

OFFICE OF THE COUNTY AUDITOR

COUNTY OF MAUI 2145 WELLS STREET, SUITE 106 - WAILUKU, MAUI, HAWAII 96793 http://www.mauicounty.gov/auditor

February 7, 2017

OFFICE OF THE

The Honorable Mike White, Chair and Members of the Council County of Maui Wailuku, Hawaii 96793

Dear Chair White and Members:

SUBJECT:

COUNTY OF MAUI SINGLE AUDIT REPORT, MANAGEMENT ADVISORY REPORT, AND REQUIRED AUDITOR'S COMMUNICATION LETTER

We have received the County of Maui Single Audit Report, Management Advisory Report, and required communications letter for the Fiscal Year Ended June 30, 2016, submitted by N&K CPAs, Inc., the County's contractor.

Transmitted are 19 copies of the reports and letter.

May I request that the reports be referred to the appropriate standing committee for discussion and action.

Sincerely,

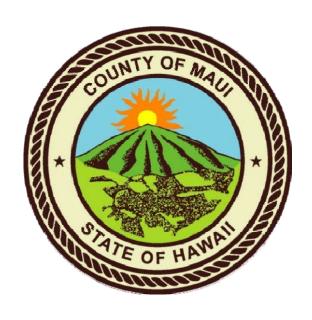
LANCE T. TAGUCHI

County Auditor

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Enclosures

COUNTY OF MAUI STATE OF HAWAI'I



SINGLE AUDIT REPORT

FOR THE FISCAL YEAR ENDED JUNE 30, 2016



January 27, 2017

To the Council Chair, and Members of the Council County of Maui Wailuku, Maui, Hawai'i

We have completed our financial audit of the basic financial statements and other supplementary information of the County of Maui, Hawai'i (the County), as of and for the fiscal year ended June 30, 2016. Our report containing our opinions on those basic financial statements is included in the County's *Comprehensive Annual Financial Report*. We submit herein our reports on the County's internal control over financial reporting and compliance, the County's compliance with requirements that could have a direct and material effect on each of its major federal programs and internal control over compliance, and our report on the schedule of expenditures of federal awards.

OBJECTIVES OF THE AUDIT

The primary purpose of our audit was to form opinions on the fairness of the presentation of the County's basic financial statements as of and for the fiscal year ended June 30, 2016, and to comply with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), which establishes audit requirements for state and local governments that receive federal financial assistance. More specifically, the objectives of the audit were as follows:

- 1. To provide a basis for an opinion on the fairness of the presentation of the County's financial statements.
- 2. To report on internal control over financial reporting and compliance with 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 in accordance with *Government Auditing Standards*.
- 3. To report on internal control over compliance related to major federal programs and an opinion on compliance with federal statutes, regulations, and the terms and conditions of federal awards that could have a direct and material effect on each major program in accordance with the Single Audit Act Amendments of 1996 and the Uniform Guidance.

SCOPE OF THE AUDIT

Our audit was performed in accordance with auditing standards generally accepted in the United States of America as prescribed by the American Institute of Certified Public Accountants; *Government Auditing Standards*, issued by the Comptroller General of the United States; and the provisions of the Uniform Guidance. The scope of our audit included an examination of the transactions and accounting records of the County for the fiscal year ended June 30, 2016.

ORGANIZATION OF THE REPORT

This report is presented in five parts as follows:

- Part I Our report on internal control over financial reporting and on compliance and other matters.
- Part II Our report on compliance for each major federal program; report on internal control over compliance; and report on the schedule of expenditures of federal awards required by the Uniform Guidance.
- Part III The schedule of findings and questioned costs.
- Part IV The corrective action plan.
- Part V The summary schedule of prior audit findings.

We wish to express our sincere appreciation for the excellent cooperation and assistance extended by the staff of the County.

Sincerely,

N&K, CPAs, INC.

Phr. S

Blake Isobe

Principal

COUNTY OF MAUI, HAWAI'I

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PART I

REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS



REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

INDEPENDENT AUDITOR'S REPORT

To the Council Chair, and Members of the Council County of Maui Wailuku, Maui, Hawai'i

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the governmental activities, the business-type activities, each major fund, and the aggregate remaining fund information of the County of Maui, Hawai'i (the County) as of and for the fiscal year ended June 30, 2016, and the related notes to the financial statements, which collectively comprise the County's basic financial statements, and have issued our report thereon dated December 13, 2016.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the County's internal control over financial reporting (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 County's internal control. Accordingly, we do not express an opinion on the effectiveness of the County's internal control.

