uwgb.edu
DATE: July 12, 2018

TO: Erin Scharlau
Financial Audit Director
Legislative Audit Bureau

SUBJECT: Corrective Action Taken on Single Audit Finding 2016-006: Matching, UW Oshkosh

Ms. Scharlau,

The University of Wisconsin Oshkosh has compiled a response to your request regarding the status of audit finding 2016-006: Matching.

Finding: Matching, TRIO—Student Support Services (2016-006)

Federal Program: TRIO—Student Support Services (CFDA #84.042)

Status of Audit Finding: Corrective Action Taken
Corrective actions taken are not significantly different from that specified in the corrective action plan for this finding.

Person responsible for corrective action:
Nancy Harrison, TRIO SSS and SSS STEM Director, University of Wisconsin Oshkosh
Academic Support, Center for Equity and Diversity
harrison@uwosh.edu
Office: 920-424-1310

If you have any questions or need additional information please contact me.

Sincerely,

Leah Mann, mannle@uwosh.edu, 920-424-3220
Status of Prior Year Audit Findings
July 25, 2018

Federal Program: TRIO—Student Support Services (CFDA #84.042)

Finding: Annual Performance Reports & Earmarking-TRIO Cluster (2016-009)

Status of Audit Finding: Corrective Action Taken
We took the corrective action of reviewing our policies and procedures related to the Annual Performance Report (APR). We updated and edited our software program to be sure it is correctly coding field #29 when a student is not in good academic standing and/or withdraws at the end of a term. We also took the extra measure of individually investigating each student who is not in good academic standing and/or withdraws at the end of spring terms before submitting the 2017 APR. Prior to the submission of each subsequent APR, we will do a personal spot check of each student who we know was dismissed or withdrew at the end of the spring term.

Person responsible for corrective action: Laura Franklin, Director, Student Support Services
Division of Diversity & Inclusion
franklinl@uwplatt.edu
Status of Prior Year Audit Findings

Finding: Internal Controls over Financial Reporting for Cash at the Department of Administration (2017-001)

Federal Programs: n/a

Status of Audit Finding:
Corrective Action Taken

Person responsible for corrective action:
Susan Royer, Financial Management Supervisor
Department of Administration, Division of Executive Budget and Finance, State Controller’s Office
Susan.Royer@wisconsin.gov
Finding: Department of Administration Division of Enterprise Technology Security Concerns (2017 004, 2016 011)

Federal Program: n/a

Status of Audit Finding: Partially Corrected

We have indicated partially corrected for this finding since the remediation steps are complex and scheduled over a long period of time as identified in the original Corrective Action Plan. Below is the updated Corrective Action Plan status as of 7/1/2018 with accomplishments noted:

<table>
<thead>
<tr>
<th>LAB Recommendation</th>
<th>DOA Corrective Action Status</th>
<th>Anticipated Corrective Action Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. We recommend the Department of Administration, Division of Enterprise Technology (DET) implement its plan to establish standards and procedures according to its proposed timeline;</td>
<td>The Department will continue to execute its plan as follows:</td>
<td>Completed</td>
</tr>
<tr>
<td></td>
<td>• DET has documented and approved all the identified IT security standards (based on NIST 800-53r4). It is anticipated that the DOA DET policies and standards will be replaced by the Executive Branch version being developed related to finding 2017-005.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Town hall sessions were held in the spring with DET staff to reinforce the need to align procedures with policies and standards. Critical build procedures have been identified and prioritized for revisions.</td>
<td>Started 3/1/2018 with anticipated completion 02/28/2019</td>
</tr>
<tr>
<td></td>
<td>• Server builds: complete</td>
<td></td>
</tr>
<tr>
<td>LAB Recommendation</td>
<td>DOA Corrective Action Status</td>
<td>Anticipated Corrective Action Date</td>
</tr>
<tr>
<td>---------------------</td>
<td>-----------------------------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>As new services are developed, it is required to document the appropriate procedures to align with Executive Branch IT Security policies and standards. Annual reviews of all procedures will take place to ensure compliance with any updates to the Executive Branch IT Security policies and standards.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>2. We recommend DET review current practices and settings to ensure controls conform to the approved policies, standards, and procedures, and make changes as appropriate; and</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Document the process for the continuous review of current settings/practices to ensure controls comply with Executive Branch IT Security policies, standards and procedures.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Conduct initial review of current settings/practices to ensure controls comply with Executive Branch IT Security policies, standards and procedures.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Begin on or before 2/28/2019 with anticipated completion 6/30/2019</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Begin on or before 6/30/2019 with anticipated completion 12/31/2020 and annually thereafter</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>3. We recommend DET assess the risks related to the concerns identified in this and previous security reviews and address the high-risk concerns immediately.</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DET has assessed the risk and initiated projects to address the high-risk concerns.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Projects are underway with various completion dates based on project time lines with anticipated completions between 12/30/2018 and 1/14/2020.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Finding: Executive Branch Agency Information Technology Policies and Standards (2017 005)

Federal Program: n/a

Status of Audit Finding: Partially Corrected

We have indicated partially corrected for this finding since the remediation steps are complex and scheduled over a long period of time as identified in the original Corrective Action Plan. Below is the updated Corrective Action Plan status as of 7/1/2018 with accomplishments noted:

<table>
<thead>
<tr>
<th>LAB Recommendation</th>
<th>DOA Corrective Action Status</th>
<th>Anticipated Corrective Action Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. We recommend DOA review and revise its plans and timelines for the establishment, approval, and implementation of policies and standards that apply to all executive branch agencies, including meeting with the Information Technology Executive Steering Committee by April 30, 2018;</td>
<td>DOA reviewed and revised its plans and timelines for the establishment, approval, and implementation of policies and standards that apply to all executive branch agencies. The plans were shared at the 4/30/2018 meeting with the with the Information Technology Executive Steering Committee. DOA will prepare and share the first draft of executive branch policy &amp; standards with IT Directors and agency Security Officers for review and feedback Feedback due from the agencies. DOA review of feedback from agencies and update drafts. Share final draft of executive branch policy &amp; standards with Decision Council Share final draft of executive branch policy &amp; standards with the Information Technology Executive Steering Committee for review and approval.</td>
<td>4/30/2018 7/17/2018 8/17/2018 8/31/2018 9/10/2018 10/15/2018</td>
</tr>
<tr>
<td>2. We recommend DOA develop and implement a plan to complete vulnerability assessments and penetration testing across all devices and networks within the DET Data</td>
<td>Since vulnerability assessments and penetration testing are two separate functions, DOA will address these as separate plans and implementations as follows:</td>
<td></td>
</tr>
<tr>
<td>LAB Recommendation</td>
<td>DOA Corrective Action Status</td>
<td>Anticipated Corrective Action Date</td>
</tr>
<tr>
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<td>----------------------------------</td>
</tr>
<tr>
<td>Centers by December 31, 2018, and resolve any concerns needing immediate attention; and</td>
<td>DOA has procured a tool and is in the process of implementing the tool to perform Patch Vulnerability Assessments for all DET managed servers and endpoints. This project includes:  • create the assessment process,  • conduct initial assessment review of the current environment and prioritize identified issues,  • remediate patching and configuration vulnerabilities needing immediate attention.  *Note this does not include servers located in the DET Data Centers that are managed by other entities.  Determine tool, develop plan, and implement vulnerability assessments for DET managed network devices within the DET Data Centers.  Penetration Testing for all DET managed devices and networks within the DET data centers will be conducted after the vulnerability remediation efforts have been addressed. This project includes:  • create the penetration testing process  • conduct initial assessment review of the current environment and prioritize identified issues,  • remediate issues needing immediate attention.</td>
<td>Anticipated completion 12/21/2018  Begin 12/21/18 with anticipated completion 07/31/2019.  Begin 7/31/2019 with anticipated completion to be determined based upon plan</td>
</tr>
<tr>
<td>3. We recommend DOA complete a comprehensive risk assessment across all executive branch agencies by</td>
<td>Partial risk assessment information will be gathered based upon the steps completed above (item 2). For</td>
<td>Begin 07/31/2019 with</td>
</tr>
<tr>
<td>LAB Recommendation</td>
<td>DOA Corrective Action Status</td>
<td>Anticipated Corrective Action Date</td>
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</tr>
<tr>
<td>December 31, 2018, including identifying all systems and data in the state’s network and determining an appropriate level of vulnerability assessments and penetration testing to be completed on a regular basis of the network and systems within the network to identify and evaluate security concerns.</td>
<td>systems and data not managed by DET, DOA will work with executive branch agencies to develop a plan and timeline to determine the appropriate level of vulnerability assessments and penetration testing to be completed on a regular basis.</td>
<td>anticipated completion 12/31/2019</td>
</tr>
<tr>
<td></td>
<td>• Implementation of vulnerability assessments of the identified systems and data including a process for review of results, prioritization of identified issues and tracking of remediation activity.</td>
<td>Begin 12/31/2019 with anticipated completion to be determined, based on plan.</td>
</tr>
<tr>
<td></td>
<td>• Implementation of penetration testing of the identified systems and data including a process for review of results, prioritization of identified issues and tracking of remediation activity.</td>
<td>Begin post vulnerability remediation with anticipated completion to be determined, based on plan.</td>
</tr>
</tbody>
</table>

Person responsible for the corrective action:

Bill Nash
Director, Bureau of Security, Division of Enterprise Technology
Bill.Nash@Wisconsin.gov
Status of Prior Year Audit Findings

**Finding:** Financial Reporting Controls at the Department of Administration (2017-006)

**Federal Programs:** n/a

**Status of Audit Finding:**
Corrective Action Taken

Person responsible for corrective action:
Cindy Simon, Financial Management Supervisor
Department of Administration, Division of Executive Budget and Finance, State Controller’s Office
Cynthia.Simon@wisconsin.gov
Status of Prior Year Audit Findings

Finding: STAR Security Concerns (2017-007, 2016-010)

Federal Programs: n/a

Status of Audit Finding:
Partially Corrected

The Department of Administration prioritized and completed a large portion of the corrective actions related to the specific recommendations in the confidential interim memoranda. However, some of the items that were prioritized lower still require additional improvements before they can be considered completed. The Department of Administration has notified the Legislative Audit Bureau about these items and is working to complete the remaining corrective actions no later than December 31, 2018.

Person responsible for corrective action:
Tom Laux, STAR Project Manager
Department of Administration
Thomas.Laux@wisconsin.gov
Summary of Prior Audit Findings

Finding: STAR Finance Access Concerns at the Department of Revenue (2017-002)

Federal Program: n/a

Status of Audit Finding: Partially Corrected

- DOR will perform a reconciliation between STAR HCM and STAR Finance to determine if any terminated employees still have STAR Finance access that did not get removed by the automatic removal process. STAR Finance access will be removed for those terminated employees no later than December 31, 2017.

By December 31, 2017, a reconciliation was completed to identify the terminated employees that were not removed from STAR Finance. Additional research was conducted to determine why these employees never had their STAR Finance access removed. It was determined that the employees identified were terminated after the August 22, 2016 implementation of the STAR User Profile Sync between HCM and Finance and should have been removed automatically. A STAR support ticket was submitted (SSO-57341); STAR Support sent confirmation on January 16, 2018 that the identified employees’ STAR finance access was removed.

- In a two-phased process, the responsibility for maintenance of STAR Finance and STAR HCM accesses will be transferred to the Department’s Security Support Unit in the Division of Technology Services (DTS). This change will ensure that STAR system access is treated similar to all other system accesses in DOR.
  - By February 23, 2018, DTS Security will have procedures in place for removing STAR Finance and STAR HCM access in a timely manner for terminated employees consistent with existing procedures for removing all other system access.

On February 21, 2018, a Just-Do-It Improvement Project Report was completed outlining the process for DTS Security Support staff to remove STAR Finance access. DTS Security Support staff were given the roles for performing security transactions in STAR Finance. On April 3, 2018, DTS Security Support staff were trained on how to determine if a terminated employee still has STAR Finance access and how to lock the user account to remove access. We recently determined that this transition was not fully implemented after the training was conducted. This has been immediately rectified.

It was determined that STAR HCM access should not transfer to DTS Security Support staff. Only a STAR HCM authority can submit an access change. Currently the Human Resources (HR) Assistant Director is the person who manages the STAR HCM access. With the transition of HR staff to the Department of Administration’s Division of Personnel Management (DPM), there are currently only five Department of Revenue employees with access to STAR HCM. These employees have either budget, payroll/finance reconciliation or other personnel file responsibilities.

  - By April 27, 2018, DTS Security will have procedures in place for adding & changing roles for employees in STAR Finance and STAR HCM.

On April 19, 2018, documentation of a new process for adding and changing roles for employees in STAR Finance was completed. It was determined that transferring responsibility to DTS Security Support for adding and changing STAR Finance roles has many steps to implement and not all actions will be performed by DTS Security Support. DTS Security Support has updated its agency-wide computer system access form to include the ability to add and change roles for STAR Finance access. Procedures for DTS Security Support must be developed and training provided. This was delayed due to extended intermittent leave of the DOR Financial Manager. This is now scheduled for transition on October 31, 2018. In the interim, the Financial Manager has continued to add and change roles in STAR Finance.
See description on the first bullet regarding STAR HCM. No longer applicable.

- The Security Support Unit in the Division of Technology Services (DTS) conducts periodic review of agency system accesses to ensure former employees have had their system accesses removed. STAR HCM and STAR Finance will be added to the list of systems for this periodic review by March 31, 2018.

On February 21, 2018, the Just-Do-It Improvement Project Report identified that a quarterly reconciliation of the STAR Finance access will be conducted to check for any terminated employees still having access to STAR Finance. A reconciliation of the STAR Finance access to the STAR HCM Authorized Position Report was performed on April 3, 2018 and July 19, by the Financial Manager. There were no terminated employees identified that still had access to STAR Finance. A process will be developed for removing User Id's that are no longer applicable due to new User Id's being assigned for employee name changes. STAR Support assistance will be requested to explain why contractors are continually having their STAR Finance access restored, even after DOR has previously locked the contractors’ user account to remove access. Once these outstanding issues are resolved, the quarterly reconciliation will be transferred to DTS Security Support.

For STAR HCM, this is now a DPM responsibility. The Human Resources Assistant Director conducts periodic reviews of access.

Person responsible for corrective action: Pat Lashore, Administrator
Division or Unit: Enterprise Services Division
Email address: patricia.lashore@wisconsin.gov
Status of Prior Year Audit Findings

Finding: Financial Reporting for Capital Assets at the Department of Transportation (2017-008)

Federal Program: n/a

Status of Audit Finding: Partially Corrected

Corrective Actions:
- We have updated the infrastructure CAFR reporting instructions and submitted by 5/31/18.
- Staff involved in the reporting went through an understanding and overview process with the department’s LEAN project specialist.
- A secondary review process has been added to the instructions.

Additional automation is undergoing and will be tested after data is available.

Person responsible for corrective action:
Julie Zheng – Advanced Accountant (Employed through 7/17/18)
Bryan Thiel – Financial Management Supervisor
Division of Business Management, Bureau of Financial Management
Bryan.Thiel@dot.wi.gov

Finding: Department of Transportation Use of Project Costing Data (2017-009)

Federal Program: n/a

Status of Audit Finding: Partially Corrected

Corrective Action:
- Monthly Project Costing (PC) to General Ledger (GL) reconciliations have been performed for all months with reconciling items corrected or recorded and tracked.
- Cumulative analysis has been used to identify reconciliation items due to timing differences.
- Analysis is being performed to ensure all transactions generated by PC are posted to the correct target appropriations.

Financial reporting will be from the ACTUALS ledger in STAR reflecting the GL balances.

Person responsible for corrective action:
Sarah Jones – Advanced Accountant GAAP Specialist
Bryan Thiel – Financial Management Supervisor
Division of Business Management, Bureau of Financial Management
SarahE.Jones@dot.wi.gov / Bryan.Thiel@dot.wi.gov
August 23, 2018

Finding: Information Technology Controls at the University of Wisconsin System
(2017-003, 2016-12 and 2015-030)

Federal Program: Student Financial Assistance Cluster

Status of Audit Finding as of 6/30/2018: Partially Corrected

This document explains the June 30, 2018 status of the University of Wisconsin System’s Corrective Action Plan (CAP) for finding 2017-003: Information Technology Controls at the University of Wisconsin System within Fiscal Year 2016-17 Single Audit Report 18-5. The following bullets are from UW System’s CAP; actions to date are indicated below each bullet.

- Develop a UW System Information Security Program document, accompanied by a 12-month work plan.

A UW System Information Security Program document, accompanied by a 24-month work plan was published and distributed on April 30, 2018. The comprehensive nature of the workplan demanded a 24-month timeline vice 12-month.

A separate Office of Information Security has been established who reports to the Vice President for Administration to provide systemwide focus for this critical mission area.

- Create additional systemwide, NIST-based information security policies to support the Information Security Program. Include in the 12-month work plan the next set of policies to be developed

Nine additional systemwide, NIST-based information security policies, accompanied by 12 procedures documents are drafted. A prioritized, phased implementation schedule has been developed and includes policy vetting, feedback/governance mechanisms and publishing in accordance with the 24-month work plan.
• Develop documentation which provides comprehensive guidance to all UW institutions on suggested methods to implement information security policies and procedures.

The Information Security Program document provides comprehensive guidance to institutions. Additionally, working groups, expertise aligned to NIST-based control areas, have been formed to provide additional guidance and clarity on policy and procedure implementation, methodologies and best practices.

• Conduct monthly reviews, during which UW System institutions will share best practices, identify ways to most effectively use available resources, as well as receive guidance from UW System on resources which can be used to implement policies.

Routine engagements and reviews are on-going with institutions’ security professionals as well as Chief Information Officers (CIOs) to discuss and assist with resource constraints and challenges to implementation.

• Engage monthly with the UW System institutions, advising them of potential ways to address audit recommendations and confirming progress as planned. Lead in aligning resources with institution priorities to address audit recommendations.

Monthly meetings via the Technology and Information Security Council (TISC) and bi-monthly meetings with the Information Assurance Council (IAC) are held to review progress of corrective actions regarding institution-specific LAB findings as well as Internal Audit findings, status/progress is confirmed, and challenges and assistance needed, if applicable.

• Complete external UW System Information Security Assessment to establish a baseline for assessing the level of protection provided for systems and data.

An external UW System Information Security Assessment was conducted to establish a baseline for assessing the level of protection provided for systems and data. This effort was completed on March 30, 2018.

• Use results of external Information Security Assessment to establish an order of priority in which to address deficiencies of data and systems protection, across UW System institutions and consistent with the Information Security Program.

The results of the above security assessment, along with results of several penetration test events formed the basis of the 24-month work plan. The action items within the work plan have been prioritized based on highest information security risks that exist within the UW System environment.
• **Provide an advanced General Data Protection Regulation readiness assessment to assist UW System institutions with awareness of the regulations; actions to comply with the regulations; and assessments to monitor progress.**

An external General Data Protection Regulation readiness assessment has been conducted. The resulting report is intended to assist UW System institutions with awareness of the regulation; actions to comply with the regulation; and assessments to monitor progress. Feedback and implementation actions will be discussed and provided to all institutions. Anticipated receipt of report date: September 1, 2018.

• **Establish an ongoing program to assess the level of protection provided for UW systems and data.**

Additional external assessments and penetration tests are being scheduled for several institutions in calendar year 2019. These will be scheduled and prioritized following completion of internal and external audits conducted through Fall 2018 as part of an ongoing program to assess the level of protection provided for UW systems and data.

