



STATE OF ILLINOIS
**OFFICE OF THE
 AUDITOR GENERAL**

Frank J. Mautino, Auditor General

SUMMARY REPORT DIGEST

STATE OF ILLINOIS STATEWIDE SINGLE AUDIT REPORT

**SINGLE AUDIT
 For the Year Ended June 30, 2021**

Release Date: June 28, 2022

FINDINGS THIS AUDIT: 40				AGING SCHEDULE OF REPEATED FINDINGS			
				Repeated Since	Category 1	Category 2	Category 3
	<u>New</u>	<u>Repeat</u>	<u>Total</u>	2020	30, 31, 34	8	
Category 1:	12	10	22	2019	26, 27	29	
Category 2:	13	5	18	2018		2	
Category 3:	0	0	0	2016		3	
TOTAL	25	15	40	2015	33		
				2014	1, 12		
				2011	17		
FINDINGS LAST AUDIT: 29				2003		10	
				2001	11		

SYNOPSIS

- The State expended approximately \$62.4 billion from federal awards in FY21.
- A total of 21 programs or program clusters were classified and audited as major programs at 12 State agencies. These programs constituted approximately 86.9% of all federal spending, or about \$54.3 billion. In addition, 55 State agencies expended federal financial assistance in FY21. Twelve State agencies accounted for about 99.0% of federal dollars spent.

Category 1: Findings that are **material weaknesses** in internal control and/or a **qualification** on compliance with laws and regulations (material noncompliance).

Category 2: Findings that are **significant deficiencies** in internal control and **noncompliance** with laws and regulations.

Category 3: Findings that have **no internal control issues but are in noncompliance** with laws and regulations.

Significant Agency Findings Classified as *Material Noncompliance* Resulting in an Auditor Qualification

- The Department of Healthcare and Family Services:
 - Did not obtain the annual audited financial reports required for each Managed Care Organization (MCO) specific to each MCO's Medicaid contract for the Children's Health Insurance Program (CHIP) and Medicaid Cluster programs. Additionally, did not perform periodic audits of the accuracy, truthfulness, and completeness of the encounter and financial data submitted by, or on behalf of, each MCO for the CHIP and Medicaid Cluster programs.
- The Department of Human Services:
 - Could not locate case file documentation supporting eligibility determinations and special test requirements for beneficiaries of the SNAP Cluster and/or the Temporary Assistance for Needy Families (TANF) program.
 - Was unable to provide adequate documentation to substantiate the maintenance of effort (MOE) requirements were met for the Block Grants for Prevention and Treatment of Substance Abuse (SAPT) program for award year 2019 that closed during State fiscal year 2021.
 - Did not meet the 5% administrative earmarking requirements of the SAPT program for the federal fiscal year 2019.
 - Failed to provide supporting documentation for the post-expenditure report including a key line item, the number of eligible individuals who received services paid for in part or in whole with federal funds under the Social Services Block Grant (Title XX) program.
 - Did not follow its established program monitoring policies and procedures for subrecipients of the TANF, CCDF Cluster, Social Services Block Grant, and SAPT programs.
- The Illinois Criminal Justice Information Authority:
 - Created a fiscal risk assessment policy but did not execute the risk assessment of subrecipients of the Crime Victim Assistance (CVA) program as required by the Uniform Guidance during fiscal year 2021. Additionally, ICJIA did not perform programmatic and fiscal on-site visits in accordance with its established monitoring procedures, did not have adequate controls around the review of single audit reports, and did not include identifying information with disbursements made to subrecipients.
 - Does not have adequate controls in place to ensure amounts reported on the federal financial status report (SF-425) and the annual Victims of Crime Act (VOCA) progress report are complete and accurate.
- The Illinois Department of Employment Security:
 - Inaccurately calculated the weekly benefit amount (WBA) for certain claimants of the Pandemic Unemployment Assistance (PUA) program during the year ended June 30, 2021. In addition, IDES did not establish adequate internal controls over its third-party service organization who administered the Unemployment Framework for Automated Claim & Tax Services (uFACTS) system used to determine eligibility for the PUA program.
 - Did not implement Federal requirements to improve program integrity and reduce overpayments.
 - Did not complete the Benefit Accuracy Measurement (BAM) case file reviews in accordance with USDOL requirements for the Unemployment Insurance (UI) program.
- The Illinois Emergency Management Agency:
 - Is responsible for filing the statewide Coronavirus Relief Fund (CRF) reports by utilizing self-reported data from each agency, but there is no statewide process to validate completeness of each quarterly report.