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

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that were not identified. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. We did identify certain deficiencies in internal control, described in the accompanying schedule of findings and questioned costs, as items 2016-001 through 2016-010 that we consider to be significant deficiencies.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the County's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the 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*.

In addition, we noted other matters involving internal controls and its operation that we have reported to management of the County, in a separate letter dated December 13, 2016.

The County's Response to Findings

The County's response to the findings identified in our audit is described in Part IV, Corrective Action Plan. The County's response was not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on it.

Purpose of this Report

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

N&K OPAS, Inc.

Honolulu, Hawai'i December 13, 2016

PART II

REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM; REPORT ON INTERNAL CONTROL OVER COMPLIANCE; AND REPORT ON THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS REQUIRED BY THE UNIFORM GUIDANCE



REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM; REPORT ON INTERNAL CONTROL OVER COMPLIANCE; AND REPORT ON THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS REQUIRED BY THE UNIFORM GUIDANCE

INDEPENDENT AUDITOR'S REPORT

To the Council Chair, and Members of the Council County of Maui Wailuku, Maui, Hawai'i

Report on Compliance for Each Major Federal Program

We have audited the County of Maui's (the County) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the County's major federal programs for the fiscal year ended June 30, 2016. The County's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management 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 County's major federal programs based on our audit of the types of compliance requirements referred to above. 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*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the

County'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 opinion on compliance for each major federal program. However, our audit does not provide a legal determination of the County's compliance.

Opinion on Each Major Federal Program

In our opinion, the County complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the fiscal year ended June 30, 2016.

Report on Internal Control over Compliance

Management of the County is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the County's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing 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 the Uniform Guidance, but 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 County's internal control over compliance.

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 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. 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.

Our consideration of 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. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, we identified certain deficiencies in internal control over compliance, as described in the accompanying schedule of findings and questioned costs as items 2016-011 and 2016-012, that we consider to be significant deficiencies.

The County's response to the internal control over compliance findings identified in our audit is described in Part IV, Corrective Action Plan. The County's response was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

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

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

We have audited the financial statements of the governmental activities, the business-type activities, each major fund, and the aggregate remaining fund information of the County, as of and for the fiscal year ended June 30, 2016, and the related notes to the financial statements, which collectively comprise the County's basic financial statements. We issued our report thereon dated December 13, 2016, which contained unmodified opinions on those financial statements. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the County's basic financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the basic financial statements as a whole.

NAK OPAS, Inc.

Honolulu, Hawai'i January 27, 2017

Federal Grantor/Pass-through Grantor/Title	Federal CFDA Number	Pass-through Entity Identifying Number	Total Federal Expenditures	Passed Through to Subrecipients
CORPORATION FOR NATIONAL AND COMMUNITY SERVICE Retired Senior Volunteer Program Retired Senior Volunteer Program Total Retired and Senior Volunteer Program	94.002	Number	\$ 54,866 11,855 66,721	\$
TOTAL CORPORATION FOR NATIONAL AND COMMUNITY SERVICE			66,721	
U.S. DEPARTMENT OF AGRICULTURE Pass-through State - Supplemental Nutrition Assistance Program: Food Stamp Program Prosecutions Pass-through State - Summer Food Service Program for Children:	10.551	COOPERATIVE	283	
Play and Learn Sessions (PALS)	10.559	15157HIHI3N1099	73,996	
Pass-through State - Cooperative Forestry Assistance: Volunteer Fire Assistance FY15 Olowalu Fire Brk Comp Wui Total Cooperative Forestry Assistance TOTAL U.S. DEPARTMENT OF AGRICULTURE	10.664	14-DG-11052012-122 15-DG-11052012-133	18,750 18,850 37,600 111,879	
U.S. DEPARTMENT OF COMMERCE Pass-through State - Sea Grant Support: UH Sea Grant College Program	11.417	NA09OAR417/MA130012	2,356	
Pass-through State - Coastal Zone Managmement Administration Awards: Coastal Zone Management Program Coastal Zone Management FY15 Coastal Zone Management FY16 Total Coastal Zone Management Administration Awards	11.419	NA13NOS4190055 B-2015-OP-2 NA15NOS4190105	206,777 159,974 194,616 561,367	
TOTAL U.S. DEPARTMENT OF COMMERCE			563,723	
U.S. DEPARTMENT OF EDUCATION Pass-through State - Safe and Drug-Free Schools and Communities State Grants: D.A.R.E. FY10 MOA DO413#5 D.A.R.E. Program 02 #18475 Safe & Drug Free Schools #2 DHS Safe/Drug Free Schools #3 DHS Total Safe and Drug-Free Schools and Communities State Grants	84.186	MOA#04-13(5) MOA-02-017 DHS01-0YS-9136 DHS01-0YS-9136	(479) (1,339) 252 (4,291) (5,857)	
TOTAL U.S. DEPARTMENT OF EDUCATION			(5,857)	
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Pass-through State - Special Programs for the Aging Title III, Part B: Grants for Supportive Services and Senior Centers:				
Aging Title III DHHS FY11 Aging Title III DHHS FY12 Aging Title III Programs Aging Title III Programs		MA201103 MA201203 MA201303 MA201403	(27,223) 64 1,148 (11,468)	 (27,658)