**Person Responsible for Corrective Action:**
Katherine Mayer  
Associate Vice President for Information Security  
kmayer@uwsa.edu
State of Wisconsin Schedule of Expenditures of Federal Awards for the Year Ended June 30, 2018
### U.S. DEPARTMENT OF AGRICULTURE:

<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<td>Team Nutrition Grants</td>
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# STATE OF WISCONSIN
## SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
### FOR THE YEAR ENDED JUNE 30, 2018

<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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The accompanying notes are an integral part of this schedule.
## INDIVIDUAL PROGRAMS AND OTHER CLUSTERS

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### TOTAL U.S. DEPARTMENT OF AGRICULTURE:

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**INDIVIDUAL PROGRAMS AND OTHER CLUSTERS**

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<td>Habitat Conservation</td>
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<td>11.473</td>
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<td>11.549</td>
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<td>State and Local Implementation Grant Program</td>
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<td>104,813</td>
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<tr>
<td>11.611</td>
<td></td>
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<tr>
<td>11.999</td>
<td></td>
<td>Marine Debris Program</td>
<td>UW-Madison</td>
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**Subtotal Direct Programs:**

<table>
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<tr>
<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>N/A 11.IPA Interagency Personnel Agreement</td>
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<td>61,399</td>
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<tr>
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<td>N/A 11.IPA Interagency Personnel Agreement</td>
<td>UW-Madison</td>
<td>(9,835)</td>
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**Subtotal Direct Programs:**

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<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<tbody>
<tr>
<td>11.008</td>
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<td>NOAA Mission-Related Education Awards</td>
<td>UW-Milwaukee</td>
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<tr>
<td>11.012</td>
<td></td>
<td>Integrated Ocean Observing System (IOOS)</td>
<td>UW-Madison</td>
<td>102,904</td>
<td>71,897</td>
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<tr>
<td>11.012</td>
<td></td>
<td>Integrated Ocean Observing System (IOOS)</td>
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<tr>
<td>11.419</td>
<td></td>
<td>Coastal Zone Management Awards</td>
<td>UW-Extension</td>
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</tr>
<tr>
<td>11.432</td>
<td></td>
<td>National Oceanic and Atmospheric Administration (NOAA)</td>
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<tr>
<td>11.432</td>
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<td>National Oceanic and Atmospheric Administration (NOAA)</td>
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<tr>
<td>11.611</td>
<td></td>
<td>Manufacturing Extension Partnership</td>
<td>UW-Stout</td>
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<td></td>
<td></td>
<td></td>
<td>Subtotal Subgrants</td>
<td>777,308</td>
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**TOTAL U.S. DEPARTMENT OF COMMERCE:**

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<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<tbody>
<tr>
<td></td>
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<td></td>
<td>Total Federal Program</td>
<td>5,729,001</td>
<td>1,898,257</td>
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The accompanying notes are an integral part of this schedule.
<table>
<thead>
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<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<tbody>
<tr>
<td>12.420</td>
<td>SR00002886</td>
<td>Military Medical Research and Development (from Johns Hopkins University)</td>
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<td>12.431</td>
<td>504119-70850</td>
<td>Basic Scientific Research (from Northeastern University)</td>
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<td>12.431</td>
<td>60768-Z0878202</td>
<td>Basic Scientific Research (from University of Maryland)</td>
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<tr>
<td>12.550</td>
<td>0054-UWI-20</td>
<td>The Language Flagship Grants to Institutions of Higher Education (from Institute of International Education)</td>
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<td>49,699</td>
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<tr>
<td>12.550</td>
<td>0054-UWI-20-LR-280-P06</td>
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<tr>
<td>12.550</td>
<td>2017-18 Student Support</td>
<td>The Language Flagship Grants to Institutions of Higher Education (from Institute of International Education)</td>
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<td>119,314</td>
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<tr>
<td>12.550</td>
<td>Flagship Culture Initiative</td>
<td>The Language Flagship Grants to Institutions of Higher Education (from University of Maryland)</td>
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<td>12.550</td>
<td>IFLI Planning 2017</td>
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<td>12.550</td>
<td>IFLI Planning 2018</td>
<td>The Language Flagship Grants to Institutions of Higher Education (from Institute of International Education)</td>
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<tr>
<td>12.550</td>
<td>Russian Flagship Renew YR02</td>
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<tr>
<td>12.550</td>
<td>Russian Flagship Renew YR03</td>
<td>The Language Flagship Grants to Institutions of Higher Education (from Institute of International Education)</td>
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<tr>
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<tr>
<td>12.617</td>
<td>ST1564-16-01</td>
<td>Economic Adjustment Assistance for State Governments (from City of Oshkosh)</td>
<td>UW-Oshkosh</td>
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<tr>
<td>12.617</td>
<td>ST1564-16-01</td>
<td>Economic Adjustment Assistance for State Governments (from East Central Wisconsin Regional Planning Commission)</td>
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<tr>
<td>12.910</td>
<td>401373-5801</td>
<td>Research and Technology Development (from Colorado School of Mines)</td>
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<tr>
<td></td>
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<tr>
<td></td>
<td></td>
<td>TOTAL U.S. DEPARTMENT OF DEFENSE</td>
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<td>227,093</td>
</tr>
</tbody>
</table>

**U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT:**

14.228 Community Development Block Grants/State's Program and Non-Entitlement Grants in Hawaii | DOA | 19,566,193 | 18,848,763 |
14.231 Emergency Solutions Grant Program | DOA | 3,509,880 | 3,367,781 |
14.238 Shelter Plus Care | DOA | 221,376 | 221,376 |
14.239 HOME Investment Partnerships Program | DOA | 10,539,434 | 9,740,195 |
14.241 Housing Opportunities for Persons with Aids | DOA | 624,259 | 612,803 |
|                           | Subtotal Direct Programs |                           | 34,461,142 | 32,790,918 |
|                           | Subgrants:               | Community Development Block Grants/Entitlement Grants (from Waukesha County) | UW-Extension | 12,560 | 0 |
| 14.218                   |                           | Community Development Block Grants/Special Purpose Grants/Insular Areas (from City of La Crosse) | UW-La Crosse | 10,000 | 0 |
|                           |                           | Subtotal Subgrants |                           | 22,560 | 0 |
|                           | TOTAL U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT |                           | 34,483,702 | 32,790,918 |

**U.S. DEPARTMENT OF INTERIOR:**

15.020 Aid to Tribal Governments (from UW-Madison) | UW-Extension | 8,378 | 0 |
15.035 Forestry on Indian Lands | DNR | 59,523 | 0 |
15.226 Payments in Lieu of Taxes | DNR | 3,654,986 | 3,654,986 |
| Fish and Wildlife Cluster: |                           |                           |                           |                           |
15.605 Sport Fish Restoration Program | DNR | 10,036,991 | 152,049 |
15.611 Wildlife Restoration and Basic Hunter Education | DNR | 18,233,186 | 126,275 |
| Total Fish and Wildlife Cluster |                           | 28,270,177 | 278,324 |
| Fish and Wildlife Management Assistance | DNR | 111,276 | 0 |
15.614 Coastal Wetlands Planning, Protection and Restoration Program | DNR | 293,010 | 285,511 |
15.615 Cooperative Endangered Species Conservation Fund | DNR | 159,349 | 0 |
15.616 Clean Vessel Act | DNR | 124,574 | 76,596 |
15.623 North American Wetlands Conservation Fund | DNR | 97,095 | 0 |
15.630 Coastal | UW-Madison | 1,040 | 0 |
15.634 State Wildlife Grants | DNR | 1,475,772 | 46,443 |

The accompanying notes are an integral part of this schedule.
### STATE OF WISCONSIN

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**

**FOR THE YEAR ENDED JUNE 30, 2018**

<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<tbody>
<tr>
<td>15.657</td>
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<td>Endangered Species Conservation Recovery Implementation</td>
<td>DNR</td>
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<td>Endangered Species Conservation-Wolf Livestock Loss Compensation and Prevention</td>
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<td>Adaptive Science</td>
<td>UW-Oshkosh</td>
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<td>15.808</td>
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<td>U.S. Geological Survey- Research and Data Collection</td>
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<td>15.810</td>
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<td>National Cooperative Geologic Mapping</td>
<td>UW-Extension</td>
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<td>15.814</td>
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<td>National Geological &amp; Geophysical Data Preservation</td>
<td>UW-Extension</td>
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<td>National Geospatial Program: Building the National Map</td>
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<td>577,521</td>
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<td>15.904</td>
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<td>Historic Preservation Fund Grants-In-Aid</td>
<td>WHS</td>
<td>905,442</td>
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<tr>
<td>15.916</td>
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<td>Outdoor Recreation-Acquisition, Development and Planning</td>
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<td>1,153,344</td>
<td>946,664</td>
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<tr>
<td>15.922</td>
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<td>North American Graves Protection and Repatriation Act</td>
<td>WHS</td>
<td>10,626</td>
<td>0</td>
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<td>15.922</td>
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<td>North American Graves Protection and Repatriation Act</td>
<td>UW-Madison</td>
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<tr>
<td>15.925</td>
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<td>National Maritime Heritage Grants Program</td>
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<td>15.945</td>
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<td>Cooperative Research and Training Programs Resources of the National Park System</td>
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<td>15.978</td>
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<td>Upper Mississippi River System Long Term Resource Monitoring Program</td>
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<td>15.980</td>
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<td>National Ground-Water Monitoring Network</td>
<td>UW-Extension</td>
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<td></td>
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<td>39,774,556</td>
<td>6,013,646</td>
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<td></td>
<td></td>
<td>Subgrants:</td>
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<tr>
<td>15.020</td>
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<td>Aid to Tribal Governments</td>
<td>UW-Madison</td>
<td>11,332</td>
<td>0</td>
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<tr>
<td></td>
<td></td>
<td>(from Red Cliff Band of Lake Superior Chippewa)</td>
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<tr>
<td>15.662</td>
<td>0501.14.044507</td>
<td>Great Lakes Restoration</td>
<td>UW-Milwaukee</td>
<td>34,265</td>
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<tr>
<td></td>
<td></td>
<td>(from National Fish &amp; Wildlife Foundation)</td>
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<td>15.662</td>
<td>56218</td>
<td>Great Lakes Restoration</td>
<td>UW-Parkside</td>
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<td></td>
<td></td>
<td>(from National Fish &amp; Wildlife Foundation)</td>
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<tr>
<td>15.662</td>
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<td>Great Lakes Restoration</td>
<td>UW-Green Bay</td>
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<td></td>
<td></td>
<td>(from National Fish &amp; Wildlife Foundation)</td>
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<tr>
<td>15.805</td>
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<td>Assistance to State Water Resources Research Institutes</td>
<td>UW-Madison</td>
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<tr>
<td></td>
<td></td>
<td>(from University of Illinois-Urbana-Champaign)</td>
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<tr>
<td>15.820</td>
<td>12-007036</td>
<td>National Climate Change and Wildlife Science Center</td>
<td>UW-Madison</td>
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<tr>
<td></td>
<td></td>
<td>(from University of Massachusetts-Amherst)</td>
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<tr>
<td>N/A</td>
<td>15.AGMT 01/10/18</td>
<td>In-depth Examination of Opioid Deaths in Milwaukee County</td>
<td>UW-Milwaukee</td>
<td>61,992</td>
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<td></td>
<td></td>
<td>(from Milwaukee County)</td>
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<td>39,943,739</td>
<td>6,013,646</td>
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</tbody>
</table>

**U.S. DEPARTMENT OF JUSTICE:**

| 16.000      | State Forfeiture Sharing | DOJ | 200,719 | 0 |
| 16.017      | Sexual Assault Services Formula Program | DOJ | 329,348 | 305,653 |
| 16.523      | Juvenile Accountability Block Grants | DOJ | 56,124 | 42,389 |
| 16.540      | Juvenile Justice and Delinquency Prevention-Allocation to States | DOJ | 10,189 | 10,189 |
| 16.543      | Missing Children's Assistance | DOJ | 346,337 | 94,692 |
| 16.550      | State Justice Statistics Program for Statistical Analysis Centers | DOJ | 14,677 | 0 |
| 16.554      | National Criminal History Improvement Program (NCHIP) | DOJ | 117,176 | 98,078 |
| 16.571      | Public Safety Officers' Benefits Program | DOJ | 211,749 | 0 |
| 16.575      | Crime Victim Assistance | DOJ | 26,883,632 | 25,847,856 |
| 16.576      | Crime Victim Compensation | DOJ | 1,465,498 | 1,387,882 |
| 16.579      | Edward Byrne Memorial Justice Assistance Grant Program | UW-Stout | 779 | 0 |
| 16.582      | Crime Victim Assistance/Discretionary Grants | DOJ | 102,488 | 89,683 |
| 16.585      | Drug Court Discretionary Grant | DOJ | 55,111 | 2,889 |
| 16.588      | Violence Against Women Formula Grant | DOJ | 2,226,386 | 1,709,716 |
| 16.590      | Grants to Encourage Arrest Policies and Enforcement of Protection Orders Program | DOJ | 235,324 | 93,390 |
| 16.593      | Residential Substance Abuse Treatment for State Prisoners | DOJ | 268,470 | 255,116 |
| 16.609      | Project Safe Neighborhoods | DOJ | 143,938 | 132,211 |

The accompanying notes are an integral part of this schedule.
## STATE OF WISCONSIN

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**

**FOR THE YEAR ENDED JUNE 30, 2018**

<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<td>Public Safety Partnership and Community Policing</td>
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<td>Public Safety Partnership and Community Policing Grants</td>
<td>UW-Madison</td>
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**Total Federal Program 16.710**

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<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<td>National Crime Statistics Exchange</td>
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<td>PREA Program: Demonstration Projects to Establish &quot;Zero Tolerance&quot; Cultures for Sexual Assault in Correctional Facilities</td>
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<td>Paul Coverdell Forensic Sciences Improvement Grant Program</td>
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<td>Support for Adam Walsh Act Implementation Grant Program</td>
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<td>16.751</td>
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<td>Edward Byrne Memorial Competitive Grant Program</td>
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<td>Harold Rogers Prescription Drug Monitoring Program</td>
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**Total Federal Program 16.812**

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<td>NICS Act Record Improvement Program</td>
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<td>16.820</td>
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<td>Equitable Sharing Program (Counter Drug) NEW</td>
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**Subtotal Direct Programs**

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<td>16.582</td>
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<td>Crime Victim Assistance/Discretionary Grants</td>
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<td>Juvenile Mentoring Program (from National 4-H Council)</td>
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**Subtotal Subgrants**

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**TOTAL U.S. DEPARTMENT OF JUSTICE**

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**Employment Service Cluster:**

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**Total Employment Service Cluster**

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**Total WIA Cluster**

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<tr>
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**H-1B Job Training Grants**

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**Trade Adjustment Assistance**

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**WIOA Cluster:**

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**Total WIA Cluster**

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<tr>
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The accompanying notes are an integral part of this schedule.
### INDIVIDUAL PROGRAMS AND OTHER CLUSTERS

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<td>Temporary Labor Certification for Foreign Workers</td>
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<td>Apprenticeship USA Grants</td>
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*The accompanying notes are an integral part of this schedule.*
### STATE OF WISCONSIN
### SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
### FOR THE YEAR ENDED JUNE 30, 2018

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<th>STATE AGENCY OR UW INSTITUTION</th>
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The accompanying notes are an integral part of this schedule.
### INDIVIDUAL PROGRAMS AND OTHER CLUSTERS

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### U.S. SMALL BUSINESS ADMINISTRATION:

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The accompanying notes are an integral part of this schedule.
### INDIVIDUAL PROGRAMS AND OTHER CLUSTERS

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The accompanying notes are an integral part of this schedule.
## INDIVIDUAL PROGRAMS AND OTHER CLUSTERS

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The accompanying notes are an integral part of this schedule.
## STATE OF WISCONSIN

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**

**FOR THE YEAR ENDED JUNE 30, 2018**

### Table: INDIVIDUAL PROGRAMS AND OTHER CLUSTERS

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The accompanying notes are an integral part of this schedule.
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<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<td>UW-Milwaukee</td>
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### Individual Programs and Other Clusters

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<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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Subtotal Direct Programs | 849,295,289 | 513,953,354 |

Subgrants:

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<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<tr>
<td>84.004</td>
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<td>Civil Rights Training and Advisory Services (also known as Equity Assistance Centers) (from Indiana University)</td>
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<td>UW-River Falls</td>
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The accompanying notes are an integral part of this schedule.
### U.S. DEPARTMENT OF EDUCATION

**CFDA NUMBER** | **FEDERAL PROGRAM** | **STATE AGENCY OR UW INSTITUTION** | **EXPENDITURES** | **AMOUNT PROVIDED TO SUBRECIPIENTS**
--- | --- | --- | --- | ---
84.206 | CR035930 / C027321 | Javits Gifted and Talented Students Education (from Milwaukee Public Schools) | UW-Madison | 3,455 | 0
84.264 | VRTAC-TC | Rehabilitation Training Technical Assistance Centers (from Southern University and A&M College) | UW-Stout | 604,183 | 305,778
84.295 | 34637-EDU | Ready-to-Learn Television (from Corporation for Public Broadcasting) | UW-Extension | 5,000 | 0
84.334 | C018353 | Gaining Early Awareness and Readiness for Undergraduate Programs (from Milwaukee Public Schools) | UW-Milwaukee | 12,493 | 0
84.334 | C021600 | Gaining Early Awareness and Readiness for Undergraduate Programs (from Milwaukee Public Schools) | UW-Milwaukee | 19,178 | 0
84.334 | C023948 | Gaining Early Awareness and Readiness for Undergraduate Programs (from Milwaukee Public Schools) | UW-Milwaukee | 258,502 | 0
84.334 | C023962/C021603/D01893/019007 | Gaining Early Awareness and Readiness for Undergraduate Programs (from Milwaukee Public Schools) | UW-Milwaukee | 161,972 | 0
84.367 | 08-WI04-SEED2016 | Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants) (from National Writing Project) | UW-Milwaukee | 5,100 | 0
84.367 | 92-WI103-SEED2017-DRWPAI | Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants) (from National Writing Project) | UW-Oshkosh | 3,071 | 0
84.367 | NWP Seed Stipends | Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants) (from National Writing Project) | UW-Milwaukee | 3,045 | 0
84.411 | 11-WI05-2017/3AI | Investing in Innovation (i3) Fund (from National Writing Project) | UW-Madison | 20,425 | 0
84.411 | 11-WI05-2018/3C3WP | Investing in Innovation (i3) Fund (from National Writing Project) | UW-Madison | 904 | 0
84.411 | | Investing in Innovation (i3) Fund (from Boys & Girls Clubs of Greater Milwaukee) | UW-Milwaukee | 2,911 | 0
84.418 | | Promoting Readiness of Minors in Supplemental Security Income (from Employment Resources Inc) | UW-Stout | 2,163 | 0
N/A | 84.367D | Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants) (from National Writing Project) | UW-Milwaukee | 15,977 | 0
N/A | 84.367D | Supporting Effective Instruction State Grants (formerly Improving Teacher Quality State Grants) (from National Writing Project) | UW-Madison | 28,444 | 0

**Total Subgrants** | | | | 1,284,029 | 305,778

**TOTAL U.S. DEPARTMENT OF EDUCATION** | | | | 650,579,318 | 514,259,132

### U.S. CONSUMER PRODUCT SAFETY COMMISSION

**CFDA NUMBER** | **FEDERAL PROGRAM** | **STATE AGENCY OR UW INSTITUTION** | **EXPENDITURES** | **AMOUNT PROVIDED TO SUBRECIPIENTS**
--- | --- | --- | --- | ---
84.303 | 87.0617431 | State and Local Cooperative Contracts Program | DATCP | 8,300 | 0

**Subtotal Direct Programs** | | | | 8,300 | 0

**TOTAL U.S. CONSUMER PRODUCT SAFETY COMMISSION** | | | | 8,300 | 0

### NATIONAL ARCHIVES AND RECORDS ADMINISTRATION

**CFDA NUMBER** | **FEDERAL PROGRAM** | **STATE AGENCY OR UW INSTITUTION** | **EXPENDITURES** | **AMOUNT PROVIDED TO SUBRECIPIENTS**
--- | --- | --- | --- | ---
89.003 | National Historical Publications and Records Grants | WHS | 52,495 | 0

**Subtotal Direct Programs** | | | | 52,495 | 0

**TOTAL ARCHIVES AND RECORDS ADMINISTRATION** | | | | 52,495 | 0

### U.S. ELECTION ASSISTANCE COMMISSION

**CFDA NUMBER** | **FEDERAL PROGRAM** | **STATE AGENCY OR UW INSTITUTION** | **EXPENDITURES** | **AMOUNT PROVIDED TO SUBRECIPIENTS**
--- | --- | --- | --- | ---
90.401 | H251 | Help America Vote Act Requirements Payments | Elections | 1,701,960 | 0
90.404 | ELEC SEC | 2018 HAVA Election Security Grants | Elections | 24,463 | 0