In addition, the Illinois Department of Human Services, the Illinois Department of Public Health, the Illinois Criminal Justice Information Authority, the Illinois Department of Transportation, and the Illinois Emergency Management Agency failed to report information required by the Federal Funding Accountability and Transparency Act (FFATA) for awards granted to subrecipients of various programs.

STATE OF ILLINOIS
STATEWIDE SINGLE AUDIT
For the Year Ended June 30, 2021

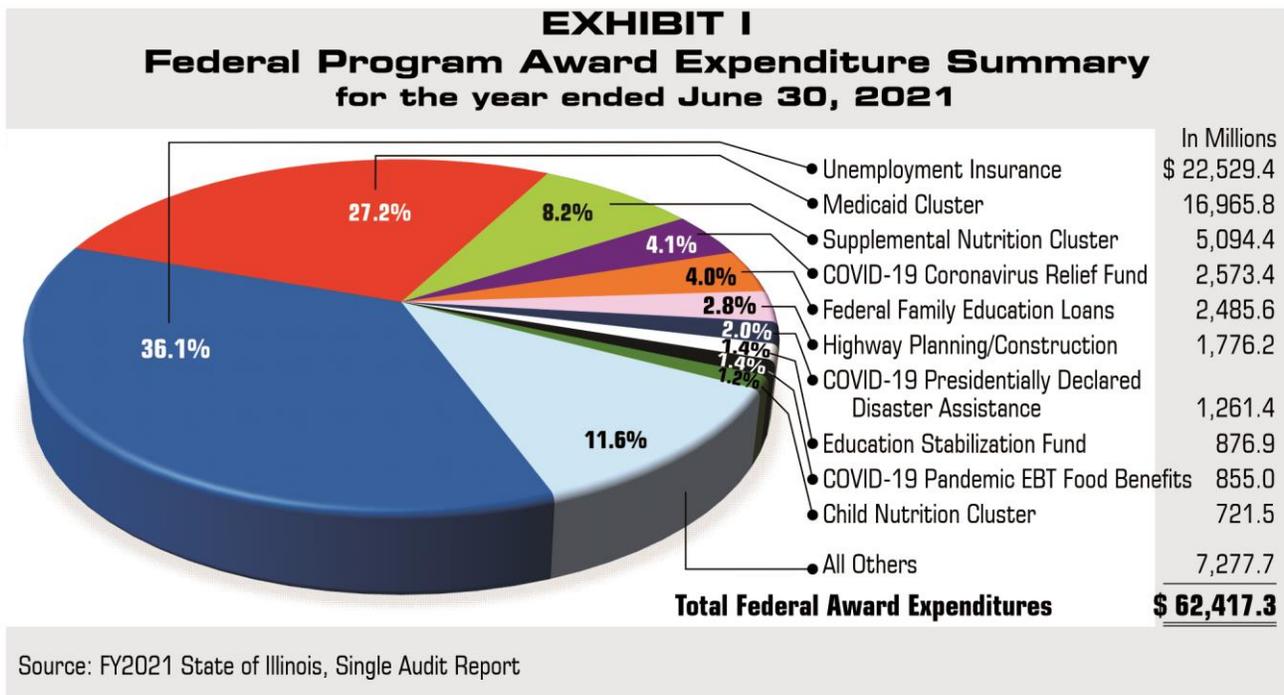
FINANCIAL ACTIVITIES (Amounts in Thousands)	Amount	Percent
EXPENDITURES BY PROGRAM		
Major Programs:		
Unemployment Insurance.....	\$ 22,529,398	36.09%
Medicaid Cluster.....	16,965,763	27.18%
Supplemental Nutrition Assistance Program (SNAP Cluster).....	5,094,429	8.16%
Coronavirus Relief Fund.....	2,573,382	4.12%
Presidentially Declared Disaster Assistance to Individuals and Households.....	1,261,433	2.02%
Education Stabilization Fund.....	876,881	1.40%
Pandemic EBT Food Benefits.....	855,012	1.37%
Temporary Assistance for Needy Families.....	593,574	0.95%
Disaster Grants - Public Assistance (Presidentially Declared Disasters).....	585,680	0.94%
IDEA/Special Education Cluster.....	555,272	0.89%
Airport Improvement Program.....	508,551	0.81%
Children's Health Insurance Program.....	495,153	0.79%
CCDF Cluster.....	368,806	0.59%
Emergency Rental Assistance Program.....	257,083	0.41%
Epidemiology and Laboratory Capacity for Infectious Diseases.....	185,424	0.30%
Foster Care - Title IV.....	150,648	0.24%
Coronavirus State and Local Fiscal Recovery Funds.....	116,379	0.19%
Adoption Assistance.....	88,216	0.14%
Crime Victim Assistance.....	75,998	0.12%
Block Grants for Prevention and Treatment of Substance Abuse.....	62,270	0.10%
Social Services Block Grant.....	56,512	0.09%
Total Major Programs.....	\$ 54,255,864	86.90%
Non-Major Programs.....	8,161,450	13.10%
TOTAL EXPENDITURES.....	\$ 62,417,314	100.00%
FEDERAL AGENCIES PROVIDING FUNDING (Amounts in Thousands)		
	Total	Major Program Expenditures
U.S. Department of Labor.....	\$ 22,715,335	\$ 22,529,398
U.S. Department of Health and Human Services.....	19,884,909	18,966,366
U.S. Department of Agriculture.....	7,017,479	5,949,441
U.S. Department of Education.....	4,940,152	1,432,153
U.S. Treasury Department.....	2,946,844	2,946,844
U.S. Department of Transportation.....	2,384,826	508,551
U.S. Department of Homeland Security.....	1,942,811	1,847,113
U.S. Department of Justice.....	96,662	75,998
All Other Federal Agencies.....	488,296	-
TOTAL EXPENDITURES.....	\$ 62,417,314	\$ 54,255,864
STATISTICAL INFORMATION		
Total Number of Programs in the Schedule of Expenditures of Federal Awards.....	294	
Number of Federal Programs or Program Clusters Audited (including finding follow-up).....	32	
Total Number of State Agencies Spending Federal Funds.....	55	
Number of State Agencies for Single Audit Requirements (including finding follow-up).....	14	