	Federal CFDA	Pass-through Entity Identifying	Total Federal	Passed Through to
Federal Grantor/Pass-through Grantor/Title	Number	Number	Expenditures	Subrecipients
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (Continued)				
Aging Title III Programs		MA201503	\$ 97,538 260,265	\$ 96,052 251,178
Aging Title III Programs Total Special Programs for the Aging Title III, Part B Grants for		MA2016N03	200,200	231,170
Supportive Services Senior Centers	93.044		320,324	319,572
Pass-through State - Special Programs for the Aging Title IV	75.044		020/021	017/072
and Title II Discretionary Projects				
Hawaii Community Living		MA.CLP.2010.11.N	1,301	
Aging/Disability Resource Center		MA-ADRCHD-2010-N	10,844	
Aging/Disability Resource Center		MA-ADRCHD-2010-N	4,472	
Total Special Programs for the Aging Title IV		WINT ABITOTIB ZOTO IV		
and Title II Discretionary Projects	93.048		16,617	
Affordable Care Act (ACA) - Consumer Assistance Program Grants	70.010			
Care Transitions Program	93.519		1,229	
State and Local Public Health Actions to Prevent Obesity,	75.517			
Diabetes, Heart Disease and Stroke (PPHF)				
Complete Streets Training	93.757		10,000	
Centers for Medicare and Medicaid Services (CMS) Research,	75.757		10,000	
Demonstrations and Evaluations				
Hospital Discharge Planning Grant			(12,145)	
Hospital Discharge Planning Grant			(9,981)	
Total Centers for Medicare and Medicaid Services (CMS)				
Research, Demonstrations and Evaluations	93.779		(22,126)	
	73.117			
TOTAL U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			326,044	319,572
EXECUTIVE OFFICE OF THE PRESIDENT				
High Intensity Drug Trafficking Areas Program:				
High Intensity Drug Trafficking Areas			131,091	
High Intensity Drug Trafficking Areas			152,327	
Total High Intensity Drug Trafficking Areas Program	95.001		283,418	
TOTAL EXECUTIVE OFFICE OF THE PRESIDENT			283,418	
U.S. DEPARTMENT OF JUSTICE				
Drug Enforcement Administration (DEA):				
Marijuana Eradication 2003-51			323	
Marijuana Eradication			9,055	
Domestic Cannabis Enforcement			833	
Domestic Cannabis Enforcement			88,362	
Domestic Cannabis Enforcement			3,883	
Asset Forfeitures Program			60,945	
Federal Justice Police Forfeitures			(470)	
Total Drug Enforcement Administration	16.000		162,931	