**Subtotal Direct Programs** | | | | 1,726,423 | 0

**TOTAL U.S. ELECTION ASSISTANCE COMMISSION** | | | | 1,726,423 | 0

### U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

**CFDA NUMBER** | **FEDERAL PROGRAM** | **STATE AGENCY OR UW INSTITUTION** | **EXPENDITURES** | **AMOUNT PROVIDED TO SUBRECIPIENTS**
--- | --- | --- | --- | ---
93.041 | Special Programs for the Aging-Title VII, Chapter 3-Programs for Prevention of Elder Abuse, Neglect, and Exploitation | DHS | 124,942 | 0
93.042 | Special Programs for the Aging-Title VII, Chapter 2-Long Term Care Ombudsman Services for Older Individuals | DHS | 202,912 | 0
93.043 | Special Programs for the Aging-Title III, Part D-Disease Prevention and Health Promotion Services | DHS | 366,564 | 0

**Aging Cluster:**

93.044 | Special Programs for the Aging-Title III, Part B-Grants for Supportive Services and Senior Centers | DHS | 6,751,355 | 6,429,086
93.045 | Special Programs for the Aging-Title III, Part C-Nutrition Services | DHS | 11,734,408 | 11,120,795
93.053 | Nutrition Services Incentive Program | DHS | 2,702,729 | 2,702,729

**Total Aging Cluster** | | | | 21,188,492 | 20,252,810

The accompanying notes are an integral part of this schedule.
### STATE OF WISCONSIN

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**

**FOR THE YEAR ENDED JUNE 30, 2018**

<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>93.048</td>
<td></td>
<td>Special Programs for the Aging, Title IV, and Title II, Discretionary Projects</td>
<td>DHS</td>
<td>248,121</td>
<td>232,571</td>
</tr>
<tr>
<td>93.051</td>
<td></td>
<td>Alzheimer's Disease Demonstration Grants To States</td>
<td>DHS</td>
<td>176,863</td>
<td>172,294</td>
</tr>
<tr>
<td>93.052</td>
<td></td>
<td>National Family Caregiver Support, Title III, Part E</td>
<td>DHS</td>
<td>2,599,329</td>
<td>2,468,319</td>
</tr>
<tr>
<td>93.069</td>
<td></td>
<td>Public Health Emergency Preparedness</td>
<td>DHS</td>
<td>76,994</td>
<td>73,361</td>
</tr>
<tr>
<td>93.070</td>
<td></td>
<td>Environmental Public Health and Emergency Response</td>
<td>DHS</td>
<td>1,825,015</td>
<td>999,094</td>
</tr>
<tr>
<td>93.071</td>
<td></td>
<td>Medicare Enrollment Assistance Program</td>
<td>DHS</td>
<td>386,030</td>
<td>337,793</td>
</tr>
<tr>
<td>93.073</td>
<td></td>
<td>Birth Defects and Developmental Disabilities - Prevention and Surveillance</td>
<td>DHS</td>
<td>86,773</td>
<td>86,083</td>
</tr>
<tr>
<td>93.073</td>
<td></td>
<td>Birth Defects and Developmental Disabilities - Prevention and Surveillance</td>
<td>UW-Madison</td>
<td>892,867</td>
<td>33,087</td>
</tr>
</tbody>
</table>

**Total Federal Program 93.073**

979,640 119,170

| 93.074      |                          | Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements | DPI | 420,885 | 114,217 |
| 93.079      |                          | MOU Cooperative Agreements to Promote Adolescent Health through School-Based HIV/STD Prevention and School-Based Surveillance | DPI | 1,575,931 | 0 |

**Total Federal Program 93.079**

595,173 591,740

| 93.107      |                          | Maternal and Child Health Federal Consolidated Programs | UW-Madison | 1,456,069 | 72,467 |

**Total Federal Program 93.107**

1,905,716 187,009

| 93.113      |                          | Environmental Health | UW-Madison | 509,792 | 0 |
| 93.116      |                          | Project Grants and Cooperative Agreements for Tuberculosis Control Programs | DHS | 622,417 | 162,084 |
| 93.127      |                          | Emergency Medical Services for Children | DHS | 144,827 | 144,827 |
| 93.130      |                          | Cooperative Agreements to States/Territories for the Coordination and Development of Primary Care Offices | DHS | 154,146 | 60,000 |
| 93.136      |                          | Injury Prevention and Control Research and State and Community Based Programs | DHS | 3,694,256 | 2,654,919 |

**Total Federal Program 93.136**

589,990 588,721

| 93.155      |                          | Projects for Assistance in Transition from Homelessness (PATH) | DOA | (196) | (3,690) |

**Total Federal Program 93.150**

589,794 585,031

| 93.161      |                          | Health Program for Toxic Substances and Disease Registry | DHS | 312,933 | 247,738 |
| 93.165      |                          | Grants to States for Loan Repayment Program | UW-Madison | 300,001 | 0 |
| 93.172      |                          | Human Genome Research | UW-Madison | 767,244 | 0 |
| 93.173      |                          | Research Related to Deafness and Communication Disorders | UW-Madison | 751,778 | 0 |
| 93.186      |                          | National Research Service Award in Primary Care Medicine | UW-Madison | 338,254 | 0 |
| 93.213      |                          | Research and Training in Complementary and Integrative Health | UW-Madison | 107,163 | 0 |
| 93.226      |                          | Research on Healthcare Costs, Quality and Outcomes | UW-Madison | (1,850) | 0 |
| 93.235      |                          | Affordable Care Act (ACA) Abstinence Education Program | DCF | 1,011,578 | 1,005,754 |
| 93.236      |                          | Grants to States to Support Oral Health Workforce Activities | DHS | 481,146 | 358,311 |
| 93.240      |                          | State Capacity Building | DHS | 359,839 | 18,837 |
| 93.241      |                          | State Rural Hospital Flexibility Program | UW-Madison | 612,652 | 185,704 |
| 93.242      |                          | Mental Health Research Grants | UW-Madison | 589,306 | 0 |
| 93.243      |                          | Substance Abuse and Mental Health Services Projects of Regional and National Significance | DCF | 30,691 | 16,302 |
| 93.243      |                          | Substance Abuse and Mental Health Services Projects of Regional and National Significance | DSPS | 94,277 | 0 |

The accompanying notes are an integral part of this schedule.
### STATE OF WISCONSIN

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**
**FOR THE YEAR ENDED JUNE 30, 2018**

<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>93.243</td>
<td></td>
<td>Substance Abuse and Mental Health Services Projects of Regional and National Significance</td>
<td>DPI</td>
<td>3,536,931</td>
<td>1,944,910</td>
</tr>
<tr>
<td>93.243</td>
<td></td>
<td>Substance Abuse and Mental Health Services Projects of Regional and National Significance</td>
<td>DHS</td>
<td>6,879,243</td>
<td>6,156,851</td>
</tr>
<tr>
<td>93.243</td>
<td></td>
<td>Substance Abuse and Mental Health Services Projects of Regional and National Significance</td>
<td>UW-Milwaukee</td>
<td>44,251</td>
<td>0</td>
</tr>
<tr>
<td>93.243</td>
<td></td>
<td>Substance Abuse and Mental Health Services Projects of Regional and National Significance</td>
<td>UW-Whitewater</td>
<td>174,979</td>
<td>0</td>
</tr>
<tr>
<td>93.243</td>
<td></td>
<td>Substance Abuse and Mental Health Services Projects of Regional and National Significance</td>
<td>UW-Madison</td>
<td>930,195</td>
<td>228,917</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Total Federal Program 93.243</strong></td>
<td></td>
<td><strong>11,690,567</strong></td>
<td><strong>8,346,980</strong></td>
</tr>
<tr>
<td>93.251</td>
<td></td>
<td>Universal Newborn Hearing Screening</td>
<td>DHS</td>
<td>217,272</td>
<td>210,119</td>
</tr>
<tr>
<td>93.262</td>
<td></td>
<td>Occupational Safety and Health Program</td>
<td>DHS</td>
<td>150,362</td>
<td>0</td>
</tr>
<tr>
<td>93.262</td>
<td></td>
<td>Occupational Safety and Health Program</td>
<td>UW-Stout</td>
<td>108,834</td>
<td>0</td>
</tr>
<tr>
<td>93.262</td>
<td></td>
<td>Occupational Safety and Health Program</td>
<td>UW-Stout</td>
<td>(37)</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Total Federal Program 93.262</strong></td>
<td></td>
<td><strong>267,159</strong></td>
<td><strong>0</strong></td>
</tr>
<tr>
<td>93.268</td>
<td></td>
<td>Immunization Cooperative Agreements</td>
<td>DHS</td>
<td>49,966,562</td>
<td>49,787</td>
</tr>
<tr>
<td>93.270</td>
<td></td>
<td>Adult Viral Hepatitis Prevention and Control</td>
<td>DHS</td>
<td>143,612</td>
<td>7,600</td>
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<tr>
<td>93.283</td>
<td></td>
<td>Centers for Disease Control and Prevention-Investigations and Technical Assistance</td>
<td>DHS</td>
<td>1,480,203</td>
<td>899,580</td>
</tr>
<tr>
<td>93.283</td>
<td></td>
<td>Centers for Disease Control and Prevention-Investigations and Technical Assistance</td>
<td>UW-Madison</td>
<td>831,959</td>
<td>2,879</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Total Federal Program 93.283</strong></td>
<td></td>
<td><strong>2,312,162</strong></td>
<td><strong>902,459</strong></td>
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<tr>
<td>93.286</td>
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<td>Discovery and Applied Research for Technological Innovations to Improve Human Health</td>
<td>UW-Madison</td>
<td>(22,242)</td>
<td>0</td>
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<tr>
<td>93.296</td>
<td></td>
<td>State Partnership Grant Program to Improve Minority Health</td>
<td>DHS</td>
<td>232,797</td>
<td>197,896</td>
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<td>93.301</td>
<td></td>
<td>Small Rural Hospital Improvement Grant Program</td>
<td>UW-Madison</td>
<td>613,067</td>
<td>300,192</td>
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<td>93.305</td>
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<td>National State Based Tobacco Control Program</td>
<td>DHS</td>
<td>1,115,489</td>
<td>51,096</td>
</tr>
<tr>
<td>93.310</td>
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<td>Trans-NIH Research Support</td>
<td>UW-Madison</td>
<td>5,503</td>
<td>0</td>
</tr>
<tr>
<td>93.314</td>
<td></td>
<td>Early Hearing Detection and Intervention Information Systems (EHDI-IS) Surveillance Program</td>
<td>DHS</td>
<td>281,609</td>
<td>35,563</td>
</tr>
<tr>
<td>93.323</td>
<td></td>
<td>Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)</td>
<td>DATTCP</td>
<td>54,391</td>
<td>0</td>
</tr>
<tr>
<td>93.323</td>
<td></td>
<td>Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)</td>
<td>DHS</td>
<td>5,322,781</td>
<td>2,559,667</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Total Federal Program 93.323</strong></td>
<td></td>
<td><strong>5,377,172</strong></td>
<td><strong>2,559,667</strong></td>
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<tr>
<td>93.324</td>
<td></td>
<td>State Health Insurance Assistance Program</td>
<td>DHS</td>
<td>884,812</td>
<td>870,188</td>
</tr>
<tr>
<td>93.332</td>
<td></td>
<td>Cooperative Agreement to Support Navigators in Federally-facilitated and State Partnership Marketplaces</td>
<td>UW-Madison</td>
<td>732,326</td>
<td>281,351</td>
</tr>
<tr>
<td>93.336</td>
<td></td>
<td>Behavioral Risk Factor Surveillance System</td>
<td>DHS</td>
<td>278,109</td>
<td>267,900</td>
</tr>
<tr>
<td>93.350</td>
<td></td>
<td>National Center for Advancing Translational Sciences</td>
<td>UW-Madison</td>
<td>433,729</td>
<td>0</td>
</tr>
<tr>
<td>93.351</td>
<td></td>
<td>Research Infrastructure Programs</td>
<td>UW-Milwaukee</td>
<td>287,181</td>
<td>19,312</td>
</tr>
<tr>
<td>93.351</td>
<td></td>
<td>Research Infrastructure Programs</td>
<td>UW-Madison</td>
<td>773,800</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Total Federal Program 93.351</strong></td>
<td></td>
<td><strong>1,060,981</strong></td>
<td><strong>19,312</strong></td>
</tr>
<tr>
<td>93.359</td>
<td></td>
<td>Nurse Education, Practice Quality and Retention Grants</td>
<td>UW-Milwaukee</td>
<td>807,928</td>
<td>9,168</td>
</tr>
<tr>
<td>93.361</td>
<td></td>
<td>Nursing Research</td>
<td>UW-Madison</td>
<td>37,325</td>
<td>0</td>
</tr>
<tr>
<td>93.367</td>
<td></td>
<td>Infrastructure Development and Maintenance for State Manufactured Food Regulatory Programs</td>
<td>DATTCP</td>
<td>14,224</td>
<td>0</td>
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<tr>
<td>93.369</td>
<td></td>
<td>ACL Independent Living State Grants</td>
<td>DHS</td>
<td>331,250</td>
<td>331,250</td>
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<tr>
<td>93.393</td>
<td></td>
<td>Cancer Cause and Prevention Research</td>
<td>UW-Madison</td>
<td>8,832</td>
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<tr>
<td>93.395</td>
<td></td>
<td>Cancer Treatment Research</td>
<td>UW-Madison</td>
<td>136,484</td>
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<tr>
<td>93.396</td>
<td></td>
<td>Cancer Biology Research</td>
<td>UW-Madison</td>
<td>3,098</td>
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<tr>
<td>93.397</td>
<td></td>
<td>Cancer Centers Support Grants</td>
<td>UW-Madison</td>
<td>25,753</td>
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</tr>
<tr>
<td>93.398</td>
<td></td>
<td>Cancer Research Manpower</td>
<td>UW-Madison</td>
<td>1,560,873</td>
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<tr>
<td>93.433</td>
<td></td>
<td>ACL National Institute on Disability, Independent Living, and Rehabilitation Research</td>
<td>UW-Milwaukee</td>
<td>51,876</td>
<td>32,620</td>
</tr>
<tr>
<td>93.448</td>
<td></td>
<td>Food Safety and Security Monitoring Project</td>
<td>DATTCP</td>
<td>333,776</td>
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<td>93.448</td>
<td></td>
<td>Food Safety and Security Monitoring Project</td>
<td>UW-Madison</td>
<td>235,545</td>
<td>0</td>
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<tr>
<td></td>
<td></td>
<td><strong>Total Federal Program 93.448</strong></td>
<td></td>
<td><strong>569,321</strong></td>
<td><strong>0</strong></td>
</tr>
</tbody>
</table>

The accompanying notes are an integral part of this schedule.
### State of Wisconsin
### Schedule of Expenditures of Federal Awards
#### For the Year Ended June 30, 2018

**Individual Programs and Other Clusters**

<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>93.449</td>
<td>HHSF223201510145</td>
<td>Medicated Feed Inspections</td>
<td>DATCP</td>
<td>$13,404</td>
<td>0</td>
</tr>
<tr>
<td>93.464</td>
<td></td>
<td>ACL Assistive Technology</td>
<td>DHS</td>
<td>$792,329</td>
<td>667,393</td>
</tr>
<tr>
<td>93.500</td>
<td></td>
<td>Pregnancy Assistance Fund Program</td>
<td>DPI</td>
<td>$1,110,076</td>
<td>931,009</td>
</tr>
<tr>
<td>93.505</td>
<td></td>
<td>Maternal, Infant and Early Childhood Home Visiting Cluster</td>
<td>DCF</td>
<td>(168,178)</td>
<td>(92,489)</td>
</tr>
<tr>
<td>93.505</td>
<td></td>
<td>Childhood Home Visiting Program</td>
<td>DCF</td>
<td>$1,190,901</td>
<td>0</td>
</tr>
<tr>
<td>93.570</td>
<td></td>
<td>Affordable Care Act (ACA) Maternal, Infant, and Early Childhood Home Visiting Program (from UW-Madison)</td>
<td>DCF</td>
<td>$7,178,412</td>
<td>6,785,215</td>
</tr>
<tr>
<td>93.511</td>
<td>93.1 IPRPR120016-01-02</td>
<td>Affordable Care Act (ACA) Grants to States for Health</td>
<td>OCI</td>
<td>$53,492</td>
<td>0</td>
</tr>
<tr>
<td>93.517</td>
<td></td>
<td>Affordable Care Act – Aging and Disability Resource Center</td>
<td>DHS</td>
<td>$678,353</td>
<td>670,199</td>
</tr>
<tr>
<td>93.521</td>
<td></td>
<td>The Affordable Care Act: Building Epidemiology, Laboratory, and Health Information Systems Capacity in the Epidemiology and Laboratory Capacity for Infectious Disease (ELC) and Emerging Infections Program (EIP) Cooperative Agreements; PPHF</td>
<td>DHS</td>
<td>$1,411,975</td>
<td>348,155</td>
</tr>
<tr>
<td>93.539</td>
<td></td>
<td>PPHF Capacity Building Assistance to Strengthen Public Health Immunization Infrastructure and Performance financed in part by Prevention and Public Health Funds</td>
<td>DCF</td>
<td>$3,118,465</td>
<td>1,753,860</td>
</tr>
<tr>
<td>93.556</td>
<td></td>
<td>Promoting Safe and Stable Families</td>
<td>DCF</td>
<td>$5,517,854</td>
<td>4,692,293</td>
</tr>
<tr>
<td>93.558</td>
<td></td>
<td>Temporary Assistance for Needy Families</td>
<td>DCF</td>
<td>218,374,634</td>
<td>15,325,094</td>
</tr>
<tr>
<td>93.563</td>
<td></td>
<td>Child Support Enforcement</td>
<td>DCF</td>
<td>50,231,834</td>
<td>39,810,480</td>
</tr>
<tr>
<td>93.564</td>
<td></td>
<td>Child Support Enforcement Research</td>
<td>DCF</td>
<td>389,274</td>
<td>96,549</td>
</tr>
<tr>
<td>93.566</td>
<td></td>
<td>Refugee and Entrant Assistance-State Administered Programs</td>
<td>DCF</td>
<td>3,280,208</td>
<td>2,500,558</td>
</tr>
<tr>
<td>93.568</td>
<td></td>
<td>Low-Income Home Energy Assistance</td>
<td>DOA</td>
<td>98,511,443</td>
<td>12,084,691</td>
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<td>93.569</td>
<td></td>
<td>Community Services Block Grant</td>
<td>DCF</td>
<td>8,897,180</td>
<td>8,760,782</td>
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<tr>
<td>93.575</td>
<td></td>
<td>Child Care and Development Block Grant</td>
<td>DCF</td>
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<td>18,176,426</td>
</tr>
<tr>
<td>93.596</td>
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<td>Child Care Mandatory and Matching Funds of the Child Care and Development Fund</td>
<td>DCF</td>
<td>47,610,909</td>
<td>18,927,934</td>
</tr>
<tr>
<td>93.584</td>
<td></td>
<td>Refugee and Entrant Assistance-Discretionary Grants</td>
<td>DCF</td>
<td>261,549</td>
<td>0</td>
</tr>
<tr>
<td>93.586</td>
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<td>Refugee and Entrant Assistance-Discretionary Grants</td>
<td>DPI</td>
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<td>Community-Based Child Abuse Prevention Grants</td>
<td>CANPB</td>
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<td>Grants to States for Access and Visitation Programs</td>
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<td>DCF</td>
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<td>Head Start</td>
<td>DPI</td>
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<td>Head Start</td>
<td>UW-Oshkosh</td>
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<td>Adoption and Legal Guardianship Incentive Payments</td>
<td>DCF</td>
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<td>Health Care Innovation Awards (HCIA)</td>
<td>DHS</td>
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<td>Developmental Disabilities Basic Support and Advocacy Grants</td>
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<td>University Centers for Excellence in Developmental Disabilities</td>
<td>UW-Madison</td>
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<td>Children's Justice Grants to States</td>
<td>DOJ</td>
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<td>Stephanie Tubbs Jones Child Welfare Services Program</td>
<td>DCF</td>
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<td>Foster Care-Title IV-E</td>
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<td>Foster Care-Title IV-E (from UW-Green Bay)</td>
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<td>Adoption Assistance</td>
<td>DCF</td>
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<td>Child Abuse and Neglect State Grants</td>
<td>DCF</td>
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<td>87,603</td>
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The accompanying notes are an integral part of this schedule.
### STATE OF WISCONSIN
### SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
### FOR THE YEAR ENDED JUNE 30, 2018