INTRODUCTION

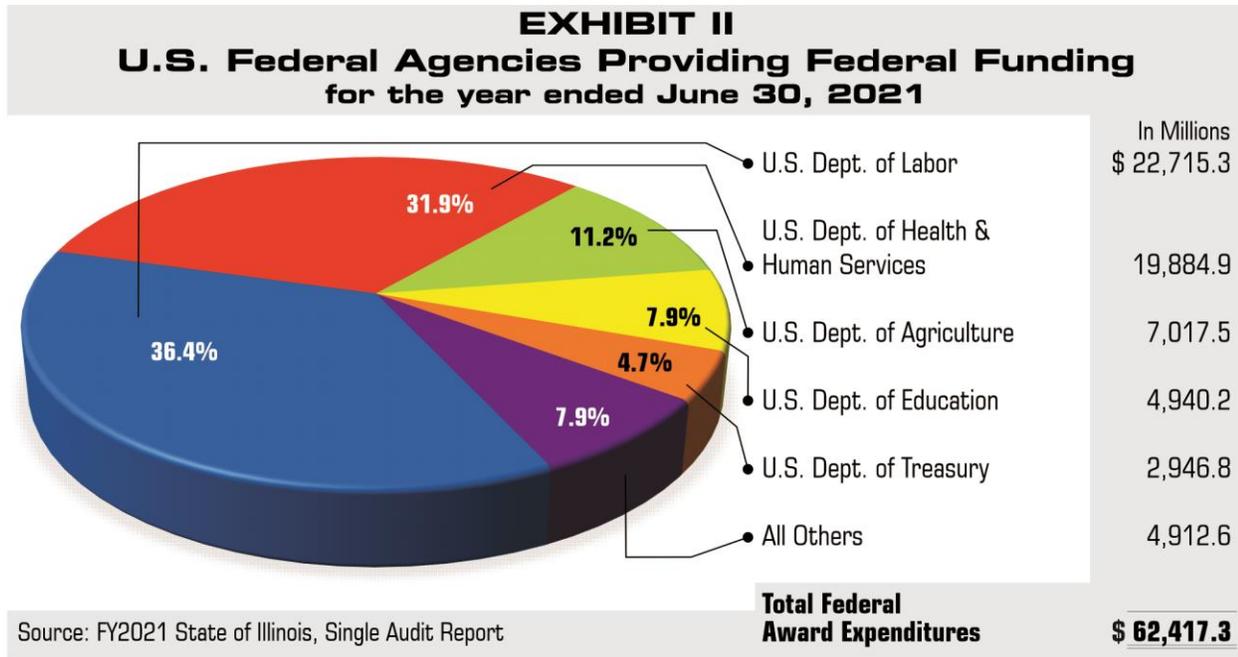
The Illinois Office of the Auditor General conducted a Statewide Single Audit of the FY21 federal grant programs. The audit was conducted in accordance with the Uniform Guidance (Title 2 U.S. Code of Federal Regulation Part 200, *Uniform Administration Requirements, Cost Principles, and Audit Requirements for Federal Awards*).