	Federal CFDA	Pass-through Entity Identifying		Total Federal		Passed hrough to
Federal Grantor/Pass-through Grantor/Title	Number	Number	Ехр	enditures	Su	brecipients
U.S. DEPARTMENT OF JUSTICE (Continued)						
Pass-through State - Juvenile Accountability Block Grants:		DUC01 0VC 0000		((50)	•	
Juvenile Accountability Incentive Block Grant		DHS01-OYS-9222	\$	(659)	\$	
Juvenile Accountability Incentive Block Grant		DHS02-OYS-1160		7,483		
Juvenile Accountability Incentive Block Grant		DHS02-OYS-1160		580		
Juvenile Accountability Incentive Block Grant		DHS03-OYS-1473		6,678		
Juvenile Accountability Incentive Block Grant		DHS03-0YS-1473		2,227 285		
Juvenile Accountability Incentive Block Grant		DHS-12-OYS-263 DHS-12-OYS				
Juvenile Accountability Incentive Block Grant Juvenile Accountability Incentive Block Grant		DHS-12-045 DHS-05-0YS-2153		70,771 4,956		
Total Juvenile Accountability Block Grants	16.523	DH3-05-013-2155		92,321	_	
•	10.525			72,321	_	
Juvenile Justice and Delinquency Prevention Allocation to States	1/ 540			10,648		
Positive Outreach Intervention	16.540		-	10,046	_	
Crime Laboratory Improvement Combined	47.574			(4.01.4)		
Analytical Equip & Info Management System	16.564		_	(4,814)	_	
Pass-through State - Crime Victim Assistance:						
Special Needs Advocacy Program		12-VA-01		16,961		
Special Needs Advocacy Program		13-VA-01		307,532	_	
Total Crime Victim Assistance	16.575			324,493		
Edward Byrne Memorial Formula Grant Program:					_	
Clandestine Lab Response TM00DB18				(276)		
Statewide Marijuana Eradication				(830)		
Statewide Narcotics Task Force				(6,500)		
Statewide Marijuana Eradication Task Force				23,893		
Statewide Narcotics Task Force				510		
Total Edward Byrne Memorial Formula Grants	16.579			16,797		
Pass-through State - Violence Against Women Formula Grants:						
VAWA Domestic Violence Outreach		11-WF-06		24,574		
Violence Against Women Act		12-WF-12		10,750		
Domestic Violence Investigation		13-WF-02		11,871		
Domestic Violence Strangulation		13-WF-06		18,896		
Sex Assault		14-WF-06		504		
Domestic Violence Victimless		02-WF-17		20,359	_	
Total Violence Against Women Formula Grants	16.588			86,954	_	
Pass-through State - Local Law Enforcement Block Grants Program:						
LLE Block Grant	16.592	LLEBG2001-LB-BX-1458		(132)	_	
Public Safety Partnership and Community Policing Grants:				_		
Bulletproof Vest Grant				13,085		
Pass-through State - Public Safety Partnership and Community Policing Grants:						
Cops Technology Grant		2000CKWX0010		463		
Cops in School Award		2001-SHWX-0411		38,462		
Total Public Safety Partnership and Community Policing Grants	16.710		_	52,010	_	
Pass-through State - Gang Resistance Education and Training:			_		_	
G.R.E.A.T.	16.737	2004-JV-FX-0133		110		
0.002.00.0	10.707	200131170100			_	