<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<td>Child Abuse and Neglect Discretionary Activities</td>
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<td>Capacity Building Assistance to Strengthen Public Health Immunization Infrastructure and Performance – financed in part by the Prevention and Public Health Fund (PPHF)</td>
<td>DHS</td>
<td>638,505</td>
<td>292,422</td>
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<td>State Public Health Approaches for Ensuring Quitline Capacity – Funded in part by Prevention and Public Health Funds (PPHF)</td>
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<td>315,136</td>
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<td>93.753</td>
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<td>Childhood Lead Poisoning Prevention Surveillance financed in part by Prevention and Public Health (PPHF) Program</td>
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<td>422,091</td>
<td>210,095</td>
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<td>State and Local Public Health Actions to Prevent Obesity, Diabetes, Heart Disease and Stroke (PPHF)</td>
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<td>1,578,148</td>
<td>1,125,017</td>
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<td>Preventive Health and Health Services Block Grant funded solely with Prevention and Public Health Funds (PPHF)</td>
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<td>1,000,483</td>
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<td>Alzheimer’s Disease Initiative: Specialized Supportive Services Project (ADI-SSS) thru Prevention and Public Health Funds (PPHF)</td>
<td>DHS</td>
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<td>338,337</td>
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<tr>
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<td>Alzheimer's Disease Initiative: Specialized Supportive Services Project (ADI-SSS) thru Prevention and Public Health Funds (PPHF)</td>
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<td>State Medicaid Fraud Control Units</td>
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<td>State Survey and Certification of Health Care Providers</td>
<td>UW-Oshkosh</td>
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<td>Demonstrations and Evaluation IMPACT</td>
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<td>DHS</td>
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<td>Money Follows the Person Rebalancing Demonstration</td>
<td>DHS</td>
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<td>UW-Madison</td>
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<td>Paul Coverdell Stroke FY16</td>
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<td>Domestic Ebola Supplement to the Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)</td>
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<td>UW-Madison</td>
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<td>UW-Madison</td>
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<td>Extramural Research Programs in the Neurosciences and Neurological Disorders</td>
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<td>Total Federal Program 93.853</td>
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<td>Biomedical Research and Research Training</td>
<td>UW-Madison</td>
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<td>Child Health and Human Development Extramural Research</td>
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<td>Aging Research</td>
<td>UW-Madison</td>
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<td>Vision Research</td>
<td>UW-Madison</td>
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<td>Medical Library Assistance</td>
<td>UW-Madison</td>
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<td>93.884</td>
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<td>Grants for Primary Care Training and Enhancement</td>
<td>UW Colleges</td>
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<td>Grants for Primary Care Training and Enhancement (from UW-Madison)</td>
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<td>99,949</td>
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<td></td>
<td></td>
<td>Total Federal Program 93.884</td>
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The accompanying notes are an integral part of this schedule.
### INDIVIDUAL PROGRAMS AND OTHER CLUSTERS

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<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<tr>
<td>93.898</td>
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<td>Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations</td>
<td>DHS</td>
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<td>Vital Statistics</td>
<td>DHS</td>
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<td>Grants to States for Operation of State Offices of Rural Health Services</td>
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<td>HIV Care Formula Grants</td>
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<td>Grants to Provide Outpatient Early Intervention Services with Respect to HIV Disease</td>
<td>UW-Madison</td>
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<td>HIV Prevention Activities-Health Department Based</td>
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<tr>
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<td>Human Immunodeficiency Virus (HIV)/Acquired Immunodeficiency Virus Syndrome (AIDS) Surveillance</td>
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<td>Block Grants for Prevention and Treatment of Substance Abuse</td>
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<td>Health Professions Recruitment Program for Indians</td>
<td>UW-Madison</td>
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<td>Preventive Health Services-Sexually Transmitted</td>
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<td>Maternal and Child Health Services Block Grant to the State</td>
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### Other Federal Financial Assistance:
- N/A 93.200-2017-92549 Vital Statistics Coop Program | DHS | 422,513 | 0 |
- N/A 93.223-2014-00072C Tobacco & Drug Abuse Public Health Services Block Grant | UW-Madison | 411,886 | 411,823 |
- N/A 93.223-2017-10189C Tobacco & Drug Abuse Public Health Services Block Grant | UW-Madison | 535,163 | 528,501 |
- N/A 93.223-2012-10061C Mammography Quality Standards Act | DHS | 4,067 | 0 |
- N/A 93.223-2017-10097 Mammography Quality Standards Act | DHS | 162,878 | 0 |
- N/A 93.212-2017-M93562 National Death Index | DHS | 49,864 | 0 |
- N/A 93.212-2017-M93562 National Death Index | DWD | (50,557) | 0 |
- N/A 93.7830488 NINR Graduate Partnership Fellowship | UW-Madison | 325 | 0 |
- N/A 93.223-2014-00072C Tobacco & Drug Abuse Public Health Services Block Grant | UW-Madison | 325 | 0 |
- N/A 93.223-2017-10189C Tobacco & Drug Abuse Public Health Services Block Grant | UW-Madison | 325 | 0 |
- N/A 93.223-2017-10189C Tobacco & Drug Abuse Public Health Services Block Grant | UW-Madison | 325 | 0 |
- N/A 93.223-2014-00072C Tobacco & Drug Abuse Public Health Services Block Grant | UW-Madison | 325 | 0 |

### Subgrants:
- Medical Reserve Corps Small Grant Program | DATCP | 8,555 | 0 |
- Birth Defects and Developmental Disabilities Prevention and Surveillance | UW-Madison | 1,199 | 0 |
- Healthy Marriage Promotion and Responsible Fatherhood Grants | UW-Milwaukee | 87,573 | 0 |
- Food and Drug Administration-Research | UW-Madison | 10,356 | 0 |
- Food and Drug Administration Research | UW-Madison | (2,863) | 0 |
- Food and Drug Administration-Research | UW-Madison | 15,978 | 0 |
- Institute for Pharmaceutical Technology & Education | UW-Madison | 0,050 | 0 |
- Maternal and Child Health Federal Consolidated Programs | UW-Madison | 23,581 | 0 |
- Maternal and Child Health Federal Consolidated Programs | UW-Madison | 24,130 | 0 |
- HIV-Related Training and Technical Assistance | UW-Madison | 200,768 | 0 |
- HIV-Related Training and Technical Assistance | UW-Madison | 1,050 | 0 |
- Research Related to Deafness and Communication Disorders | UW-Madison | 17,017 | 0 |
- National Research Service Award in Primary Care Medicine | UW-Madison | 82,317 | 0 |
- Epidemiology Cooperative Agreements | UW-Madison | 39,937 | 0 |
- Substance Abuse and Mental Health Services-Projects of Regional and National Significance | UW-Madison | 11,444 | 0 |
- Substance Abuse and Mental Health Services-Projects of Regional and National Significance | UW-Madison | 33,896 | 0 |

The accompanying notes are an integral part of this schedule.
<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<tr>
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<td>Substance Abuse and Mental Health Services-Projects of Regional and National Significance</td>
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The accompanying notes are an integral part of this schedule.
## Individual Programs and Other Clusters

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### U.S. Department of Homeland Security:

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### U.S. Agency for International Development:

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**TOTAL INDIVIDUAL PROGRAMS AND OTHER CLUSTERS**

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## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

### U.S. DEPARTMENT OF AGRICULTURE:

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The accompanying notes are an integral part of this schedule.
### RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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**TOTAL R&D FROM U.S. DEPARTMENT OF AGRICULTURE**

| | | | | 23,471,790 | 1,575,651 |

### STATE AGENCY OR UW INSTITUTION:

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<th>EXPENDITURES</th>
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**Total Federal Program 11.417**

| | | | | 1,882,577 | 160,899 |

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**Total Federal Program 11.459**

| | | | | 237,506 | 0 |

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**Total Federal Program 11.468**

| | | | | 607,591 | 279,952 |

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**R&D Subgrants**

The accompanying notes are an integral part of this schedule.
## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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<th>CFDA NUMBER</th>
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<th>FEDERAL PROGRAM</th>
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<td>Using Green Infrastructure as a Resiliency Approach to Future Flooding Impacts (from Georgia Department of Natural Resources)</td>
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### U.S. DEPARTMENT OF DEFENSE:

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**R&D Subgrants:**

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The accompanying notes are an integral part of this schedule.
### RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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The accompanying notes are an integral part of this schedule.
### RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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**TOTAL R&D FROM U.S. DEPARTMENT OF DEFENSE**

| | | **33,995,160** | | **4,947,309** |
## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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The accompanying notes are an integral part of this schedule.
## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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Subtotal R&D Subgrants: 581,486 0

TOTAL R&D FROM U.S. DEPARTMENT OF THE INTERIOR: 3,882,328 63,454

### U.S. DEPARTMENT OF JUSTICE:

#### R&D Subgrants:

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SubTotal R&D Subgrants: 292,433 0

TOTAL R&D FROM U.S. DEPARTMENT OF JUSTICE: 478,267 0

### U.S. DEPARTMENT OF LABOR:

#### R&D Subgrants:

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<tr>
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TOTAL R&D FROM U.S. DEPARTMENT OF LABOR: 49,558 0

### U.S. DEPARTMENT OF STATE:

#### R&D Subgrants:

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Subtotal Direct R&D Grants: 9,254 0

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Subtotal R&D Subgrants: 33,746 0

TOTAL R&D FROM U.S. DEPARTMENT OF STATE: 43,000 0

### U.S. DEPARTMENT OF TRANSPORTATION:

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The accompanying notes are an integral part of this schedule.
### RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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### OFFICE OF PERSONNEL MANAGEMENT:

| N/A         | 27.W81G676167164         | Intergovernmental Personnel Act (IPA) Mobility Program | UW-Stout | (2,421) | 0 |
| N/A         | 27.W81G677961232         | Intergovernmental Personnel Act (IPA) Mobility Program | UW-Stout | 7,844 | 0 |
| N/A         | 27.W81G678067606 / 1001828772 | Intergovernmental Personnel Act (IPA) Mobility Program | UW-Stout | 3,709 | 0 |
| Subtotal Direct R&D Grants | |                           | | 9,132 | 0 |
| TOTAL R&D FROM OFFICE OF PERSONNEL MANAGEMENT | |                           | | 9,132 | 0 |

### NATIONAL AERONAUTICS AND SPACE ADMINISTRATION:

| 43.001      | Science                   | UW-Milwaukee | 210,475 | 104,254 |
| 43.001      | Science                   | UW-Whitewater | 60,233 | 48,103 |
| 43.001      | Science                   | UW-Madison | 8,033,496 | 840,510 |
| 43.001      | Science (from UW-Whitewater) | UW-Milwaukee | 48,103 | 0 |
| Total Federal Program 43.001 | |                           | | 8,352,307 | 992,867 |
| 43.003      | Exploration               | UW-Madison | 100,859 | 0 |
| 43.007      | Space Operations          | UW-Madison | 314,229 | 0 |

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## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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### R&D Subgrants:

- 43.001 16759 Science (from University of Maryland-Baltimore) | UW-Madison | 162,749 | 0
- 43.001 0000016759 Science (from University of Maryland-Baltimore) | UW-Madison | 396,424 | 0
- 43.001 1(GG009396) Science (from Columbia University) | UW-Madison | 61,942 | 0
- 43.001 1554611 Science (from University of Colorado-Boulder) | UW-Madison | 54,075 | 0
- 43.001 2016-31 Science (from University of Oklahoma) | UW-Madison | 20,832 | 0
- 43.001 25-6238-0676-002 Science (from University of Nebraska) | UW-Madison | (96) | 0
- 43.001 54295-Z6059206 Science (from University of Maryland) | UW-Madison | 7,880 | 0
- 43.001 68198-1117928-2 Science (from State University of New York-Stony Brook) | UW-Madison | 8,586 | 0
- 43.001 731 Science (from Space Science Institute) | UW-Madison | 33,028 | 0
- 43.001 AR6-17006A Science (from Smithsonian Astrophysical Observatory) | UW-Madison | 5,337 | 0
- 43.001 AR6-17015X Science (from Smithsonian Astrophysical Observatory) | UW-Madison | (516) | 0
- 43.001 DD7-18091X Science (from Smithsonian Astrophysical Observatory) | UW-Madison | 12,647 | 0
- 43.001 GO7-18019X Science (from Smithsonian Astrophysical Observatory) | UW-Madison | 23,784 | 0
- 43.001 HC13703 Science (from East-West Center) | UW-Madison | 2,259 | 0
- 43.001 HC13703 Science (from East-West Center) | UW-Madison | 13,804 | 0
- 43.001 HST-GO-13893-001 Science (from Space Telescope Science Institute) | UW-Madison | 92,259 | 0
- 43.001 HST-GO-14588-001 Science (from Space Telescope Science Institute) | UW-Madison | 4,416 | 0
- 43.001 HST-GO-14807.006- Science (from Space Telescope Science Institute) | UW-Madison | 19,694 | 0
- 43.001 HST-GO-13354-001 Science (from Space Telescope Science Institute) | UW-Madison | (455) | 0
- 43.001 HST-GO-14066-002 Science (from Space Telescope Science Institute) | UW-Madison | 7,787 | 0
- 43.001 HST-GO-14239-001 Science (from Space Telescope Science Institute) | UW-Madison | 32,370 | 0
- 43.001 HST-GO-14240-001 Science (from Space Telescope Science Institute) | UW-Madison | 39,512 | 0
- 43.001 HST-GO-14265-002 Science (from Space Telescope Science Institute) | UW-Madison | 106,542 | 0
- 43.001 HST-GO-14268-006 Science (from Space Telescope Science Institute) | UW-Madison | 59,942 | 0
- 43.001 PF6-170149 Science (from Smithsonian Astrophysical Observatory) | UW-Madison | 115,601 | 0
- 43.001 R-16-0021 Science (from University of Houston) | UW-Madison | 37,559 | 0
- 43.001 R-18-0039 Science (from University of Houston) | UW-Madison | 10 | 0
- 43.001 SC 3147 Science (from Search for Extraterrestrial Intelligence) | UW-Madison | 48,719 | 0
- 43.001 TM6-17010A Science (from Smithsonian Astrophysical Observatory) | UW-Madison | 9,492 | 0
- 43.002 60661597/RF014906-95 Science (from Ohio State University) | UW-Madison | 136,872 | 0
- 43.003 G-00066-2 Exploration (from Colorado State University) | UW-Madison | 40,468 | 0
- 43.007 AGR- DTD- 2-16-15 Space Operations (from Nosanov Consulting LLC) | UW-Madison | 21,675 | 0
- 43.008 AGR- DTD 3-21-17 Education (from Wisconsin Space Grant Consortium) | UW-Madison | 405 | 0
- 43.008 HE10_McHenry Education (from Wisconsin Space Grant Consortium) | UW-Milwaukee | 2,346 | 0
- 43.008 HH160019 Education (from Hampton University) | UW-Milwaukee | 260,923 | 0
- 43.008 NNX15JA12H Education (from Carthage College) | UW-Whitewater | 3,456 | 0
- 43.008 NNX15JA12H Education (from Wisconsin Space Grant Consortium) | UW-Whitewater | 8,736 | 0
- 43.008 OPP18_3.0 Education (from Wisconsin Space Grant Consortium) | UW-Milwaukee | 3,000 | 0
- 43.008 PrimerNNX15AJ12H Education (from Wisconsin Space Grant Consortium) | UW-Milwaukee | 8,041 | 0
- 43.008 R17_7.0 Education (from Wisconsin Space Grant Consortium) | UW-Milwaukee | 8,339 | 0
- 43.008 RIP16_Dornbos Education (from Wisconsin Space Grant Consortium) | UW-Milwaukee | 1,001 | 0
- 43.008 RIP16_McHenry Education (from Wisconsin Space Grant Consortium) | UW-Milwaukee | 2,826 | 0

The accompanying notes are an integral part of this schedule.
### RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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<th>CFDA NUMBER</th>
<th>IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<td>Stellar Populations in a Lensed Galaxy (from Space Telescope Science Institute)</td>
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<td>N/A</td>
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<td>Understanding Radiation Aging of Polar and Non-Polar Magnesium Oxide (from Wisconsin Space Grant Consortium)</td>
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<td>WFIRST Starshade Evaluation (from Search for Extraterrestrial Intelligence)</td>
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### NATIONAL FOUNDATION ON THE ARTS AND ON THE HUMANITIES:

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<th>CFDA NUMBER</th>
<th>IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<tbody>
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<td>UW-Madison</td>
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<td>45.PY-258633-18</td>
<td>The Sounds of Eau Claire &quot;History Harvest&quot;</td>
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The accompanying notes are an integral part of this schedule.
## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

**R&D Subgrants:**

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<th>Identifying Number</th>
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<th>Amount Provided to Subrecipients</th>
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**TOTAL R&D FROM NATIONAL FOUNDATION ON THE ARTS AND ON THE HUMANITIES:**

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**NATIONAL SCIENCE FOUNDATION:**

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**Total Federal Program 47.041:**

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**Total Federal Program 47.070:**

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The accompanying notes are an integral part of this schedule.
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### RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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**TOTAL R&D FROM U.S. SMALL BUSINESS ADMINISTRATION:** 94,533

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<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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| N/A 64.IPA | Interagency Personnel Agreements | UW-Madison | 12,880 | 0 |

**TOTAL R&D FROM U.S. DEPARTMENT OF VETERANS AFFAIRS:** 12,880

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**Subtotal Direct R&D Grants:** 1,704,439 85,848

**R&D Subgrants:**

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**Subtotal R&D Subgrants:** 450,804

**TOTAL R&D FROM U.S. ENVIRONMENTAL PROTECTION AGENCY:** 2,155,243 85,848

### U.S. NUCLEAR REGULATORY COMMISSION:

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<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
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**TOTAL R&D FROM U.S. NUCLEAR REGULATORY COMMISSION:** 926,167 204,497

### U.S. DEPARTMENT OF ENERGY:

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The accompanying notes are an integral part of this schedule.
### RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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N/A 81.RD  R&D from Brookhaven National Laboratory  UW-Milwaukee  230,893  0
N/A 81.RD  R&D from Pacific Northwest National Laboratory  UW-Milwaukee  41,727  0
N/A 81.RD  R&D from Brookhaven National Laboratory  UW-La Crosse  6,000  0
N/A 81.RD  R&D from Jefferson National Laboratory  UW-La Crosse  6,000  0
N/A 81.RD  R&D from Argonne National Laboratory  UW-La Crosse  2,132  0
N/A 81.RD  R&D from Oak Ridge National Laboratory  UW-La Crosse  441  0
N/A 81.RD  R&D from Berkeley National Laboratory  UW-La Crosse  5,000  0
N/A 81.RD  R&D from Los Alamos National Laboratory  UW-La Crosse  4,112  0
N/A 81.RD  R&D from Argonne National Laboratories  UW-Madison  3,929  0
N/A 81.RD  R&D from Argonne National Laboratory  UW-Madison  1,369,465  116,530
N/A 81.RD  R&D from Brookhaven National Laboratory  UW-Madison  271,802  0
N/A 81.RD  R&D from Chicago Operations Office  UW-Madison  539,242  0
N/A 81.RD  R&D from Fermi National Accelerator Laboratory  UW-Madison  3,430,204  0
N/A 81.RD  R&D from Lawrence Berkeley National Laboratory  UW-Madison  588,766  0
N/A 81.RD  R&D from Lawrence Livermore National Laboratory  UW-Madison  29,203  0
N/A 81.RD  R&D from National Renewable Energy Laboratory  UW-Madison  42,395  0
N/A 81.RD  R&D from Oak Ridge National Laboratory  UW-Madison  250,154  0
N/A 81.RD  R&D from Pacific Northwest National Laboratory  UW-Madison  601,686  0
N/A 81.RD  R&D from Princeton Plasma Physics Laboratory  UW-Madison  25,152  0
N/A 81.RD  R&D from Sandia National Laboratory  UW-Madison  163,555  0