The Statewide Single Audit includes State agencies that are a part of the primary government and expend federal awards. In total, 55 State agencies expended federal financial assistance in FY21. A separate supplemental report has been compiled by the Governor’s Office of Management and Budget and provides summary information on federal spending by State agency. The Statewide Single Audit does not include those agencies that are defined as component units such as the State universities and finance authorities. The component units continue to have separate single audits when required.

The Schedule of Expenditures of Federal Awards (SEFA) reflects total expenditures of approximately \$62.4 billion for the year ended June 30, 2021. Overall, the State participated in 294 different federal programs; however, 10 of these programs or program clusters accounted for approximately 88.4% of the total federal award expenditures. (See Exhibit I)



The funding for the 294 programs was provided by 23 different federal agencies. Exhibit II shows that five federal agencies provided Illinois with the vast majority of federal funding in FY21.

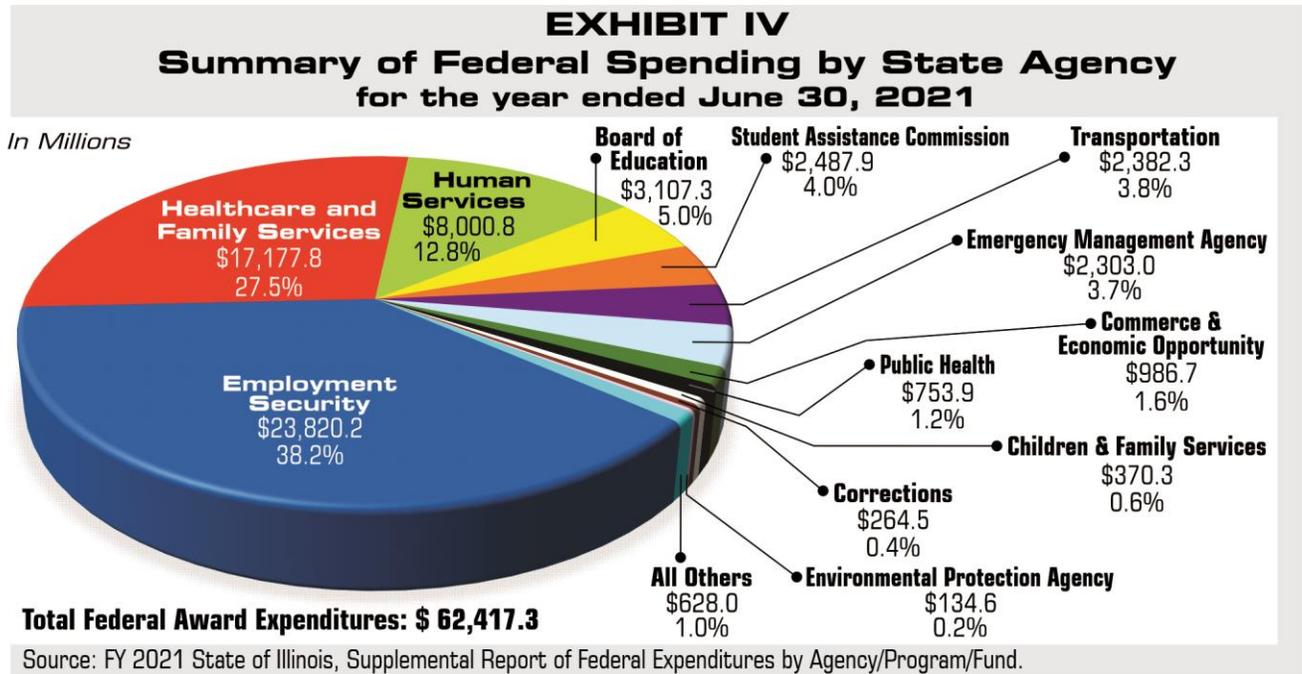


A total of 21 federal programs or program clusters were identified as major programs in FY21. A major program was defined in accordance with the Uniform Guidance as any program with federal awards expended that meets certain criteria when applying the risk-based approach. Exhibit III provides a brief summary of the number of programs classified as “major” and “non-major” and related federal award expenditures.