	Federal CFDA	Pass-through Entity Identifying		Total Federal		Passed Through to
Federal Grantor/Pass-through Grantor/Title	Number	Number		Expenditures	S	ubrecipients
U.S. DEPARTMENT OF JUSTICE (Continued)						
Edward Byrne Memorial Justice Assistance Grant Program: Statewide Marijuana Eradication			\$	42,070	\$	
E. Byrne/Epic Awareness			φ	89,513	Ψ	
Criminal Justice Information System				24,738		
Hawaii Narcotics Task Force				14,120		
E. Byrne Memorial JAG				9,572		
E. Byrne/Pros of Drug Crimes				140,075		
Hawaii Narcotics Task Force				22,848		
Hawaii Narcotics Task Force				5,233		
Statewide Marijuana Eradication				11,264		
Total Edward Byrne Memorial Justice Assistance Grant Program	16.738			359,433		
Edward Byrne Memorial Competitive Grant Program:						
Hawaii Integrated Justice Program	16.751			27,840		
Alcohol, Tobacco, and Firearms: Training Assistance						
G.R.E.A.T.	16.012			(304)		
TOTAL U.S. DEPARTMENT OF JUSTICE				1,128,287		<u></u>
ENVIRONMENTAL PROTECTION AGENCY						
Pass-through State - Capitalization Grants for Drinking Water State Revolving Funds:						
Omaopio #2 Middle Tank		DW247-0005LOG#12-062		16,636		
Waikamoi Flume Repair/Replacement		DW215-0003LOG#13-174		271,447		
Wakiu Well Replacement Development Project		DW217-0005LOG#13-044		983,620		
Paia-Kuau Water System Improvements Project		DW213-0014LOG#14-162		373,973		
Piiholo WTP Org Carb Reduction		DW247-0004LOG#14-148		87,850		
Maui Meadows Boost Pump 18 IMP		DW212-0011LOG#14-178		244,978		
Kula 200 #1 Tank Replacement		DW215-0010LOG#15-157		615,908 511 160		
Wellhead Protection Program Tatal Conitalization Coasts for Polishing Water State Poughting Funds	// //0	ASO 12-117[10F2]		2 105 590		
Total Capitalization Grants for Drinking Water State Revolving Funds	66.468			3,105,580	•	
TOTAL ENVIRONMENTAL PROTECTION AGENCY				3,105,580	,	
U.S. DEPARTMENT OF TRANSPORTATION Pass-through State - Highway Planning and Construction:						
Bridge Inspection Program		BR-NBIS(44)		(2,750)		
FHWA Projects State Reviews		FHWA CENG		66,865		
Bridge Inspection Program		BR-NBIS(057)		12,960		
FHWA Various Projects County		FHWA CENG		64,939		
Kahoolopoo Bridge Replacement		BR0900-078		53,739		
Haliimaile Road Improvements		STP-A371(002)		440		
Kamalii Elementary School Safe Routes		SRS-1500(60)		678		
Princess Nahienaena Safe Route		SRS-1500(59)		1,000		
Wakea Avenue/Wells St Pavement Rehabilitation		STP-0900(082)		94,780		
Wakea Avenue at Hina Traffic		STP-0900(082)		182,031		
Baldwin Avenue Resurfacing		STP-0390(001)		211,571		
Kihei Bikeway - Piilani North		STP-3115(2)		(15,241)		

	Federal CFDA	Pass-through Entity Identifying	Total Federal	Passed Through to
Federal Grantor/Pass-through Grantor/Title	Number	Number	Expenditure	s Subrecipients
U.S. DEPARTMENT OF TRANSPORTATION (Continued)		CTD 2/20/021)	Φ 0.07/	(F7 A
Hansen Road Pavement Reconstruction		STP-3600(001)	\$ 2,076,6	
Bridge Inspection Program		BR-NBIS(062)	234,2	
Kokomo Road Pavement Reconstruction		STP-0366(001)	1,321,4	
Wailea Alanui/Ike Drive Pavement		STP-0900(084)	4,807,6	
Old Haleakala Highway Pavement Rehabilitation		STP-0900(084)	205,9	
Kihei Bikeway Phase 2	00.005	STP-3115(003)	2,431,8	_
Total Highway Planning and Construction	20.205		11,748,9	907
Pass-through State - Federal Transit Capital Investment Grants:				
FTA 5309 FFY 2010 Bus & Facilities		HI-04-0004	(14,	,
FTA 5309 Formula Funds Program		HI-04-0010	116,2	
Total Federal Transit Capital Investment Grants	20.500		102,0)58
Pass-through State - Formula Grants for Rural Areas:				
FTA Rural Transit Assistance FFY12		HI-18-X028	·	
FTA SEC 5311 Non-Urbanized Area		HI-18-X030	500,	
FTA Rural Transit Assistance - RTAP		HI-18-X030		
Rural Transit Assistance Program 06		FTA 5311 RTAP		263
FTA SEC 5311 FFY 2013 Grant	20 500	HI-18-X031	500,0 1,005,6	
Total Formula Grants for Rural Areas	20.509		1,000,0	<u></u>
Metropolitan Transportation Planning and State and Non-Metropolitan Planning and Research:				
FTA Planning Program 5305(e)	20.515		36,3	389
Highway Safety Cluster	20.313			
Pass-through State - State and Community Highway Safety:				
Maui Child Passenger Safety		OP01-05(03-M-01)	ŗ	541
MPD Roadblock Program AL02-02		AL02-02(01-M-03)		322)
Maui Safe Community Speed SC02-06(03)		SC02-06(03-M-01)	,	177
Keiki Injury Protection		OP02-05(03-M-01)		383)
Maui Seatbelt Enforcement OP02-05		OP02-05(01-M-03)	(11,8	•
Maui Safe Community Speed		SC03-06(03-M-01)		526
Maui Seatbelt Program		OP03-05(01-M-03)	32,2	
MPD Child Restraint Project		OP14-05(03-M-01)		(85)
MPD Traffic Services		PT15-01(03-M-01)		207
FFY15 MPD Seat Belt Program		OP15-05(01-M-03)	12,7	
FFY15 Speed Enforcement		SC15-06(01-M-03)	19,0	030
FFY15 MPD Traffic Data Records		TR15-03(05-M-01)	18,7	
Distracted Driving Enforcement		DD15-10(03-M-01)	•)49
MPD Roadblock Program		AL15-02(01-M-03)	122,5	
MPD Child Restraint Project		OP15-05(03-M-01)		174
Highway Safety Grant		AL15-02(05-M-01)		067
MPD Traffic Services		PT16-01(03-M-01)	40,2	
MPD Traffic Data Records		TR16-03(05-M-01)	209,7	
MPD Speed Enforcement		SC16-06(01-M-03)	76,9	
MPD Roadblock Program		AL16-02(01-M-03)	206,6	
Distracted Driving Enforcement		DD16-10(03-M-01)	43,8	
· · · · · · · · · · · · · · · · · · ·		: 3(00 0.)	10,0	