Subtotal Direct R&D Grants 59,241,060 12,598,707

#### R&D Subgrants:

81.049 090634-16928 Office of Science Financial Assistance Program (from University of Illinois-Urbana-Champaign) UW-Madison 9,843 0
81.049 13-224-330131 Office of Science Financial Assistance Program (from Old Dominion University) UW-Madison (68,174) 0
81.049 17-101-100387-020 Office of Science Financial Assistance Program (from Old Dominion University) UW-Madison 216,142 0
81.049 25-0521-0153-002 Office of Science Financial Assistance Program (from University of Nebraska) UW-Madison (32,309) 0
81.049 3003326609 Office of Science Financial Assistance Program (from University of Michigan) UW-Madison 110,019 0
81.049 4000158665 Office of Science Financial Assistance Program (from UT-Battelle LLC) UW-Madison 61,065 0
81.049 9314 Office of Science Financial Assistance Program (from University of California-Berkeley) UW-Madison 237,748 0
81.049 E-Motors Subaward No. 1 Office of Science Financial Assistance Program (from E-Motors Consulting LLC) UW-Milwaukee (16,283) 0
81.049 F7600-01 Office of Science Financial Assistance Program (from New York University) UW-Madison 111,005 0
81.049 RF184-G5 Office of Science Financial Assistance Program (from Georgia Institute of Technology) UW-Madison 86,269 0
81.049 UFDS00011958 Office of Science Financial Assistance Program (from University of Florida) UW-Madison 202,351 0
81.049 UNR-16-02 Office of Science Financial Assistance Program (from University of Nevada-Reno) UW-Madison 58,148 0
81.049 UWSC9312 Office of Science Financial Assistance Program (from University of Washington) UW-Madison 83,099 0
81.049 UWSC9312(use 17868 for inv) Office of Science Financial Assistance Program (from University of Washington) UW-Madison 22,204 0
81.086 SA623-1016-10296 Conservation Research and Development (from Illinois Institute of Technology) UW-Madison 106,716 0
81.087 251192 Renewable Energy Research and Development (from Temple University) UW-Madison (46,445) 0

The accompanying notes are an integral part of this schedule.
## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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<th>CFDA NUMBER</th>
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## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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The accompanying notes are an integral part of this schedule.
STATE OF WISCONSIN  
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
FOR THE YEAR ENDED JUNE 30, 2018

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<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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The accompanying notes are an integral part of this schedule.
# RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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The accompanying notes are an integral part of this schedule.
### RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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R&D Subgrants:

- **93.068 5996.UW.01** Chronic Diseases: Research, Control, and Prevention (from National Opinion Research Center) | UW-Madison | 14,080 | 0 |
- **93.068 5996-UW.01** Chronic Diseases: Research, Control, and Prevention (from National Opinion Research Center) | UW-Madison | 8,111 | 0 |
- **93.083 AMGT 01/23/18** Prevention of Disease, Disability, and Death through Immunization and Control of Respiratory and Related Diseases (from Mapp Biopharmaceutical Inc) | UW-Madison | 24,887 | 0 |
- **93.085 31867-Z0657001** Research on Research Integrity (from University of Maryland) | UW-Madison | 28,924 | 0 |
- **93.110 AGMT 09/28/17** Maternal and Child Health Federal Consolidated Programs (from Association of University Centers on Disabilities) | UW-Madison | 1,813 | 0 |
- **93.172 13-04410-002** Human Genome Research (from Texas Biomedical Research Institute) | UW-Madison | (88) | 0 |
- **93.172 1R41HG008566-1** Human Genome Research (from Lucigen) | UW-Madison | 39,257 | 0 |
- **93.173 42127** Research Related to Deafness and Communication Disorders (from University of Delaware) | UW-Madison | 116,543 | 0 |
- **93.173 111107** Research Related to Deafness and Communication Disorders (from University of Texas-Dallas) | UW-Madison | 1,866 | 0 |
- **93.173 1001647740** Research Related to Deafness and Communication Disorders (from University of Iowa) | UW-Madison | 46,834 | 0 |
- **93.173 39690 - 29281** Research Related to Deafness and Communication Disorders (from University of Delaware) | UW-Madison | (8,083) | 0 |
- **93.173 W000786755** Research Related to Deafness and Communication Disorders (from University of Iowa) | UW-Madison | 56,171 | 0 |

The accompanying notes are an integral part of this schedule.
## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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The accompanying notes are an integral part of this schedule.
## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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The accompanying notes are an integral part of this schedule.
## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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The accompanying notes are an integral part of this schedule.

STATE AGENCY OR UW INSTITUTION EXPENDITURES

AMOUNT PROVIDED TO SUBRECIPIENTS

STATE OF WISCONSIN SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS FOR THE YEAR ENDED JUNE 30, 2018

186 RESEARCH AND DEVELOPMENT (R&D) CLUSTER
## RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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The accompanying notes are an integral part of this schedule.
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The accompanying notes are an integral part of this schedule.
- RESEARCH AND DEVELOPMENT (R&D) CLUSTER

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<td>Cancer Trials Support Unit (from Children’s Hospital of Philadelphia)</td>
<td>UW-Madison</td>
<td>846</td>
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<td>N/A</td>
<td>93.FY17ITN013</td>
<td>Clinical Trial for Anti-TSLP (from Benaroya Research Institute at Virginia Mason University)</td>
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<td>17,941</td>
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<td>N/A</td>
<td>93.G-0253 DMHSAS-14</td>
<td>Juvenile Justice AODA Program (from Kenosha County)</td>
<td>UW-Madison</td>
<td>12,204</td>
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<td>Juvenile Justice AODA Program (from Portage County)</td>
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<tr>
<td>N/A</td>
<td>93.HHSN272201400</td>
<td>NIAID Centers of Excellence for Influenza Research &amp; Surveillance (from Mount Sinai School of Medicine)</td>
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<td>N/A</td>
<td>93.IDEAS Study</td>
<td>Imaging Dementia - Evidence for Amyloid Scanning (from American College of Radiology)</td>
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<td>7,413</td>
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<td>N/A</td>
<td>93.MSN186787</td>
<td>Advanced Vaccination &amp; Immunity Management Strategies to Protect from Influenza Virus Infection (from University of Cambridge)</td>
<td>UW-Madison</td>
<td>456,940</td>
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<td>N/A</td>
<td>93.OSP2016192-WA00433278</td>
<td>Optimization of Recombinant HIV Env Protein Vaccine Production Platform (from University of Massachusetts)</td>
<td>UW-Madison</td>
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<td>Clinical Trials (from Emmes Corporation)</td>
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<td>N/A</td>
<td>93.Protoocol T Extension</td>
<td>A Comparative Effectiveness Study of Intravitreal Aflibercept, Bevacizumab and Ranibizumab for Diabetic Macular Edema (from Jaeb Center for Health Research)</td>
<td>UW-Madison</td>
<td>3,337</td>
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## STATE OF WISCONSIN

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**

**FOR THE YEAR ENDED JUNE 30, 2018**

<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<tr>
<td>N/A</td>
<td>93.RR211-532/S001388</td>
<td>Production &amp; Distribution of Filarial Research Reagents (from University of Georgia)</td>
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<td>N/A</td>
<td>93.SB26665-A</td>
<td>Demonstration of the Ability of Distributed Fiber Optic Sensing Technologies to Enhance Mine Safety (from Montana Tech of the University of Montana)</td>
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<td>93.STRATA2016</td>
<td>Stratagraft Skin Tissue as an Alternative to Autografts in Promoting Autologous Skin Tissue Regeneration (from Stratatech)</td>
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<td>Research Agreement (from Leidos Biomedical Research)</td>
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<td>Biomedical Research Agreement (from Leidos Biomedical Research)</td>
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Subtotal R&D Subgrants: 31,979,859 599,949

TOTAL R&D FROM U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES: 304,140,567 37,941,221

### CORPORATION FOR NATIONAL AND COMMUNITY SERVICE:

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<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
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<td>94.013</td>
<td>5002106-04</td>
<td>Volunteers in Service to America</td>
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TOTAL R&D FROM CORPORATION FOR NATIONAL AND COMMUNITY SERVICE: 45,980 0

### SOCIAL SECURITY ADMINISTRATION:

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<td>96.007</td>
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<td>Social Security-Research and Demonstration (from Boston College)</td>
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TOTAL R&D FROM SOCIAL SECURITY ADMINISTRATION: 8,657 0

### U.S. DEPARTMENT OF HOMELAND SECURITY:

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<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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TOTAL R&D FROM U.S. DEPARTMENT OF HOMELAND SECURITY: 376,396 0

### U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT:

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<th>STATE AGENCY OR UW INSTITUTION</th>
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<tr>
<td>98.001</td>
<td>20197 (RC102194)</td>
<td>USAID Foreign Assistance for Programs Overseas (from Michigan State University)</td>
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<td>N/A</td>
<td>98.09-002945-101</td>
<td>Grafted Vegetables for Sustainable Agriculture (from University of California-Davis)</td>
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<td>66,079</td>
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<td>N/A</td>
<td>98.AGMT 04-06-17</td>
<td>Developing the Theory and Models for Knowledge Systems for Decision Making and Iterative Evaluation in Sustainable Maize Agri-Food Systems (from International Maize &amp; Wheat Improvement Center)</td>
<td>UW-Madison</td>
<td>5,391</td>
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</table>

TOTAL R&D FROM U.S. DEPARTMENT OF INTERNATIONAL DEVELOPMENT: 74,556 11,000

TOTAL RESEARCH AND DEVELOPMENT CLUSTER: $585,054,220 $74,423,396

The accompanying notes are an integral part of this schedule.
# STATE OF WISCONSIN

## SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

### FOR THE YEAR ENDED JUNE 30, 2018

<table>
<thead>
<tr>
<th>CFDA NUMBER</th>
<th>OTHER IDENTIFYING NUMBER</th>
<th>FEDERAL PROGRAM</th>
<th>STATE AGENCY OR UW INSTITUTION</th>
<th>EXPENDITURES</th>
<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<td>Federal Supplemental Educational Opportunity Grants</td>
<td>UW-Madison</td>
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Total Federal Program 84.007: 11,420,527 0

| 84.033      |                            | Federal Work-Study Program                            | UW-Milwaukee                    | 773,017      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Stout                        | 710,793      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW Colleges                     | 295,567      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Green Bay                    | 265,450      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-La Crosse                    | 422,060      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Oshkosh                      | 397,814      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Parkside                     | 106,726      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Platteville                  | 449,461      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-River Falls                  | 371,814      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Stevens Point                | 837,750      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Superior                     | 216,557      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Eau Claire                   | 18,117       | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Whitewater                   | 379,040      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Eau Claire                   | 890,856      | 0                                |
| 84.033      |                            | Federal Work-Study Program                            | UW-Madison                      | 3,478,706    | 0                                |

Total Federal Program 84.033: 9,615,538 0

| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Milwaukee                    | 19,079,521   | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Stout                        | 13,009,168   | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Green Bay                    | 4,731,610    | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-La Crosse                    | 5,651,884    | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Oshkosh                      | 5,739,370    | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Parkside                     | 2,272,376    | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Platteville                  | 7,613,123    | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-River Falls                  | 6,088,686    | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Stevens Point                | 17,186,667   | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Superior                    | 1,524,804    | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Whitewater                   | 10,188,176   | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Eau Claire                   | 14,769,593   | 0                                |
| 84.038      |                            | Federal Perkins Loan Program-Federal Capital Contributions | UW-Madison                      | 59,943,173   | 0                                |

Total Federal Program 84.038: 167,798,351 0

| 84.063      |                            | Federal Pell Grant Program                            | UW-Milwaukee                    | 32,211,282   | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Stout                        | 9,088,149    | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Colleges                     | 11,944,587   | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Green Bay                    | 7,792,036    | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-La Crosse                    | 8,354,284    | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Oshkosh                      | 11,663,874   | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Parkside                     | 8,026,111    | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Platteville                  | 7,599,491    | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-River Falls                  | 6,708,471    | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Stevens Point                | 11,434,843   | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Superior                     | 3,836,420    | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Whitewater                   | 13,309,212   | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Eau Claire                   | 9,975,853    | 0                                |
| 84.063      |                            | Federal Pell Grant Program                            | UW-Madison                      | 19,751,829   | 0                                |

Total Federal Program 84.063: 161,099,442 0

| 84.268      |                            | Federal Direct Student Loans                          | UW-Milwaukee                    | 125,328,212  | 0                                |
| 84.268      |                            | Federal Direct Student Loans                          | UW-Stout                        | 37,962,237   | 0                                |
| 84.268      |                            | Federal Direct Student Loans                          | UW-Colleges                     | 13,768,782   | 0                                |

The accompanying notes are an integral part of this schedule.
<table>
<thead>
<tr>
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<th>AMOUNT PROVIDED TO SUBRECIPIENTS</th>
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<td>Administrative Cost Allowance</td>
<td>UW-Superior</td>
<td>18,842</td>
<td>0</td>
</tr>
<tr>
<td>N/A 84.SFA</td>
<td></td>
<td>Administrative Cost Allowance</td>
<td>UW-Whitewater</td>
<td>116,328</td>
<td>0</td>
</tr>
<tr>
<td>N/A 84.SFA</td>
<td></td>
<td>Administrative Cost Allowance</td>
<td>UW-Eau Claire</td>
<td>227,969</td>
<td>0</td>
</tr>
<tr>
<td>N/A 84.SFA</td>
<td></td>
<td>Administrative Cost Allowance</td>
<td>UW-Superior</td>
<td>3,327</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total Administrative Cost Allowance</td>
<td></td>
<td>1,504,866</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>TOTAL SFA FROM U.S. DEPARTMENT OF EDUCATION</td>
<td></td>
<td>1,014,401,155</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>93.264</td>
<td></td>
<td>Nurse Faculty Loan Program (NFLP)</td>
<td>UW-Milwaukee</td>
<td>1,905,799</td>
<td>0</td>
</tr>
<tr>
<td>93.264</td>
<td></td>
<td>Nurse Faculty Loan Program (NFLP)</td>
<td>UW-Madison</td>
<td>425,281</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total Federal Program 93.264</td>
<td></td>
<td>2,331,080</td>
<td>0</td>
</tr>
<tr>
<td>93.342</td>
<td></td>
<td>Health Professions Student Loans, Including Primary Care Loans/Loans for Disadvantaged Students</td>
<td>UW-Madison</td>
<td>6,341,695</td>
<td>0</td>
</tr>
<tr>
<td>93.364</td>
<td></td>
<td>Nursing Student Loans</td>
<td>UW-Milwaukee</td>
<td>2,410,104</td>
<td>0</td>
</tr>
<tr>
<td>93.364</td>
<td></td>
<td>Nursing Student Loans</td>
<td>UW-Oshkosh</td>
<td>2,921,651</td>
<td>0</td>
</tr>
<tr>
<td>93.364</td>
<td></td>
<td>Nursing Student Loans</td>
<td>UW-Madison</td>
<td>1,398,641</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total Federal Program 93.364</td>
<td></td>
<td>6,730,396</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>TOTAL SFA FROM U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES</td>
<td></td>
<td>15,403,171</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>TOTAL STUDENT FINANCIAL ASSISTANCE CLUSTER</td>
<td></td>
<td>$1,029,804,326</td>
<td>$0</td>
</tr>
</tbody>
</table>

TOTAL EXPENDITURES OF FEDERAL AWARDS

$11,855,013,263 $1,638,186,898

The accompanying notes are an integral part of this schedule.
1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Purpose

The Schedule of Expenditures of Federal Awards presents a summary of the State of Wisconsin’s expenditures funded by the federal government for the fiscal year ended June 30, 2018. For purposes of the schedule, federal programs have been classified as follows: 1) Individual Programs and Other Clusters, including grants received directly from the federal government and subgrants received from other organizations; 2) the Research and Development (R&D) Cluster, including R&D grants received directly from the federal government and R&D subgrants received from other entities; and 3) the Student Financial Assistance (SFA) Cluster.

Direct federal awards and subgrants are presented for each federal agency by the Catalog of Federal Domestic Assistance (CFDA) number when available in the grant agreements or determinable based on a grant’s source and purpose. For grants that did not clearly state a CFDA number, the schedule includes the grant, or a total for several grants, with a CFDA number of N/A for not available. An “other identifying number,” when available, is required to be shown if the CFDA number is not available.

Because the schedule presents only a selected portion of the activities of the State, it is not intended to and does not present the financial position or results of operations of the State.
B. Basis of Accounting

The accompanying Schedule of Expenditures of Federal Awards has been prepared from the accounting and inventory records of Wisconsin state agencies, including the University of Wisconsin (UW) System, and from federal reports submitted by the state agencies to the various federal grantor agencies. The State’s accounting records are maintained on a budgetary basis, in accordance with Wisconsin statutes. State statutes and state accounting policies require that disbursements be recognized in the fiscal year in which they are recorded for payment, except for certain state employee fringe benefits and selected other items that are recognized in the period to which the payments relate, regardless of when paid. The State’s centralized accounting records remain open for a period of time after June 30 to permit the recording of expenditures applicable to the fiscal year ended June 30, in accordance with Wisconsin statutes.

A timing variance may exist between the recording of federal grant expenditures in the accounting records and the reporting of the expenditures to the federal government or other subgrantor organizations.

Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) requires the Schedule of Expenditures of Federal Awards to include the amount provided to subrecipients under each federal program. The amount provided to subrecipients under each federal program was determined by the state agencies, including UW System.

To eliminate double-counting of “subgrants” between state agencies, the schedule includes expenditures reported by the state agency that received the funds directly from the federal government and does not include expenditures recorded by the “subrecipient agency.” However, for subgrants between UW institutions, the schedule includes expenditures reported by UW institutions that received the subgranted funds and does not include expenditures reported by the subgranting UW institutions.

C. Use of De Minimis Cost Rate

No state agency has elected to use the 10 percent de minimis cost rate for indirect costs.

D. State Agencies Included

The following state agencies were included in the scope of the federal compliance portion of the audit. State agencies that administered a major federal program audited during the FY 2017-18 single audit are indicated in bold.
1. Board for People with Developmental Disabilities (BPDD)
2. Child Abuse and Neglect Prevention Board (CANPB)
3. Department of Administration (DOA)
4. Department of Agriculture, Trade and Consumer Protection (DATCP)
5. Department of Children and Families (DCF)
6. Department of Corrections (DOC)
7. Department of Health Services (DHS)
8. Department of Justice (DOJ)
9. Department of Military Affairs (DMA)
10. Department of Natural Resources (DNR)
11. Department of Public Instruction (DPI)
12. Department of Safety and Professional Services (DSPS)
13. Department of Tourism (Tourism)
14. Department of Transportation (DOT)
15. Department of Veterans Affairs (DVA)
16. Department of Workforce Development (DWD)
17. Elections Commission (Elections)
18. Office of the Commissioner of Insurance (OCI)
19. Public Service Commission (PSC)
20. State Public Defender Board (SPDB)
21. University of Wisconsin System
22. Wisconsin Historical Society (WHS)
23. Wisconsin Technical College System (WTCS)

The Wisconsin Humanities Council is a nonprofit organization associated with UW System. Through a contract with the Wisconsin Humanities Council, UW-Extension is responsible for fiscal and personnel administration of the Council. At the request of the Wisconsin Humanities Council, the Council was included as a unit within UW System.

Federal awards administered by the Wisconsin Housing and Economic Development Authority, the Wisconsin Economic Development Corporation, the University of Wisconsin Hospitals and Clinics Authority, and the Wisconsin Court System were not included in the scope of this audit. These entities indicated that single audits are performed by other auditors, if required.