EXHIBIT III
Classification of Federal Programs
“Major vs. Non-Major”
and Related Federal Award Expenditures
for the year ended June 30, 2021

Audit Coverage	No.	Expenditures (in millions)	%
Major Programs (or clusters)	21	\$54,255.9	86.9%
Non-Major Programs (or clusters)	273	8,161.4	13.1%
Total	<u>294</u>	<u>\$62,417.3</u>	<u>100.0%</u>

Twelve State agencies accounted for approximately 99.0% of all federal dollars spent during FY21 as depicted in Exhibit IV.



AUDITORS' REPORT
ON COMPLIANCE WITH REQUIREMENTS THAT COULD HAVE A DIRECT AND MATERIAL
EFFECT ON EACH MAJOR PROGRAM AND INTERNAL CONTROL OVER COMPLIANCE

The auditors' report contained qualifications on compliance as summarized below. The complete text of the Auditors' Report may be found on pages 16-20 of the audit.

Qualifications

The auditors qualified their report on major programs for the following noncompliance findings:

State Administering Agency	Federal Program	Compliance Requirement(s)	Finding Number	Page Numbers
IL Department of Healthcare and Family Services	Children's Health Insurance Program	Special Tests	2021-009	40-41
IL Department of Healthcare and Family Services	Medicaid Cluster	Special Tests	2021-009	40-41
IL Department of Human Services	SNAP Cluster	Special Tests	2021-011	44-46

IL Department of Human Services	Temporary Assistance for Needy Families	Eligibility and Special Tests	2021-011	44-46
IL Department of Human Services	Block Grants for Prevention and Treatment of Substance Abuse	Matching, Level of Effort, and Earmarking	2021-012	47-48
IL Department of Human Services	Block Grants for Prevention and Treatment of Substance Abuse	Matching, Level of Effort, and Earmarking	2021-013	49-50
IL Department of Human Services	Block Grants for Prevention and Treatment of Substance Abuse	Reporting	2021-014	51-52
IL Department of Human Services	Temporary Assistance for Needy Families	Reporting	2021-015	53-55
IL Department of Human Services	Social Services Block Grant	Reporting	2021-015	53-55
IL Department of Human Services	COVID-19 – CCDF Cluster	Reporting	2021-015	53-55
IL Department of Human Services	Social Services Block Grant	Eligibility and Reporting	2021-016	56-57
IL Department of Human Services	Temporary Assistance for Needy Families	Subrecipient Monitoring	2021-017	58-61
IL Department of Human Services	COVID-19 – CCDF Cluster	Subrecipient Monitoring	2021-017	58-61
IL Department of Human Services	Social Services Block Grant	Subrecipient Monitoring	2021-017	58-61
IL Department of Human Services	Block Grants for Prevention and Treatment of Substance Abuse	Subrecipient Monitoring	2021-017	58-61
IL Department of Public Health	COVID-19 – Epidemiology and Laboratory Capacity for Infectious Diseases	Reporting	2021-021	68-69
IL Criminal Justice Information Authority	Crime Victim Assistance	Subrecipient Monitoring	2021-026	80-82
IL Criminal Justice Information Authority	Crime Victim Assistance	Reporting and Matching	2021-027	83-84
IL Criminal Justice Information Authority	Crime Victim Assistance	Reporting	2021-028	85-86
IL Department of Employment Security	COVID-19 – Unemployment Insurance	Eligibility	2021-030	89-91
IL Department of Employment Security	Unemployment Insurance	Special Tests	2021-033	96-97
IL Department of Employment Security	Unemployment Insurance	Special Tests	2021-034	98-100
IL Department of Transportation	COVID-19 – Airport Improvement Program	Reporting	2021-036	103-104
IL Emergency Management Agency	COVID-19 – Coronavirus Relief Fund	Reporting	2021-038	107-108

IL Emergency Management Agency	COVID-19 – Disaster Grants – Public Assistance (Presidentially Declared Disasters)	Reporting	2021-039	109-110
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Internal Control Over Compliance

We noted certain matters involving internal control over compliance that were considered to be significant deficiencies. A control deficiency in an entity’s 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 significant deficiency in internal control over compliance is a deficiency, or 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. Overall, 17 of the 40 findings reported in the single audit were classified as compliance significant deficiencies.

Material weaknesses were also disclosed in our report. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. Overall, 23 of the 40 findings reported in the single audit were classified as material weaknesses.

FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS

Exhibit V summarizes the number of report findings by State agency, identifies the number of repeat findings, and references the findings to specific pages in the report.

**EXHIBIT V
Summary Schedule of Findings By Agency**

State Agency	Number of Findings	Number of Repeat Findings	Page References to Findings
Children and Family Services	3	3	24-29
Healthcare and Family Services	6	1	30-41
Human Services	8	4	42-61
Revenue	1	0	62-63
Public Health	5	0	64-74
Governor’s Office of Management and Budget	2	0	75-79
Illinois Criminal Justice Information Authority	4	3	80-88
Employment Security	6	4	89-102
Transportation	2	0	103-106
Emergency Management Agency	<u>3</u>	<u>0</u>	107-112
Totals	<u>40</u>	<u>15</u>	

Exhibit VI summarizes the total number of findings, number of repeated findings, and the percentage of repeated findings for the past ten years.

EXHIBIT VI
Ten Year Analysis of Number of Findings, Number of Findings Repeated and Percentage of Repeat Findings

Year	Number of Findings	Number of Repeated Findings	Percentage of Repeated Findings
2021	40	15***	38%
2020*	29	19**	66%
2019	69	51	74%
2018	80	59	74%
2017	72	53	74%
2016	73	49	67%
2015	75	51	68%
2014	69	47	68%
2013	74	59	80%
2012	91	63	69%
2011	101	71	70%

*Beginning in Fiscal Year 2020, we have implemented a change in our presentation of the results of prior year finding follow up. The Code of Federal Regulations (2 CFR 200.511) requires a summary schedule of prior audit findings to report the status of all audit findings included in the prior audit’s schedule of findings and questioned costs. The current year summary schedule of prior audit findings is included in the separately bound *Supplemental Report of Federal Expenditures*, prepared by the Governor’s Office of Management and Budget. In addition, beginning with the 2019 Compliance Supplement, federal agencies were mandated by the federal Office of Management and Budget to limit the number of compliance requirements subject to the compliance audit to six. These changes resulted in an overall decrease in the number of findings reported in the scope of our compliance audit for Fiscal Year 2020 and impact the comparability of Fiscal Year 2020 to preceding years in Exhibit VI.

**Two of the findings presented in the 2019 report were combined and presented as a single repeated finding in the 2020 report.

***One of the repeat audit findings included in this June 30, 2021 report was reported in the June 30, 2020 Schedule of Prior Findings. The find related to a compliance requirement that was not direct and material during the June 30, 2020 audit.

DEPARTMENT OF HEALTHCARE AND FAMILY SERVICES (DHFS)

We noted DHFS, as the administering State agency, did not materially comply with specific requirements described on page 17 of the Single Audit Report.

Audited financial reports not obtained

Specifically, we noted DHFS did not obtain the annual audited financial reports required for each managed Care Organization (MCO) specific to each MCO's Medicaid contract of the Children's Health Insurance Program (CHIP) and Medicaid Cluster programs. Additionally, DHFS did not perform periodic audits of the accuracy, truthfulness, and completeness of the encounter and financial data submitted by, or on behalf of, each MCO for the CHIP and Medicaid Cluster programs. As a result of not performing periodic audits, no audit results were available to be posted on DHFS' website. (Finding No. 2021-009, pages 40-41)

Qualified opinions on CHIP and Medicaid Cluster programs

The material noncompliance noted resulted in modified opinions on compliance for the CHIP and Medicaid Cluster programs. DHFS accepted our recommendations.

DEPARTMENT OF HUMAN SERVICES (IDHS)

We noted IDHS, as the administering State agency, did not materially comply with specific requirements described on page 17 of the Single Audit Report.

Specifically, we noted the following:

Could not locate case file documentation

- IDHS could not locate case file documentation supporting eligibility determinations and special test requirements for beneficiaries of the SNAP Cluster and/or the Temporary Assistance for Needy Families (TANF) program. **Similar findings on this issue have been reported since 2001.** (Finding No. 2021-011, pages 44-46)

Inadequate documentation to substantiate MOE requirements were met

- IDHS was unable to provide adequate documentation to substantiate the maintenance of effort (MOE) requirements were met for the Block Grants for Prevention and Treatment of Substance Abuse (SAPT) program for award year 2019 that closed during State fiscal year 2021. **Similar findings on this issue have been reported since 2014.** (Finding No. 2021-012, pages 47-48)

5% administrative earmarking requirements not met

- IDHS did not meet the 5% administrative earmarking requirements of the SAPT program for the federal fiscal year 2019. IDHS overreported administrative expenditures by \$206,510. No more than 5% of the grant may be expended to pay administrative costs. (Finding No. 2021-013, pages 49-50)