Federal Grantor/Pass-through Grantor/Title	Federal CFDA Number	Pass-through Entity Identifying Number	Total Federal Expenditures	Passed Through to Subrecipients
U.S. DEPARTMENT OF TRANSPORTATION (Continued)				
MPD Child Restraint Program		OP16-06(03-M-01)	\$ 13,348	\$
Highway Safety/Impaired Driving		AL16-02(05-M-01)	7,630	
Highway Safety/Traffic Records		TR16-03(10-M-01)	4,508	
MPD Child Restraint Program FY09		OP09-05(03-M-01)	(95)	
Total State and Community Highway Safety	20.600		818,175	
Pass-through State - National Priority Safety Programs:				
MPD Seat Belt Program	20.616	OP16-05(01-M-03)	25,872	
Total Highway Safety Cluster			844,047	
TOTAL U.S. DEPARTMENT OF TRANSPORTATION			13,737,027	
U.S. DEPARTMENT OF HOMELAND SECURITY				
Pass-through State - Emergency Preparedness Demonstration Program				
Interoperable Emergency Communications Grant Program	97.001	2008-IO-T8-0013	6,957	
Pass-through State - Emergency Management Institute Training Assistance:				
FEMA Fire Training Funds	97.026	11-106-036	3,082	
Disaster Grants - Public Assistance (Presidentially Declared Disasters):				
Storms 12/4-7/07	97.036		172,041	
Emergency Management Performance Grants			69,292	
Emergency Management Performance Grants			86,500	
Emergency Management Performance Grants			100,000	
Total Emergency Management Performance Grants	97.042		255,792	
Homeland Security Grant Program:				
FFY10 State Homeland Security Program			520	
FFY12 Community Outreach / Citizens Corp Program			863	
FFY12 State Homeland Security Grant			176	
FFY13 State Homeland Security Grant			192,755	
FFY13 SHSG Community & Citizen Prep			5,681 245,950	
State Homeland Security Grant Citizens Corporation Program			245,950 24,112	
State Homeland Security			134,814	
Total Homeland Security Grant Program	97.067		604,871	
TOTAL U.S. DEPARTMENT OF HOMELAND SECURITY			1,042,743	
U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT				
Community Development Block Grants / Small Cities Program:				
The Maui Farm Rehabilitation			21,404	21,404
Women Helping Women Domestic Violence			7,738	7,738
Lanai Community Health Center Infrastructure			313,872	313,872
Khako Renewal Project PH-1			81,101	81,101
Maui Food Bank Rehabilitation			41,034	41,034
Total Community Development Block Grants / Small Cities Program	14.219		465,149	465,149