2. FEDERAL SANCTIONS AND DISALLOWANCES

There are actual or potential federal sanctions and disallowances for the Title IV-B and IV-E programs, the Medical Assistance (MA) Program (CFDA #93.778), and the Community Development Block Grants/State’s Program and Non-Entitlement Grants in Hawaii (CDBG) (CFDA #14.228).
A. Penalty for Titles IV-B and IV-E

In April 2010, the U.S. Department of Health and Human Services’ Administration for Children and Families (ACF) conducted a Child and Family Service Review (CFSR) of, among other things, the State’s child welfare program. ACF found that DCF was not meeting federal requirements in several areas. In response to the CFSR findings, DCF developed, and ACF approved, a Program Improvement Plan (PIP) with measurement data goals. DCF had until March 31, 2014, to achieve all measurement data goals. In August 2015, ACF informed DCF of a $1,869,784 penalty for failure to meet all of the measurement data goals required by the approved PIP. In September 2015, DCF repaid to the federal government $1,505,057 of Title IV-B funds and $364,727 of Title IV-E funds. However, based on subsequent examination of the penalty assessment documentation, DCF believes that the penalty should have been $1,757,925, which includes $1,399,441 of Title IV-B funds and $358,484 of Title IV-E funds. DCF reclaimed the $6,243 of Title IV-E funds on the March 2016 claim. DCF is still awaiting the $105,616 refund of Title IV-B funds from ACF.

B. Sanction for the Health Check/Other Services—MA Program

In September 2013, DHS received the final report from the U.S. Department of Health and Human Services’ Office of Inspector General (OIG) recommending a disallowance related to Health Check/Other Services, a program for which DHS claims Medicaid reimbursement for treatment costs for prior-authorized eligible children in Wisconsin residential care centers. The report indicated that DHS used a cost allocation methodology that did not comply with federal requirements. The OIG recommended that DHS return $22,868,628 to the federal government for the time period from October 1, 2004, through September 30, 2006. DHS did not agree with the recommendation and sent a response to the Centers for Medicare and Medicaid Services (CMS) dated October 9, 2013. DHS continues to have discussions with CMS on this issue. DHS provided additional information to CMS on September 26, 2014.

C. Reporting and Refunding the Federal Share of Medicaid-Related Settlements and a Judgment

On August 14, 2018, DHS received a draft report from the U.S. Department of Health and Human Services’ OIG recommending a disallowance related to the Medicaid Program. The OIG review covered the period October 2008 through September 2016. The OIG concluded that DHS did not report and refund the full federal share of Medicaid related settlements and judgments in the amount of $27.6 million. DHS agrees in part and disagrees in part with the proposed findings and proposed recommendations. DHS does not concur with the amount recommended to be refunded and asserts that the amount to be refunded is $6.1 million. DHS sent a formal response to U.S. Department of Health and Human Services’ OIG on September 14, 2018.
D. Disallowances for Community Development Block Grant/State’s Program and Non-Entitlement Grants in Hawaii

The U.S. Department of Housing and Urban Development (HUD) provided funding to the State through the CDBG Cluster. Through state FY 2010-11, the former Department of Commerce was the state agency responsible for subgranting HUD funds to units of local government. In FY 2011-12, DOA assumed responsibility for administering CDBG funds thereafter. In FY 2015-16, HUD issued a finding of noncompliance related to the State’s closeout system and directed the State to undertake a review of old, open activities. DOA took corrective action to close out activities as possible, reporting the status of its efforts to HUD on a periodic basis. In late FY 2017-18, HUD performed an on-site review of those activities and, in FY 2018-19, advised that it would require DOA to reimburse the State’s local account with nonfederal funds in the amount of $7.4 million, as well as to continue to collect $2.2 million that is being repaid by the units of local government. DOA disputed the inclusion of administration activity amounts and a collected amount in the amount to be paid to the State’s local account and acknowledged that the units of local government failed to provide documentation supporting compliance with national objectives for $7.2 million of activities that largely date back more than a decade. HUD subsequently affirmed the inclusion of administration activity amounts in the amount to be repaid and agreed to reduce the repayment amount by amounts that have been collected. As a result, DOA anticipates providing HUD with a voluntary grant reduction request for $7.3 million over a two-year period.

3. FOOD COMMODITIES

Food commodities distributed during the fiscal year are reported as expenditures in the Schedule of Expenditures of Federal Awards under the various federal programs that distributed the commodities. The value of food commodities distributed during the fiscal year and the amount of food commodities on hand as of June 30, 2018, are shown in the following table for each program distributing food commodities.

<table>
<thead>
<tr>
<th>CFDA Number</th>
<th>Federal Program</th>
<th>Distributed</th>
<th>Inventory Balance June 30, 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>10.555</td>
<td>National School Lunch Program</td>
<td>$29,449,490</td>
<td>$323</td>
</tr>
<tr>
<td>10.559</td>
<td>Summer Food Service Program for Children</td>
<td>123,402</td>
<td>0</td>
</tr>
<tr>
<td>10.569</td>
<td>Emergency Food Assistance Program (Food Commodities)</td>
<td>6,927,816</td>
<td>19</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>$36,500,708</strong></td>
<td><strong>$342</strong></td>
</tr>
</tbody>
</table>
4. **SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS, AND CHILDREN (WIC) REBATES**

During FY 2017-18, DHS received $23,207,097 in cash rebates from infant formula manufacturers from the sale of formula to WIC participants (CFDA #10.557). Rebate contracts with infant formula manufacturers are authorized by 7 CFR s. 246.16 (m) as a cost-containment measure. Rebates represent a reduction of expenditures previously incurred for WIC food benefit costs. Applying the rebates received to such costs enabled DHS to extend program benefits to 33,143 more people than could have been served during FY 2017-18 in the absence of the rebate contracts.

5. **IMMUNIZATION COOPERATIVE AGREEMENTS**

The value of vaccines distributed on behalf of the Wisconsin Immunization Program during FY 2017-18 was $48,018,648. This amount is included as expenditures in the Immunization Cooperative Agreements (CFDA #93.268) program in the Schedule of Expenditures of Federal Awards.

6. **COMMUNITY DEVELOPMENT BLOCK GRANTS/STATE’S PROGRAM AND NON-ENTITLEMENT GRANTS IN HAWAII**

The Community Development Block Grants/State’s Program and Non-Entitlement Grants in Hawaii (CFDA #14.228) program provides funds to local units of government to complete infrastructure and facility projects or to grant or loan funds to businesses to assist with job creation and retention, or to homeowners or landlords to assist with housing rehabilitation and homebuyer assistance. Loan repayments received by units of local government in excess of certain limits must be returned to the State. Included in the Schedule of Expenditures of Federal Awards as expenditures of the program is a total of $1,578,286 that was supported by funds returned to the State.

7. **UNEMPLOYMENT INSURANCE**

FY 2017-18 expenditures in the Schedule of Expenditures of Federal Awards for Unemployment Insurance (CFDA #17.225) include $407,414,696 in benefits funded by the Wisconsin Unemployment Reserve Fund; $706,066 in federally funded benefits; and $67,035,094 in federally funded administrative costs.

8. **HIGHWAY PLANNING AND CONSTRUCTION**

Expenditures in the Schedule of Expenditures of Federal Awards for Highway Planning and Construction (CFDA #20.205) include $46.9 million in project charges that have been incurred in excess of the federally approved...
9. **LOAN FUNDS FROM THE FEDERAL HIGHWAY ADMINISTRATION**

DOT received a total of $1,500,000 through FY 2004-05 from the Federal Highway Administration under Highway Planning and Construction (CFDA #20.205) to establish a revolving loan fund to assist local government transit and highway projects. This fund consists of federal contributions, agency match, and loan repayments collected from borrowers. Loans outstanding from all funding sources as of June 30, 2018, totaled $1,808,737 and are included in the federal expenditures reported in the Schedule of Expenditures of Federal Awards.

10. **DONATION OF FEDERAL SURPLUS PERSONAL PROPERTY**

DOA is responsible for administration of the Donation of Federal Surplus Personal Property (CFDA #39.003) program. DOA receives and distributes the federal surplus property. Reported federal expenditures of $484,511 in the Schedule of Expenditures of Federal Awards for this program represents the fair value of property distributed by DOA during FY 2017-18. During FY 2017-18, property with a fair value of $484,511 was received by DOA and, as of June 30, 2018, property with a fair value of $0 was on hand. The fair value of the property is calculated at 22.47 percent of the property’s original acquisition cost based on guidance provided by the U.S. General Services Administration.

11. **CAPITALIZATION GRANTS FOR CLEAN WATER STATE REVOLVING FUNDS AND CAPITALIZATION GRANTS FOR DRINKING WATER STATE REVOLVING FUNDS**

The Environmental Improvement Fund is an enterprise fund of the State of Wisconsin and is jointly administered by DNR and DOA. Included in the Environmental Improvement Fund is the Clean Water Fund Program, funded primarily by the federal government under the Capitalization Grants for Clean Water State Revolving Funds (CFDA #66.458) program, and the Safe Drinking Water Loan Program, funded primarily by the federal government under the Capitalization Grants for Drinking Water State Revolving Funds (CFDA #66.468).

Federal reporting requirements for the Clean Water Fund Program and the Safe Drinking Water Loan Program include financial statements prepared in accordance with generally accepted accounting principles, as well as
information regarding loan recipients, loan amounts, loan terms, project categories of eligible costs, and similar details on other forms of assistance. DNR and DOA provided this information to the U.S. Environmental Protection Agency in the following documents and formats:

- the Environmental Improvement Fund’s audited financial statements, prepared by DOA in accordance with accounting principles generally accepted in the United States, including supplementary information specific to the Clean Water Fund Program;
- the Clean Water Fund Program and Safe Drinking Water Loan Program intended use plans, prepared by DNR;
- the Clean Water Fund Program and Safe Drinking Water Loan Program annual reports, prepared by DNR;
- Annual National Information Management System online submittals by DNR for the Clean Water Fund Program and Safe Drinking Water Loan Program;
- monthly Federal Funding Accountability and Transparency Act (FFATA) reporting by DNR; and
- quarterly data entry into the Clean Water Benefits Reporting Database and the Drinking Water Project Benefits Reporting Database by DNR.

Copies of these documents are available from:

Wisconsin Department of Natural Resources
Bureau of Community Financial Assistance
P.O. Box 7921
Madison, Wisconsin 53707

12. STATE ENERGY PROGRAM REVOLVING LOAN FUND

The portion of the State Energy Program (CFDA #81.041) funded by the American Recovery and Reinvestment Act (ARRA) established a revolving loan fund to provide loans to business organizations. Because the federal government is at risk for these loans until they are repaid, Uniform Guidance requires the value of federal awards expended to include these outstanding loan balances. The following table shows the loan activity and balances related to FY 2017-18.
### 13. FEE-FOR-SERVICE PROGRAMS AND FIXED-PRICE CONTRACTS

State agencies may receive fees for services or reimbursement under fixed-price contracts with the federal government or other subgrantor organizations. Actual costs to provide the services are not required to be reported to the federal government or other subgrantor organizations. The schedule includes actual amounts charged to the fixed-price contracts. These amounts may be more than, equal to, or less than the contract funds received from the federal grantor agency or other subgrantor organizations.

### 14. STUDENT LOANS COLLECTED BY THE UNIVERSITY OF WISCONSIN SYSTEM

**Federal Perkins Loan Program—Federal Capital Contributions** (CFDA #84.038)
The amount in the Schedule of Expenditures of Federal Awards includes the outstanding balance of loans receivable as of June 30, 2018, as well as immaterial amounts of administrative costs incurred during the fiscal year.

**Nurse Faculty Loan Program** (NFLP) (CFDA #93.264)
The amount in the Schedule of Expenditures of Federal Awards includes the outstanding balance of loans receivable as of June 30, 2018.

**Health Professions Student Loans, Including Primary Care Loans/Loans for Disadvantaged Students** (CFDA #93.342)
The amount in the Schedule of Expenditures of Federal Awards includes the outstanding balance of loans receivable as of June 30, 2018, as well as immaterial amounts of administrative costs incurred during the fiscal year.

**Nursing Student Loans** (CFDA #93.364)
The amount in the Schedule of Expenditures of Federal Awards includes the outstanding balance of loans receivable as of June 30, 2018, as well as immaterial amounts of administrative costs incurred during the fiscal year.
15. OTHER STUDENT LOAN PROGRAMS

UW System participates in Federal Direct Student Loans (CFDA #84.268), a program that makes interest-subsidized or unsubsidized Stafford loans available to students, or PLUS loans available to graduate or professional students or to parents of dependent students. Federal Direct Student Loans are reported in the Student Financial Assistance Cluster. Loan funds are provided by the U.S. Department of Education, and UW institutions are responsible for disbursing the loans. The Federal Direct Student Loans amounts disbursed to students during FY 2017-18 are reported in the Schedule of Expenditures of Federal Awards. However, the total outstanding loan balance for the Federal Direct Student Loans program is maintained by the U.S. Department of Education, which is responsible for loan collection. Therefore, the outstanding loan balance is not included in the Schedule of Expenditures of Federal Awards.

16. STUDENT FINANCIAL ASSISTANCE CLUSTER ADMINISTRATIVE COST ALLOWANCE

Included in the Schedule of Expenditures of Federal Awards are the total expenditures for the administrative cost allowance provided by Federal Supplemental Educational Opportunity Grants (CFDA #84.007), the Federal Work-Study Program (CFDA #84.033), the Federal Perkins Loan Program—Federal Capital Contributions (CFDA #84.038), and the Federal Pell Grant Program (CFDA #84.063). The actual administrative cost allowance amount earned during the award year is not always determined by each UW institution for each program. These amounts are reported as either “Administrative Cost Allowance” or included with the individual program in the Schedule of Expenditures of Federal Awards.

17. PROGRAM INCOME

In some cases, program income related to federal grants is deposited in federal grant accounts and is spent for activities related to the grants. Certain program income accounts were identified by the state agencies, including UW System, and excluded from the Schedule of Expenditures of Federal Awards. However, the Schedule of Expenditures of Federal Awards includes an unknown amount of expenditures funded by program income sources and not funded directly by federal grants.
Corrective Action Plans
DATE: November 30, 2018

TO: Sherry Haakenson, Financial Audit Director
Legislative Audit Bureau

FROM: Barry Kasten, Deputy Director
Bureau of Fiscal Services, Division of Enterprise Services
Department of Health Services

SUBJECT: Corrective Action Plan to Interim Audit Memos: Financial Reporting at the Department of Health Services

Department of Health Services (DHS) staff has reviewed the Legislative Audit Bureau’s (LAB) interim audit memo for Financial Reporting at the Department of Health Services. This is DHS’ response.

Finding 2018-001: Financial Reporting at the Department of Health Services

Planned Corrective Action:

The Wisconsin Department of Health Services agrees with the audit finding and recommendation and has submitted the correcting entry to the Department of Administration. DHS Bureau of Fiscal Services will ensure closeout activities include detailed discussions of updates or changes that impact financial statement compilation.

Anticipated Completion Date: October 2019

Person responsible for corrective action:
Rebecca Mogensen, Managerial Accounting Section Chief
Division of Enterprise Services, Bureau of Fiscal Services
RebeccaJ.Mogensen@dhs.wisconsin.gov

****
Corrective Action Plan


Planned Corrective Action:

IPFCP has identified three avenues through which the Fund can improve its review process:
- Independent Internal Review by qualified OCI staff
- External Review by a vendor
- Combination of Independent Internal Review and External Review

OCI has identified four individuals within the Funds and Program Management area who are qualified to review financial statements and supplementary information. These individuals are not involved in any aspect of the financial management of the Fund, thus have no access to the Fund’s information unless it is provided, assuring an independent review.

OCI has also identified an outside accounting firm who specializes in insurance accounting, and is familiar with the CAFR. Their services would have to be secured through the Sole Source Waiver process with DOA.

Currently IPFCP is recruiting for its open Accountant position. We hope to complete this process by February of 2019. Once this process is completed, we will determine which of the three options best compliments the skill set of the Accountant, and is feasible with current internal workloads.

Fund management anticipates that external assistance will be needed at some level and will pro-actively start the Sole Source Waiver process with DOA. The procurement process is not completely within the Fund’s control, however we anticipate the Waiver to be approved by May 2019.

Anticipated Completion Date: July 1st, 2019

Person responsible for corrective action:
Brynn Bruijn-Hansen, IPFCF Manager
Office of the Commissioner of Insurance, Injured Patients and Families Compensation Fund
Brynn.bruijn@wisconsin.gov
Corrective Action Plan

**Finding 2018-003:** Department of Administration Division of Enterprise Technology Security Concerns

<table>
<thead>
<tr>
<th>LAB Recommendation</th>
<th>DOA Planned Corrective Action</th>
<th>Anticipated Corrective Action Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. We recommend the Department of Administration, Division of Enterprise Technology (DET) complete written procedures for all areas</td>
<td>The Department will continue to execute its plan as follows:</td>
<td>Started 3/1/2018 with anticipated completion 02/28/2019</td>
</tr>
<tr>
<td></td>
<td>• Town hall sessions were held in the spring with DET staff to reinforce the need to align procedures with policies and standards. Critical build procedures have been identified and prioritized for revisions.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Server Builds: complete</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Staff Onboarding: complete with new Cherwell form</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Network Builds: revisions are planned next</td>
<td></td>
</tr>
<tr>
<td></td>
<td>As new services are developed, it is required to document the appropriate procedures to align with Executive Branch IT Security policies and standards.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Annual reviews of all procedures will take place to ensure compliance with any updates to the Executive Branch IT Security policies and standards.</td>
<td></td>
</tr>
<tr>
<td>2. We recommend DET review all settings and practices to ensure they align with policies, standards, and procedures</td>
<td>• Document the process for the continuous review of current settings/practices to ensure alignment with Executive Branch IT Security policies, standards and procedures.</td>
<td>Begin on or before 2/28/2019 with anticipated completion 6/30/2019</td>
</tr>
<tr>
<td>LAB Recommendation</td>
<td>DOA Planned Corrective Action</td>
<td>Anticipated Corrective Action Date</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------------------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>3. Complete projects initiated in response to security concerns LAB identified</td>
<td>• Conduct initial review of current settings/practices to align with Executive Branch IT Security policies, standards and procedures.</td>
<td>Begin on or before 6/30/2019 with anticipated completion 12/31/2020 and annually thereafter</td>
</tr>
<tr>
<td>4. Develop, document, and implement a proactive process to identify, assess, and address risks</td>
<td>DET has assessed the risk and initiated projects to address the high-risk concerns.</td>
<td>Projects are underway with various completion dates based on project timelines with anticipated completions between 12/30/2018 and 1/14/2020</td>
</tr>
<tr>
<td>5. Report to the Joint Legislative Audit Committee by March 29, 2019, on DET’s plans and timelines to address these ongoing concerns</td>
<td>Document the process for the continuous review to identify, assess, and address risks</td>
<td>12/30/2018</td>
</tr>
<tr>
<td></td>
<td>Will send a written report to the Joint Legislative Audit Committee prior to March 29th, 2019.</td>
<td>March 29, 2019</td>
</tr>
</tbody>
</table>

Person responsible for the corrective action:
Bill Nash
Director, Bureau of Security, Division of Enterprise Technology
Bill.Nash@Wisconsin.gov
Corrective Action Plan

Finding 2018-004: Executive Branch Agency Information Technology Policies and Standards

<table>
<thead>
<tr>
<th>LAB Recommendation</th>
<th>DOA Planned Corrective Action</th>
<th>Anticipated Corrective Action Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Develop and implement a proactive process to identify, assess, and address risks for the parts of the state’s IT environment that DOA is statutorily responsible for, including: Prioritizing its plans and timelines to complete vulnerability assessments and penetration testing across all state devices and networks within the Division of Enterprise Technology data centers</td>
<td>Since vulnerability assessments and penetration testing are two separate functions, DOA will address these as separate plans and implementations as follows: DOA has procured a tool and is in the process of implementing the tool to perform Patch Vulnerability Assessments for all DET managed servers and endpoints. This project includes: • Create the assessment process; • Conduct initial assessment review of the current environment and prioritize identified issues; • Remediate patching and configuration vulnerabilities needing immediate attention. *Note this does not include servers located in the DET data centers that are managed by other entities. Determine tool, develop plan, and implement vulnerability assessments for DET managed network devices within the DET data centers. Penetration Testing for all DET managed devices and networks</td>
<td>Anticipated completion 12/21/2018</td>
</tr>
<tr>
<td>LAB Recommendation</td>
<td>DOA Planned Corrective Action</td>
<td>Anticipated Corrective Action Date</td>
</tr>
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<td>----------------------------------------------------------------------------------</td>
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</tbody>
</table>
| 3. Complete a comprehensive risk assessment across all executive branch agencies | within the DET data centers will be conducted after the vulnerability remediation efforts have been addressed. This project includes:  
   - Create the penetration testing process;  
   - Conduct initial assessment review of the current environment and prioritize identified issues;  
   - Remediate issues needing immediate attention.                                                                 | anticipated completion to be determined based upon plan |
|                                                                                  | Partial risk assessment information will be gathered based upon the steps completed above (item 2). For systems and data not managed by DET, DOA will work with executive branch agencies to develop a plan and timeline to determine the appropriate level of vulnerability assessments and penetration testing to be completed on a regular basis.  
   - Implementation of vulnerability assessments of the identified systems and data including a process for review of results, prioritization of identified issues, and tracking of remediation activity.  
   - Implementation of penetration testing of the identified systems and data including a process for review of results, prioritization of identified issues, and tracking of remediation activity. | Begin 07/31/2019 with anticipated completion 12/31/2019 |
| 3. Report to the Joint Legislative Audit Committee by March 29, 2019, on its plans and timelines to address these concerns | Will send a written report to the Joint Legislative Audit Committee prior to March 29th, 2019.                                                                                                                                  | March 29, 2019                      |
Person responsible for the corrective action:
  Bill Nash
  Director, Bureau of Security, Division of Enterprise Technology
  Bill.Nash@Wisconsin.gov
Corrective Action Plan

Finding 2018-005: STAR Security Concerns

Planned Corrective Action:

No later than January 31, 2019, the Department of Administration will review and update its annual user attestation procedure to ensure a comprehensive review of access to STAR is performed for the next review, adjust access as necessary as a result of the review, and maintain documentation of all access reviews.