Failed to provide supporting documentation for report

- IDHS failed to provide supporting documentation for the post-expenditure report including a key line item, the number of eligible individuals who received services paid for in part or in whole with federal funds under the Social Services Block Grant

(Title XX) program. As a result of the documentation deficiencies identified, testing a sample of individuals to verify the individual was eligible for the service received could not be performed. (Finding No. 2021-016, pages 56-57)

Program monitoring policies and procedures not followed

- IDHS did not follow its established program monitoring policies and procedures for subrecipients of the TANF, CCDF Cluster, Title XX, and SAPT programs. IDHS did not perform on-site monitoring reviews of subrecipients in accordance with IDHS' planned monitoring schedule and/or could not provide support for the review. In addition, IDHS did not provide timely notification of the results of programmatic on-site reviews and did not complete quality reviews on a timely basis. **Similar findings on this issue have been reported since 2011.** (Finding No. 2021-017, pages 58-61)

Qualified opinions on TANF, SNAP Cluster, SAPT, Title XX, and CDF Cluster programs

The material noncompliance noted resulted in modified opinions on compliance for the TANF, SNAP Cluster, SAPT, Title XX, and CCDF Cluster programs. IDHS accepted our recommendations.

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY (ICJIA)

We noted ICJIA, as the administering State agency, did not materially comply with specific requirements described on page 18 of the Single Audit Report.

Specifically, we noted the following:

Did not execute the risk assessment of subrecipients

- ICJIA created a fiscal risk assessment policy but did not execute the risk assessment of subrecipients of the Crime Victim Assistance (CVA) program as required by the Uniform Guidance during fiscal year 2021. Additionally, ICJIA did not perform programmatic and fiscal on-site visits in accordance with its established monitoring procedures, did not have adequate controls around the review of single audit reports, and did not include identifying information with disbursements made to subrecipients. **Similar findings on this issue have been reported since 2019.** (Finding No. 2021-026, pages 80-82)

Inadequate controls to ensure SF-425 and VOCA reports were complete and accurate

- ICJIA does not have adequate controls in place to ensure amounts reported on the federal financial status report (SF-425) and the annual Victims of Crime Act (VOCA) progress report are complete and accurate. We noted the total recipient share of expenditures of approximately \$15.1 million reported on the final SF-425 submitted for the Federal fiscal year 2017 did not agree to supporting documentation. Specifically, we noted two matching contributions did not agree to the underlying expenditure reports submitted by subrecipients, and as a result of these errors, the total recipient share of expenditures was understated by approximately \$17,000. **Similar findings on this issue have been reported since 2019.** (Finding No. 2021-027, pages 83-84)

Qualified opinion on Crime Victim Assistance program

The material noncompliance noted resulted in a modified opinion on compliance for the Crime Victim Assistance program. ICJIA accepted our recommendations.

ILLINOIS DEPARTMENT OF EMPLOYMENT SECURITY (IDES)

We noted IDES, as the administering State agency, did not materially comply with specific requirements described on page 18 of the Single Audit Report.

Specifically, we noted the following:

Inaccurate calculation of weekly benefit amount for certain PUA claimants

- IDES inaccurately calculated the weekly benefit amount (WBA) for certain claimants of the Pandemic Unemployment Assistance (PUA) program during the year ended June 30, 2021. In addition, IDES did not establish adequate internal controls over its third-party service organization who administered the Uemployment Framework for Automated Claim & Tax Services (uFACTS) system used to determine eligibility for the PUA program. IDES used an outdated WBA pay chart table to calculate the weekly benefit amount for PUA claimants, resulting in underpayments to some PUA claimants. In addition, we identified 3 data entry errors in the PUA system which resulted in the incorrect WBA being calculated and paid to PUA claimants. (Finding No. 2021-030, pages 89-91)

Federal requirements to improve program integrity and reduce overpayments not implemented