Federal Grantor/Pass-through Grantor/Title	Federal CFDA Number	Pass-through Entity Identifying Number	Total Federal Expenditures		Passed Through to s Subrecipients	
U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT (Continued)						<u> </u>
Community Development Block Grants / State's Program and						
Non-Entitlement Grants in Hawaii:						
LCHC Infrastructure 13-4			\$	738	\$	738
Molokai Tanker Reprg				25,320		
LCHC Infrastructure 13-4				370,818		370,818
Maui Food Bank Rehabilitation				8,966		8,966
The Maui Farm Rehabilitation				30,293		30,293
CDBG Program Admin FY14				23,431		
The Maui Farm Rehabilitation				125,725		125,725
Maui Food Bank Rehabilitation				400,085		400,085
Molokai Tanker				675,000		
CDBG Program Admin FY15				19,645		
CDBG Program Admin FY16				293,776		
Molokai Tanker - Reprg				8,180		
Total Community Development Block Grants / State's				<u></u>		
Program and Non-Entitlement Grants in Hawaii	14.228			1,981,977		936,625
Pass-through State - Home Investment Partnerships Program:						
Home 1st Time Homebuyers Project		PROJ INCME		21,161		
Home FFY10 Administration		HOME FFY106/30/10		8,103		
Home FFY11 Administration		HOME FFY10		818		
Home FFY14 Kulamalu Reprg		HOME FFY14		(21,161)		
Home FFY14 Administration		M-2014-MAUI ADMIN		44,531		
Home FFY14 Kulamalu AH Project		M-2014-MAUI KULAMALU		318,803		
Home FFY04 Administration		HOME FFY04		7,296		
Home FFY08 Administration		HOME FFY08		(689)		
Total Home Investment Partnership Program	14.239			378,862		
Section 8 Housing Choice Vouchers:				<u></u>		
Section 8 Housing Voucher FY2015				(7,629)		
Section 8 Housing Admin FY2015				835		
Section 8 Housing Voucher FY2016				15,909,362		
Section 8 Housing Admin FY2016				1,279,918		
Section 8 Family Self-Sufficient				18,547		
Total Section 8 Housing Choice Vouchers	14.871			17,201,033		
Family Self-Sufficiency Program:				<u></u>		
FSS Coordinator Grant	14.896			28,957		
TOTAL U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT				20,055,978	_	1,401,774
U.S. DEPARTMENT OF LABOR						
Pass-through State - Workforce Investment Act:						
Workforce Investment Act PY11-Admin		WIA BULLTN #03-11		(2,255)		
Workforce Investment Act Administrative PY2012		BULLETIN #03-12		7,805		
Workforce Investment Act Admin		WIA-13-LAC-M		(236)		
Workforce Investment Act Admin		WIA-13-LAC-M		37,719		
WIOA Admin PY2015		WIOA-15-LAC-M		55,876		
Total Workforce Investment Act	17.000	WOLL TO FLO M		98,909		
Total Worklords IIIVostilioni Aldi	17.000		-	,5,707	_	

Federal Grantor/Pass-through Grantor/Title	Federal CFDA Number	Pass-through Entity Identifying Number	Total Federal Expenditures		Passed Through to Subrecipients	
U.S. DEPARTMENT OF LABOR (Continued)						
WIA Cluster						
Pass-through State - WIA Adult Program:						
Workforce Investment Act - Adult Program - PY 2012		BULLETIN #03-12	\$	1,172	\$	
Workforce Investment Act Adult		WIA-13-AP-M		(460)		
Workforce Investment Act Adult		WIA-14-AP-M		96,518		
WIOA Adult & Dislocated Worker		WIOA-15-A&DWP-M		23,796		
Total WIA Adult Program	17.258			121,026		
Pass-through State - WIA Youth Activities:						
WIA Youth Program - PY2012		BULLETIN #03-12		334		
Workforce Investment Act Youth		WIA-13-AP-M		17,909		
Workforce Investment Act Youth		WIA-14-YP-M		123,853		
Workforce Innovation Opportunity		WIOA-15-YPM		22,722		
Total WIA Youth Activities	17.259			164,818		
Pass-through State - WIA Dislocated Workers:						
Workforce Investment PY11 Dislocated Worker		WIA BULLTN #03-11		(3,052)		
Workforce Investment Act DWP		WIA-13-DWP-M		(1,183)		
Workforce Investment Act DWP		WIA-14-DWP-M		41,109		
Total WIA Dislocated Workers	17.260			36,874		<u></u>
Pass-through State - WIA/WIOA Dislocated Worker Formula Grants						
WIA Dislocated Worker PY2012	17.278	BULLETIN #03-12		4,014		<u></u>
Total WIA Cluster				326,732		
ARRA - Program of Competitive Grants for Worker Training and Placement in High Growth and Emerging Industry Sectors						
ARRA - State Energy Sctr Training Grant	17.275			3,222		
3.	17.273		-			
TOTAL U.S. DEPARTMENT OF LABOR				428,863		
U.S. DEPARTMENT OF ENERGY						
Energy Efficiency and Conservation Block Grant Program (EECBG)						
Energy Efficiency/Conservation Block Grant	81.128			34,892		
3,5						
TOTAL U.S. DEPARTMENT OF ENERGY			•	34,892		
TOTAL EXPENDITURES OF FEDERAL AWARDS			\$	40,879,298	\$	1,721,346