No later than June 30, 2019, the Department of Administration will complete a review of security practices and settings for STAR, document procedures and ensure controls over the applications confirm to the policies in the Division of Information Technology IT Security Policy Handbook, and document justifications for any exceptions to the established policies.

The Department of Administration has completed all corrective actions for seven of the specific recommendations in the confidential interim memoranda and will complete the corrective actions for all other recommendations no later than June 30, 2019.

Anticipated Completion Date: June 30, 2019

Person responsible for corrective action:
Tom Laux, STAR Project Manager
Department of Administration
Thomas.Laux@wisconsin.gov
Correspondence Memorandum

Date: December 4, 2018
To: Lisa Kasel, Assistant Audit Director
    Legislative Audit Bureau
From: Cindy Klimke-Armatoski, CPA
      Chief Trust Financial Officer
Subject: Wisconsin Employee Benefit System (WEBS) Security Corrective Action Plan


The Bureau of Information Technology Services (BITS) staff provides ETF managers a report listing staff that have update access to WEBS. Managers review this report to ensure access is consistent with staff’s current job responsibilities and report any changes needed to BITS. This is done on an annual basis.

ETF acknowledges that during the last annual review, some changes requested by managers were not made in the system. Fortunately, with the instances identified, the risk of inappropriate activity was low due to other internal controls in place. For example, when a beneficiary payment is processed, staff verify the payee matches the paper beneficiary form that was signed by the member. In addition, other security controls such as removing user credentials and requiring dual factor authentication prevent former employees from accessing any ETF mainframe systems.

Planned Corrective Action:

Since the audit, ETF has implemented the following process changes to improve tracking WEBS annual review responses and updating system access rights:

1. Security tickets are created in a ticket tracking system to provide a uniform way of tracking update requests.

2. Requests processed by a member of the security team are reviewed and verified by another member of the security team. BITS management reviews to ensure accuracy and completeness.
3. To assist managers in better understanding the access noted in the report, a document describing the WEBS screens will be provided.

4. A report has been created and reviewed by BITS staff to identify situations where users are still in the WEBS security tables, but their mainframe logon id has been removed.

We believe the process changes noted above will ensure that requested access changes are implemented in a timely manner. ETF recognizes the importance of ensuring access to our systems is appropriate. ETF has invested heavily in information security. Our recent efforts include hiring a Chief Information Security Officer (CISO), hiring two additional security staff, conducting a 3rd party security assessment against the SANS Top 20 security controls, creating an information security roadmap, and implementing a security incident response plan.

In addition to the above, BITS will consult with the Office of Internal Audit and business units to further analyze current WEBS access. Based on the analysis, new logical roles will be created that more consistently provide WEBS access based on job duties. Access granted to WEBS will be based on these new logical roles.

**Anticipated Completion Date:** June 30, 2019

Person responsible for corrective action:
Steve Mueller, Chief Information Officer
Division of Management Services
Steve.Mueller@etf.wi.gov
Finding 2018-007: Financial Reporting Concerns – Other Postemployment Benefit Note Disclosures

Planned Corrective Action:

The Department of Administration will ensure that GASB standards are fully considered and the requirements of the standards are being met when preparing the State’s financial statements, required note disclosures, and required supplementary information.

No later than March 31, 2019, the Department of Administration will develop additional procedures to identify financial activities involving newer GASB standards, and ensure that those activities receive sufficient research, discussion and management review prior to inclusion in the draft Comprehensive Annual Financial Report.

**Anticipated Completion Date:** March 31, 2019

**Person responsible for corrective action:**
Cindy Simon, Financial Reporting Section Supervisor
State Controller’s Office
Department of Administration
Cynthia.Simon@wisconsin.gov
December 7, 2018

Kendra Eppler
Financial Audit Director
Wisconsin Legislative Audit Bureau
22 E Mifflin Street, Suite 500
Madison, WI 53703

RE: Finding 2018-008, Financial Reporting for Changes to Infrastructure related Capital Assets at the Department of Transportation

Dear Ms. Eppler,

This letter is the Wisconsin Department of Transportation’s corrective action plan for the finding and recommendations made by the Legislative Audit Bureau (LAB) in the interim memo dated December 4, 2018, regarding the financial reporting for changes to infrastructure related capital assets (Finding 2018-008).

The Wisconsin Department of Transportation agrees with the finding. The Department will ensure that staff have reviewed Governmental Accounting Standards Board (GASB) Statement Number 62 and understand the impacts of any changes to policy and procedure.

No later than March 31, 2019, the Department will develop a process to review any future accounting changes both internally and with the State Controller’s Office. In addition, we will procure a copy of the Governmental Accounting, Auditing, and Financial Reporting (GAAFR) book published by the Governmental Financial Officers Association (GFOA) to assist staff with financial reporting presentation.

The individual responsible for these corrective actions is:

Scott B. Thornton, Controller
Bureau of Financial Management
Scott2.thornton@dot.wi.gov

Sincerely,

Scott

Scott B. Thornton, Controller
Wisconsin Department of Transportation
December 7, 2018

Kendra Eppler
Financial Audit Director
Wisconsin Legislative Audit Bureau
22 E Mifflin Street, Suite 500
Madison, WI 53703

RE: Finding 2018-009, Determination of Infrastructure-related Capital Assets by the Department of Transportation

Dear Ms. Eppler,

This letter is the Wisconsin Department of Transportation's corrective action plan for the finding and recommendations made by the Legislative Audit Bureau (LAB) in the interim memo dated December 6, 2018, regarding the determination of infrastructure-related capital assets (Finding 2018-009).

The Wisconsin Department of Transportation agrees with the finding. The Department will ensure that staff have reviewed and understand the department’s policy and procedures for determining infrastructure related assets.

No later than March 31, 2019, the Department will develop a process for an additional review of data on infrastructure-related capital assets prior to reporting to the LAB and State Controller’s Office. In addition, the Department will update procedures where necessary to clarify processes and will work with the Department of Administration STAR office to provide more consistent data in the STAR system on infrastructure-related projects and capital assets.

The individual responsible for these corrective actions is:

Bryan Thiel, Financial Management Supervisor
Bureau of Financial Management
Bryan.Thiel@dot.wi.gov

Sincerely,

Scott B. Thornton, Controller
Wisconsin Department of Transportation
Corrective Action Plan

Finding 2018-010: Accounting for Crossover Refunding Bonds

Planned Corrective Action:

No later than March 31, 2019, the Department of Administration will develop additional procedures to identify new financial activities, and to ensure that those activities receive sufficient research, discussion and management review prior to inclusion in the draft Comprehensive Annual Financial Report.

Anticipated Completion Date: March 31, 2019

Person responsible for corrective action:
Cindy Simon, Financial Reporting Section Supervisor
State Controller’s Office
Department of Administration
Cynthia.Simon@wisconsin.gov
Corrective Action Plan

Finding 2018-100: Timing of Draws of Federal Funds
Finding 2018-101: Timing of Draws of Federal Funds

Planned Corrective Action:

The State Controller’s Office has notified both the Department of Health Services and the Department of Public Instruction about the need to ensure that the time between payment approval and disbursement is minimized as much as administratively feasible. Additionally, the Wisconsin Accounting Manual has been updated in two locations to highlight this requirement, and the update has been communicated to state agency financial managers.

The State Controller’s Office will work with agencies to determine ways that they may be able to further reduce the time between the payment approval and disbursement. Once those discussions are completed, additional guidance will be provided to all agencies.

And, the State Controller’s Office has asked the STAR support team to determine if there are other ways within the ERP system to centrally ensure that for Part B programs, the federal draws are timed as closely as possible with the disbursement date.

Anticipated Completion Date: June 30, 2019

Person responsible for corrective action:
Jeff Anderson, State Controller
State Controller’s Office
Department of Administration
Jeff.Anderson@wisconsin.gov
Corrective Action Plan

Finding 2018-200: Collection of Child Care Provider Overpayments

Planned Corrective Action:
Since November 2018, Department of Children and Families (DCF) staff and managers have met regularly to discuss the issues surrounding Child Care Provider Overpayment Collections. We decided to continue processing child care provider overpayments through the CSAW system and collect through the STAR system.

The Bureau of Information Technology (BITS) has completed the first part of the CSAW system enhancement in order to process payments received from child care providers. The second part of the CSAW system enhancement will allow the transmission of established overpayment information from the CSAW system to the STAR system. This is scheduled for development and release by June 28, 2019.

Once the enhancement is completed, child care provider overpayments will be batched from the CSAW system to the STAR system; where child care providers will be invoiced and collected and/or referred for further collection action(s) if accounts remain delinquent.

Anticipated Completion Date:
June 28, 2019

Person responsible for corrective action:
Junior Martin, Director
Bureau of Program Integrity
Division of Early Care and Education
Junior.Martin@wisconsin.gov

Hope Koprowski, Director
Bureau of Finance
Division of Management Services
Hope.Koprowski@wisconsin.gov
Corrective Action Plan

Finding 2018-201: Reconciliation of Child Care Payments

Planned Corrective Action: DECE is continuing to work with the third-party provider in the development of an automated reconciliation report. DCF Bureau of Information Technology Services (BITS) is currently in the final steps of creating a manual reconciliation report to be used by the DCF Bureau of Finance to complete the necessary reconciliation steps. Estimated completion of this manual reconciliation report is May 2019 and will be utilized until the fully automated version is made available by the third-party vendor.

Anticipated Completion Date:

Manual Reconciliation Report completion estimate – May 2019

Fully automated Reconciliation Report completion estimate – December 2019

Person responsible for corrective action:

David Timmerman, Director
DCF DECE BOP
David.timmerman@wisconsin.gov
Corrective Action Plan

Finding 2018-202: Monitoring of Child Care Providers

Planned Corrective Action: The Bureau of Early Care Regulation has made revisions to the Health and Safety Monitoring Report to ensure Bureau management has the ability track the Bureau’s progress of monitoring all applicable health and safety requirements annually. Regional and Central Office management staff will meet monthly to review the Bureau’s progress and to address any challenges to achieving the goal of annual monitoring of the health and safety rules.

Anticipated Completion Date:

The anticipated completion date for the 2019 review of the health and safety requirements is December 31, 2019.

Person Responsible for Corrective Action:

Mark Andrews, Bureau Director
Bureau of Early Care Regulation
MarkE.Andrews@wisconsin.gov
Finding 2018-203: Federal Award Monitoring for Child Support Enforcement

**Planned Corrective Action:** DCF Bureau of Finance will perform semiannual draw reconciliations and quarterly FFP adjustments in the Wisconsin state accounting system (STAR) to improve federal draw timeliness.

**Anticipated Completion Date:**

The draw reconciliation for the FFY18 award is complete. The continuing draw reconciliations and adjustments will be completed by the end of the Wisconsin State Fiscal Year 2018-2019.

Person Responsible for Corrective Action:

Hope Koprowski, Bureau Director
Bureau of Finance
Hope.Koprowski@wisconsin.gov
DATE: February 6, 2019

TO: Sherry Haakenson, Financial Audit Director
Legislative Audit Bureau

FROM: Barry Kasten, Deputy Director
Bureau of Fiscal Services
Department of Health Services

SUBJECT: Corrective Action Plan to Interim Audit Memos - Computer Data Matches

Department staff has reviewed the Legislative Audit Bureau’s (LAB) interim audit memo for Case File Documentation – Medical Assistance Program and Computer Data Matches. This is the Department’s response.

☑️ Recommendation (2018-300) Computer Data Matches

We recommend the Wisconsin Department of Health Services:

- We again recommend that the Wisconsin Department of Health Services take additional action to ensure caseworkers follow up in a timely manner on data match discrepancies between CARES and other databases and document the resolution.

Wisconsin Department of Health Services Corrective Action Plan:

The Department of Health Services (DHS) places great importance on timely and accurate eligibility determinations for all applicants and members. It recognizes that timely processing of SWICA discrepancies is one piece of achieving these outcomes. As we reported as part of our December 2017 response, over the course of the last several years we have made a number of systems enhancements to further support discrepancy review and processing. Those enhancements include, but are not limited to the implementation of Error Prone Profiling that identifies areas of significant risk for either worker or consumer error within the eligibility workflow, including Discrepancies on the Dashboard for workers which gave workers better tools to manage the timely processing of outstanding discrepancies and enhancements to ensure alignment between adoption of MAGI policies and how SWICA discrepancies were set.

Since our last submission, DHS has continued to prioritize this work and most recently, in 2018, DHS formed a cross agency initiative with the Department of Children and Families in an effort to further improve SWICA processing and ultimately increase program integrity. The specific
outcomes identified for this partnership include: streamlining the SWICA process to allow for greater consistency our public programs, creating better matches in order to better ensure that the discrepancies that are being created will have an impact to the case and therefore warrant worker action (elimination of false matches), and improve training provided to income maintenance staff to ensure proper understanding of expectations on when and how to work these discrepancies. The work of this initiative has begun, and it is expected that implementation of identified solutions will be done during calendar year 2020. As a result of this work, we expect to see further improvements in timely processing of SWICA discrepancies and increased rates of resolution of these alerts.

**Anticipated Corrective Action Completion Date:**

December, 2020

**Person(s) Responsible for Corrective Action:**

Rebecca McAtee, Director, Bureau of Enrollment Policy and Systems, Division of Medicaid Services, Department of Health Services

**Contact Information:**

Rebecca.McAtee@wisconsin.gov
608-266-8628

**Finding 2018-300: Computer Data Matches**

Medical Assistance Program (CFDA #93.778)

<table>
<thead>
<tr>
<th>Award Number</th>
<th>Award Years</th>
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</thead>
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</tr>
<tr>
<td>1805WI5MAP</td>
<td>2018</td>
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</tbody>
</table>

**Questioned Costs:** Undetermined

****
DATE: February 15, 2019

TO: Sherry Haakenson, Financial Audit Director
    Legislative Audit Bureau

FROM: Barry Kasten, Deputy Director
      Bureau of Fiscal Services
      Department of Health Services

SUBJECT: Corrective Action Plan to Interim Audit Memos – (Finding 2018-301) Medical Assistance Program Payments to Terminated Providers

Department staff has reviewed the Legislative Audit Bureau’s (LAB) interim audit memo for Medical Assistance Program Payments to Terminated Providers. This is the Department’s response.

☑️ Recommendation

We recommend the Wisconsin Department of Health Services:

- **Determine and recoup improper Medical Assistance program payments it made to 57 ineligible providers for services they provided after their termination dates; and**

- **Implement a timely process to identify and recoup payments made to ineligible Medical Assistance program providers for services they provided after their termination dates.**

Wisconsin Department of Health Services Corrective Action Plan:

DHS will begin the work of determining and recouping improper Medical Assistance program payments made to ineligible providers identified by the Legislative Audit Bureau for services they provided after their termination dates.

In addition, DHS will prioritize the development and implementation of a timely process to mitigate the risk of paying improper MA claims to ineligible providers. Initially the Office of Inspector General (OIG) had planned to recover potential improper payment beginning in 2019, using a process it has been developing since January 2018. However, following the release of the audit finding, key staff in the OIG and the Division of Medicaid Services has determined that the Medicaid Management Information System (MMIS) could potentially be enhanced to prevent the payment of claims to ineligible providers, thus eliminating or at least significantly reducing

[www.dhs.wisconsin.gov](http://www.dhs.wisconsin.gov)
the need to initiate recoupments after improper payments have already been made. DHS is prioritizing this work and has started researching the feasibility and effectiveness of implementing a system solution to supplement the process OIG has developed to prevent the payment of claims to ineligible providers.

**Anticipated Corrective Action Completion Date:**

September, 2019: Determining and recouping improper Medical Assistance program payments made to ineligible providers identified by the Legislative Audit Bureau.

September, 2019: Identify potential system solutions to mitigate the risk of paying improper Medical Assistance claims to ineligible providers.

**Person(s) Responsible for Corrective Action:**

Lori Thornton, Deputy Inspector General, Office of the Inspector General, Department of Health Services

Christian Moran, Section Chief, Day-to-Day Claims Operations - System Leads Section, Division of Medicaid Services, Bureau of Systems Management, Department of Health Services

**Contact Information:**

[Lori.Thornton@wisconsin.gov](mailto:Lori.Thornton@wisconsin.gov)  
(608) 261-8308

[Christian.Moran@wisconsin.gov](mailto:Christian.Moran@wisconsin.gov)  
(608) 266-8532

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**Finding 2018-301: Medical Assistance Program Payments to Terminated Providers**

Medical Assistance Program (CFDA #93.778)

<table>
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Questioned Costs: $69,970, Plus an Undetermined Amount

****
DATE: March 4, 2019

TO: Sherry Haakenson, Financial Audit Director
Legislative Audit Bureau

FROM: Barry Kasten, Deputy Director
Bureau of Fiscal Services
Department of Health Services

SUBJECT: Corrective Action Plan to Interim Audit Memo – Subrecipient Monitoring for the Supplemental Nutrition Assistance Program

Department staff has reviewed the Legislative Audit Bureau’s (LAB) interim audit memo for Case File Documentation – Subrecipient Monitoring for the Supplemental Nutrition Assistance Program. This is DHS response.

☑️ Recommendation

- We recommend that the Wisconsin Department of Health Services ensures that all information is communicated to Supplemental Nutrition Assistance Program subrecipients in future contracts and that it conducts timely formal risk assessments to determine the appropriate monitoring of subrecipients as required by Uniform Guidance.

Wisconsin Department of Health Services Corrective Action Plan:

Partial Corrective Action was taken. The Wisconsin Department of Health Services has implemented policies and procedures and provided tools and training to the grant program divisions to ensure compliance with the Uniform Guidance subrecipient monitoring requirements. The Division of Medicaid Services (DMS) intends to fully participate in contract centralization in SFY19, including the Supplemental Nutrition Assistance Program. DMS understands the requirements to ensure compliance with Uniform Guidance subrecipient monitoring, including the use of Department templates that include required Uniform Guidance language as well as completion of Uniform Guidance determinations and corresponding risk assessments per Department guidance.