- IDES did not implement Federal requirements to improve program integrity and reduce overpayments. The State is required to establish written procedures for: (1) identifying overpayments, (2) classifying overpayments into categories based on the reason the overpayment occurred, and (3) establishing appropriate methods for following up on each category of overpayment. In establishing these procedures, the State is required to enter into three agreements prior to commencing recoveries, including an agreement to permit the State to offset State unemployment insurance (UI) from Federal UI payments, an agreement to permit the State to recover overpayments from benefits being administered by another State, and an agreement to permit the State to utilize the Treasury Offset Program to recover overpayments that remain uncollected. During our testing, we noted that while IDES has developed the written procedures relative to overpayments and has entered into the required agreements, the written procedures did not address the requirement to impose a monetary penalty on fraud overpayments. Additionally, we noted the policies do not address the prohibition of providing employers relief resulting from an employer failing to provide timely or adequate information. **Similar findings on this issue have been reported since 2015.** (Finding No. 2021-033, pages 96-97)

BAM case file reviews not completed as required

- IDES did not complete the Benefit Accuracy Measurement (BAM) case file reviews in accordance with USDOL requirements for the Unemployment Insurance (UI) program.

IDES' BAM unit is required to draw samples of payments and denied claims and complete prompt and in-depth investigations to determine if the administration of the unemployment compensation program is consistent with State and federal law. During our testing, we noted IDES did not achieve the required percentage of case reviews within the required timeframes. (Finding No. 2021-034, pages 98-100)

Qualified opinion on UI program

The material noncompliance noted resulted in a modified opinion on compliance for the Unemployment Insurance program. IDES accepted our recommendations.

ILLINOIS EMERGENCY MANAGEMENT AGENCY (IEMA)

We noted IEMA, as the administering State agency, did not materially comply with specific requirements described on page 18 of the Single Audit Report.

No process to validate completeness of quarterly reports

Specifically, we noted IEMA is responsible for filing the statewide Coronavirus Relief Fund (CRF) reports by utilizing self-reported data from each agency, but there is no statewide process to validate completeness of each quarterly report. The State of Illinois delegated the statewide reporting for CRF to IEMA. IEMA's process includes instructing each agency with CRF expenses to complete the Treasury reporting template. IEMA then consolidates the templates to create a consolidated report to file with the U.S. Treasury Department. There is no process to verify the agency templates include all the expenditures for the quarter, nor is there a year-end process to reconcile the four quarters to the Schedule of Expenditures of Federal Awards. (Finding No. 2021-038, pages 107-108)

Qualified opinion on CRF program

The material noncompliance noted resulted in a modified opinion on compliance for the Coronavirus Relief Fund program. IEMA accepted our recommendation.

FAILURE TO REPORT SUBAWARD INFORMATION REQUIRED BY FFATA

Complete and accurate subaward information not reported

IDHS, the Illinois Department of Public Health (IDPH), ICJIA, the Illinois Department of Transportation, and IEMA (collectively, the agencies) failed to report information required by the Federal Funding Accountability and Transparency Act (FFATA) for awards granted to subrecipients of multiple programs.

FFATA requires the State to report certain identifying information related to awards made to subrecipients in amounts greater than or equal to \$30,000. Of the information required to be reported, the following key data elements are required to be audited:

Key data elements

1. Subawardee Name
2. Subawardee DUNS number
3. Amount of subaward
4. Subaward obligation or action date
5. Date of report submission

6. Subaward number
7. Subaward project description
8. Subawardee names and compensation of highly compensated officers

Multiple findings of material noncompliance

Failure to identify awards subject to FFATA and to report subawards in accordance with FFATA results in noncompliance with federal requirements. (Finding No. 2021-014, pages 51-52; Finding No. 2021-015, pages 53-55; Finding No. 2021-021, pages 68-69; Finding No. 2021-028, pages 85-86; Finding No. 2021-036, pages 103-104; Finding No. 2021-039, pages 109-110)

Qualified opinions on multiple programs

The material noncompliance described above resulted in modified opinions on the SAPT, TANF, SSBG, CCDF, Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), Crime Victim Assistance, Airport Improvement Program, and Disaster Grants – Public Assistance (Presidentially Declared Disasters) programs.

Recommendations accepted

The agencies accepted our recommendations.

OTHER FINDINGS

The remaining findings pertain to other compliance and internal control matters. We will follow up on the status of corrective action on all findings in our next Statewide Single Audit for the year ended June 30, 2022.

AUDITORS' OPINION

The auditors stated the Schedule of Expenditures of Federal Awards for the State of Illinois as of and for the year ended June 30, 2021, is presented fairly in all material respects.

This single audit was conducted by the firm of KPMG LLP.

SIGNED ORIGINAL ON FILE

Jane Clark
Division Director

This report is transmitted in accordance with Section 3-14 of the Illinois State Auditing Act.

SIGNED ORIGINAL ON FILE

FRANK J. MAUTINO
Auditor General

FJM:CMD