As follow-up to the FY 2017 audit, DHS is in compliance with Uniform Guidance for the Social Services Block Grant program.

www.dhs.wisconsin.gov
Contact Information:

Laurie.Palchik@dhs.wisconsin.gov
608-266-9748

Erik.J.Hayko@dhs.wisconsin.gov
608-266-6636

Finding 2018-302 Subrecipient Monitoring for the Supplemental Nutrition Assistance Program

State administrative Matching Grants for the Supplemental Nutrition Assistance Program (CFDA #10.561)

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Questioned Costs: None
DATE: March 13, 2019

TO: Sherry Haakenson, Financial Audit Director
Legislative Audit Bureau

FROM: Barry Kasten, Deputy Director
Bureau of Fiscal Services
Department of Health Services

SUBJECT: Corrective Action Plan to Interim Audit Memo – Medical Assistance Program Payments for Ineligible Services to Inmates

Department staff has reviewed the Legislative Audit Bureau’s (LAB) interim audit memo for Case File Documentation – Medical Assistance Program Payments for Ineligible Services to Inmates. This is DHS response.

☑️ Recommendation

We recommend the Wisconsin Department of Health Services:

- Work with the U.S. Department of Health and Human Services and the Wisconsin Department of Corrections to determine an appropriate repayment for instances of improper Medical Assistance Program payments made for the 6,585 medical claims paid on behalf of inmates identified during our audit;

- Implement a process to identify and deny in a timely manner ineligible inmate claims submitted for Medical Assistance Program payment, such as through improved reporting of inmate information, automated enhancements, or a manual review process; and

- Implement improvements in the communication of inmate Medical Assistance Program eligibility and payments with the Wisconsin Department of Corrections.

Wisconsin Department of Health Services Corrective Action Plan:

DHS will work with the U.S. Department of Health and Human Services to repay the federal government for instances of incorrect medical payments made on behalf of inmates during the audit period. DHS will review the criteria used by LAB to identify potential medical service claims to determine if further analysis is necessary.

www.dhs.wisconsin.gov
In addition, DHS will prioritize the development and implementation of a process to mitigate the risk of paying ineligible MA claims for inmates. DHS will prioritize this work and has started researching the feasibility of a systematic or manual processes to ensure appropriate payments for services provided to inmates in compliance with the State Plan and federal law.

Finally, DHS will engage DOC to review the current communication processes for inmate eligibility determinations, allowable services and claims payments for potential process improvements.

**Anticipated Corrective Action Completion Date:**

September, 2019: Determining and recouping improper Medical Assistance program payments for Ineligible Services to inmates.

September, 2019: Identify potential solutions to mitigate the risk of paying ineligible claims for inmates.

September 2019: Engage DOC for review of current communication processes.

**Person(s) Responsible for Corrective Action:**

Michelle Prost, Section Chief, Hospital Rate Setting and Policy Section, Bureau of Rate Setting, Division of Medicaid Services, Department of Health Services

Christian Moran, Section Chief, Day-to-Day Claims Operations - System Leads Section, Bureau of Systems Management, Division of Medicaid Services, Department of Health Services

Deb Waite, Deputy Bureau Director, Bureau of Enrollment Policy and Systems, Division of Medicaid Services, Department of Health Services

**Contact Information:**

[ michelle.prost1@dhs.wisconsin.gov](mailto:michelle.prost1@dhs.wisconsin.gov)  
(608) 266-5475

[Christian.Moran@wisconsin.gov](mailto:Christian.Moran@wisconsin.gov)  
(608) 266-8532

[Deborah.Waite@dhs.wisconsin.gov](mailto:Deborah.Waite@dhs.wisconsin.gov)  
608 261-9421

**Finding 2018-303: Medical Assistance Program Payments for Ineligible Services to Inmates**

*Medical Assistance Program (CFDA #93.778)*
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Questioned Costs: $9,235, Plus an Undetermined Amount
DATE: March 13, 2019

TO: Sherry Haakenson, Financial Audit Director
   Legislative Audit Bureau

FROM: Barry Kasten, Deputy Director
       Bureau of Fiscal Services
       Department of Health Services

SUBJECT: Corrective Action Plan to Interim Audit Memo – Subrecipient Monitoring for the Substance Abuse and Mental Health Services Projects of Regional and National Significance Program

Department staff has reviewed the Legislative Audit Bureau’s (LAB) interim audit memo for Case File Documentation – Subrecipient Monitoring for the Substance Abuse and Mental Health Services Projects of Regional and National Significance Program. This is DHS response.

☑ Recommendation

- We recommend that the Wisconsin Department of Health Services ensures that all information is communicated to Substance Abuse and Mental Health Services Projects of Regional and National Significance subrecipients in future contracts and conduct timely formal risk assessments of subrecipients to determine the appropriate monitoring required by Uniform Guidance.

Wisconsin Department of Health Services Corrective Action Plan:

Partial Corrective Action was taken. The Wisconsin Department of Health Services has implemented policies and procedures and provided tools and training to the grant program divisions to ensure compliance with the Uniform Guidance subrecipient monitoring requirements. The Division of Care and Treatment Services (DCTS) intends to fully participate in contract centralization in SFY19, including the Substance Abuse and Mental Health Services Administration (SAMHSA). DCTS understands the requirements to ensure compliance with Uniform Guidance subrecipient monitoring, including the use of Department templates that include required Uniform Guidance language as well as completion of Uniform Guidance determinations and corresponding risk assessments per Department guidance.

Contact Information:

Laurie.Palchik@dhs.wisconsin.gov
608-266-9748

www.dhs.wisconsin.gov
Finding 2018-304: Subrecipient Monitoring for the Substance Abuse and Mental Health Services Projects of Regional and National Significance Program

Substance Abuse and Mental Health Services of regional and National Significance Program (CFDA #93.243)

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Questioned Costs: None
DATE: March 15, 2019

TO: Sherry Haakenson, Financial Audit Director
    Legislative Audit Bureau

FROM: Barry Kasten, Deputy Director
      Bureau of Fiscal Services
      Department of Health Services

SUBJECT: Explanation and Specific Reason why Corrective Action Plan is not needed to
         Interim Audit Memo – Medical Assistance Program Provider Overpayments

Department staff has reviewed the Legislative Audit Bureau’s (LAB) interim audit memo for
Medical Assistance Program Provider Overpayments. This is DHS response.

☐ Recommendation

We recommend the Wisconsin Department of Health Services:

- We recommend the Wisconsin Department of Health Services comply with the federal
  regulations and return to the federal government its share of Medical Assistance
  Program provider overpayment amounts it has identified and communicated to
  providers.

Wisconsin Department of Health Services Explanation and Specific Reason why Corrective
Action Plan is not needed:

The Department respectfully disagrees with the Legislative Audit Bureau’s (LAB) interim
findings, which are predicated on its interpretation of 42 CFR § 433.316, which addresses
repayment of federal funds for overpayments identified by the MA program. The threshold issue
to determine when a Medicaid program is required to repay the federal share of a MA
overpayment is determining the date of discovery. An overpayment’s date of discovery, when
not resulting from fraud, is determined by the earliest of:

1. The date on which any Medicaid agency official or other State
   official first notifies a provider in writing of an overpayment and
   specifies a dollar amount that is subject to recovery;
2. The date on which a provider initially acknowledges a specific
   overpaid amount in writing to the Medicaid agency; or

www.dhs.wisconsin.gov
(3) The date on which any State official or fiscal agent of the State initiates a formal action to recoup a specific overpaid amount from a provider without having first notified the provider in writing.

42 CFR § 433.316(c).

The LAB interim audit incorrectly concludes that the Department’s preliminary findings satisfy 42 CFR § 433.316(c)(1), in part because the preliminary findings identify a potential specific overpayment. By statute and rule, the Department’s preliminary findings cannot constitute a written notification of an overpayment subject to recovery, because the preliminary findings are not “subject to recovery.” By statute, the Department generally may not recover identified overpayments until a provider has been given reasonable notice and an opportunity for a hearing. Wis. Stat. § 49.45(2)(a)10. The Department’s promulgated rules implementing this statute require the Department to issue a notice of intent to recover (NIR) that also gives notice of a provider’s appeal rights. Wis. Admin. Code § DHS 108.02(9)(b). Therefore, the Department’s preliminary findings do not trigger 42 CFR § 433.316(c)(1).

Although the preliminary findings identify a potential overpayment, there is no requirement that the provider repay that amount. The preliminary findings give the provider enough information to review their records to determine if the preliminary findings are accurate. If the provider agrees in writing with the findings, the date of discovery under 42 CFR § 433.316(c)(2) is triggered. However, the most common outcome is the provider will submit a rebuttal (additional documentation, legal analysis, or other guidance) to challenge the audit findings. Only after a provider submits a rebuttal, or fails to challenge the preliminary findings, does the Department issue a NIR, which triggers 42 CFR § 433.316(c)(1).

The Department has consistently held the position that preliminary findings are not the date of discovery, and do not trigger the one year period to repay the federal share. The preliminary findings are just one step of the audit process, which seeks to ensure a fair and accurate conclusion. The preliminary findings clearly do not meet the federal criteria for a date of discovery of an overpayment. The ongoing injunction against the Department has not altered its analysis on repayments of the federal share. Furthermore, the Department has been subjected to various audits by the federal government, and there has never been a determination that the Department’s practice of refunding the federal share of overpayments identified through audits is inconsistent with the federal reporting requirements.

The Department also disagrees with LAB’s determination that the identified $12.5 million dollars in potential overpayments is subject to repayment of the federal share. There are multiple exceptions to the requirement to repay the federal share within one year of discovery. For identified overpayments resulting from fraud, the deadline to repay the federal share is calculated based on the final determination or judgment of an overpayment in an administrative or judicial process. 42 CFR § 433.316(d)(2). A number of the pending audits have been referred to, and accepted by Wisconsin’s Medicaid Fraud Control Unit, and remain open. A state’s obligation to repay the federal share may also be obviated if the provider is bankrupt or has gone out of business. 42 CFR § 433.318. The LAB’s report does not consider any of these exceptions in its interim audit memo.
DHS is supportive of having additional follow-up discussions with LAB on this issue.

Contact Information:

Anthony.Baize@wisconsin.gov
(608) 266-7436

Lori.Thornton@wisconsin.gov
(608) 261-8308

Finding 2018-305: Medical Assistance Program Provider Overpayments

Medical Assistance Program (CFDA #93.778)

<table>
<thead>
<tr>
<th>Award Number</th>
<th>Award Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>1705WI5MAP</td>
<td>2017</td>
</tr>
<tr>
<td>1805WI5MAP</td>
<td>2018</td>
</tr>
</tbody>
</table>

Questioned Costs: Undetermined Amount
Corrective Action Plan

Finding 2018-400: Subrecipient Monitoring for Substance Abuse and Mental Health Services Projects of Regional and National Significance

Planned Corrective Action:

The Department of Public Instruction (DPI) will review the grant documents associated with all new grant awards to assess whether a recipient of those funds should be classified as contractors or subrecipients. When it is determined that a recipient is classified as a subrecipient, they will receive a grant award notice. The grant award notice that DPI provides to subrecipients contains the Federal Award Identification Number, the date the federal government awarded the federal funds to DPI and the total amount of the of the federal funds obligated, including the current obligation.

A cross-agency federal grant management workgroup at DPI conducts an annual risk assessment for all subrecipients of funds from DPI. Each district is reviewed to determine if they have any of the following risk factors – known fraud, significant audit findings, claims do not match annual report, newly consolidated or split district, fiscal findings or return of federal funds.

The results of the risk assessment are communicated to all subrecipients that have been deemed to need additional terms and conditions added to their grants. The terms and conditions that may be added to a grant are: technical assistance, review and testing of written procedures, quarterly filing of claims, general ledger support for submitted claims, a cash reconciliation or a site visit. All of these terms and conditions are included on their upcoming grant awards. The three districts receiving funds from the Substance Abuse and Mental Health Services program have not been identified as a district needing additional terms and conditions in any of the past three years.

DPI will make the federal grant management workgroup and the annual risk assessment process and results more visible and accessible to all staff on its intranet site and through agency-wide communications.

Anticipated Completion Date: June 30, 2019

Person responsible for corrective action:

Michele McGaffin
Director of Business Services
Division for Finance and Management
michele.mcgaflin@dpi.wi.gov
March 12, 2019

Erin Scharlau, Financial Audit Director
Legislative Audit Bureau
22 East Mifflin Street
Suite 500
Madison, Wisconsin 53703

RE: March 5th Memorandum on Information Technology Controls at the University of Wisconsin System

Dear Ms. Scharlau:

In regard to finding 2018-700, the University of Wisconsin (UW) System Administration agrees with the finding and recommendations.

Our 24-month work plan has evolved to be a living document and is continuously updated as our understanding of risk matures. While UW System Administration understands the value and need for additional information security policies and standards, UW System Administration is dedicated to prioritizing information security initiatives based on risk reduction and availability of institutional resources at the time. For example, other security initiatives, such as the deployment of system-wide security tools to establish a baseline of security across UW System, as well as accelerating the deployment of multi-factor authentication, are 2019 priorities for UW System.

Further, the Information Assurance Council, as mentioned in the memorandum, was disestablished in December 2018. UW System Administration will work with the UW Technology and Information Security Council (TISC) and the Council of Chief Information Officers to address the recommendations as follows:

**Finding: 2018-700, Information Technology Controls at the University of Wisconsin System**

**Federal Program: Student Financial Assistance Cluster**

<table>
<thead>
<tr>
<th>Planned Corrective Action</th>
<th>Anticipated Completion Date</th>
<th>Person Responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continue development and maintenance of a comprehensive IT security program, including developing systemwide IT security policies and procedures across the remaining critical IT areas, as recommended by National Institute of Standards and Technology publications</td>
<td>12/31/2019</td>
<td>Katherine Mayer, UW System Associate Vice President for Information Security, <a href="mailto:kmayer@uwsa.edu">kmayer@uwsa.edu</a></td>
</tr>
</tbody>
</table>

| Complete deployment of enterprise security tools necessary to establish a baseline of protection for UW System | 12/31/2019 | Katherine Mayer, UW System Associate Vice President for Information Security, kmayer@uwsa.edu |

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**Universities:** Madison, Milwaukee, Eau Claire, Green Bay, La Crosse, Oshkosh, Parkside, Platteville, River Falls, Stevens Point, Stout, Superior, Whitewater

**Colleges:** Baraboo/Sauk County, Barron County, Fond du Lac, Fox Valley, Manitowoc, Marathon County, Marinette, Marshfield/Wood County, Richland, Rock County, Sheboygan, Washington County, Waukesha.
### Corrective Action Plans

<table>
<thead>
<tr>
<th>Action</th>
<th>Date</th>
<th>Responsible Party</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accelerate the deployment of MFA throughout UW System</td>
<td>12/31/2019</td>
<td>Katherine Mayer,</td>
</tr>
<tr>
<td></td>
<td></td>
<td>UW System Associate Vice President for Information Security, <a href="mailto:kmayer@uwsa.edu">kmayer@uwsa.edu</a></td>
</tr>
<tr>
<td>Develop a system-wide incident response program</td>
<td>10/31/2019</td>
<td>Katherine Mayer,</td>
</tr>
<tr>
<td></td>
<td></td>
<td>UW System Associate Vice President for Information Security, <a href="mailto:kmayer@uwsa.edu">kmayer@uwsa.edu</a></td>
</tr>
<tr>
<td>Establish additional systemwide information security policies and</td>
<td></td>
<td>Katherine Mayer,</td>
</tr>
<tr>
<td>standards to support the Information Security Program</td>
<td></td>
<td>UW System Associate Vice President for Information Security, <a href="mailto:kmayer@uwsa.edu">kmayer@uwsa.edu</a></td>
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<tr>
<td>Provide guidance and training to individual institutions regarding</td>
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<td></td>
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<tr>
<td>information technology security policies and procedures, as needed</td>
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<tr>
<td>Sponsor monthly collaborative sessions with institution security</td>
<td>1/30/2018</td>
<td>Katherine Mayer,</td>
</tr>
<tr>
<td>staff</td>
<td></td>
<td>UW System Associate Vice President for Information Security, <a href="mailto:kmayer@uwsa.edu">kmayer@uwsa.edu</a></td>
</tr>
<tr>
<td></td>
<td>Continuous</td>
<td></td>
</tr>
<tr>
<td>Act as a resource for interpreting UW System policies and standards,</td>
<td>1/30/2018</td>
<td>Katherine Mayer,</td>
</tr>
<tr>
<td>including the review and determination of approval for compensating</td>
<td></td>
<td>UW System Associate Vice President for Information Security, <a href="mailto:kmayer@uwsa.edu">kmayer@uwsa.edu</a></td>
</tr>
<tr>
<td>controls to policies and standards.</td>
<td></td>
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<td></td>
<td>Continuous</td>
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</tbody>
</table>

Universities: Madison, Milwaukee, Eau Claire, Green Bay, La Crosse, Oshkosh, Parkside, Platteville, River Falls, Stevens Point, Stout, Superior, Whitewater

Colleges: Baraboo/Sauk County, Barron County, Fond du Lac, Fox Valley, Manitowoc, Marathon County, Marinette, Marshfield/Wood County, Richland, Rock County, Sheboygan, Washington County, Waukesha.
<table>
<thead>
<tr>
<th><strong>Complete development of and implement procedures for assessing the level of protection provided for UW systems and data</strong></th>
<th><strong>Completed 03/30/2018</strong></th>
<th>Katherine Mayer, UW System Associate Vice President for Information Security, <a href="mailto:kmayer@uwsa.edu">kmayer@uwsa.edu</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete external UW System Information Security assessments to establish a baseline for assessing the level of protection provided for systems and data</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engage vendor to complete additional UW System Information Security assessments and follow-up testing for institutions previously assessed</td>
<td>12/31/2019</td>
<td>Katherine Mayer, UW System Associate Vice President for Information Security, <a href="mailto:kmayer@uwsa.edu">kmayer@uwsa.edu</a></td>
</tr>
<tr>
<td>Conduct system-wide information security maturity assessment (ITScore)</td>
<td>Completed 02/07/2019</td>
<td>Katherine Mayer, UW System Associate Vice President for Information Security, <a href="mailto:kmayer@uwsa.edu">kmayer@uwsa.edu</a></td>
</tr>
<tr>
<td>Engage vendor to assist in the development of a governance, risk and compliance framework and program for UW System</td>
<td>10/31/2019</td>
<td>Katherine Mayer, UW System Associate Vice President for Information Security, <a href="mailto:kmayer@uwsa.edu">kmayer@uwsa.edu</a></td>
</tr>
</tbody>
</table>

Sincerely,

Katherine Mayer  
Associate Vice President of Information Security  
University of Wisconsin System

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Finding 2018-700

Universities: Madison, Milwaukee, Eau Claire, Green Bay, La Crosse, Oshkosh, Parkside, Platteville, River Falls, Stevens Point, Stout, Superior, Whitewater  
Colleges: Baraboo/Sauk County, Barron County, Fond du Lac, Fox Valley, Manitowoc, Marathon County, Marinette, Marshfield/Wood County, Richland, Rock County, Sheboygan, Washington County, Waukesha.
Date: March 13, 2019

To: Carolyn Stittleburg
Financial Audit Director

From: Kelly Gallagher, Associate Vice President - Office of Finance and Management Services
Wisconsin Technical College System Office


Corrective Action Plan

Finding 2018-900: Monitoring of Subrecipients—Career and Technical Education—Basic Grants to States

Planned Corrective Action: The FY 2020 Grant Award letters, issued in July of 2019, will be revised to include all required award information to the subrecipients.

We will establish and document a formal Risk Assessment Tool to determine the level of monitoring required for each subrecipient prior to July 2019. The assessment tool will be used in the review and evaluation of FY 2020 Triannual Reports and FY 2021 grant applications.

We will maintain documentation of our consistent review of triannual reports.

Anticipated Completion Date: Varies based on the corrective action, all corrective action will be completed prior to March of 2020.

Person responsible for corrective action:
Name, Title: Kelly Gallagher, Associate Vice President - Office of Finance and Management Services
Division or Unit (If applicable): Division of Administrative Services
Email address: kelly.gallagher@wtcsystem.edu