NOTE 1 - BASIS OF PRESENTATION

The accompanying schedule of expenditures of federal awards (the "Schedule") includes the federal award activity of the County under programs of the federal government for the fiscal year ended June 30, 2016. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the County of Maui, it is not intended to, and does not present the financial position, changes in net assets, or cash flows of the County of Maui.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the modified accrual basis of accounting. Such expenditures are recognized following, as applicable, either the cost principles in the Office of Management and Budget Circular A-87, Cost Principles for State, Local and Indian Tribal Governments, or the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts shown on the Schedule represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years.

NOTE 3 - INDIRECT COST RATE

The County of Maui has elected not to use the 10-percent de minimis indirect cost rate allowed under the Uniform Guidance.

PART III SCHEDULE OF FINDINGS AND QUESTIONED COSTS

SECTION I - SUMMARY OF AUDITOR'S RESULTS

Financial Statements

Type of auditor's report issued on whether the financial statements audited were prepared in accordance with GAAP:	Unmodified
Internal control over financial reporting: Material weakness(es) identified? Significant deficiency(ies) identified?	yes √ no none reported
Noncompliance material to financial statements noted?	yes <u>✓</u> no
Federal Awards	
Internal control over major federal programs: Material weakness(es) identified? Significant deficiency(ies) identified?	yes no none reported
Type of auditor's report issued on compliance for major federal programs:	Unmodified
Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?	_ ✓ yes no
Identification of major federal programs:	
CFDA Number	Name of Federal Program or Cluster
14.219	Community Development Block
14.228	Grants/Small Cities Program Community Development Block Grants/State's Program and Non-
14.871 66.468	Entitlement Grants in Hawaii Section 8 Housing Choice Vouchers Capitalization Grants for Drinking Water State Revolving Funds
Dollar threshold used to distinguish between Type A and Type B programs:	\$1,226,379
Auditee qualified as a low-risk auditee?	yes <u>√</u> no

SECTION II - FINANCIAL STATEMENT FINDINGS

Ref.

No. Internal Control Findings

2016-001 Internal Controls Over Vacation and Sick Leave Records - Significant Deficiency

Criteria:

Under the County of Maui's 'Payroll Policies and Procedures Manual', an 'Application for Leave form' must be submitted and signed by the employee in advance for all types of scheduled and anticipated leaves. For all types of unscheduled, unanticipated, or emergency-type leaves, the form must be submitted by the employee immediately upon return of leave. In both cases, forms must be approved and signed by both the employee and authorized approver.

Condition: Employees are required to fill out an 'Application for Leave (DF-2) form' for the County of Maui, 'Application for Leave (DF-1) form' for the Department of Water Supply (DWS), or use eTime's 'Time Off Request (TOR)' whenever the employee takes sick or vacation leave. Forms or requests must be signed or approved by the employee and an authorized approver. During our current year audit, we noted the following:

County of Maui:

- There were three (3) samples totaling six (6) instances where an 'Application for Leave (DF-2) form' was not signed by the employee taking leave and/or authorized signer.
- There were five (5) samples totaling twenty-eight (28) instances where an 'Application for Leave (DF-2) form' could not be located for the leave taken by an employee.

DWS:

• There was one (1) sample totaling one (1) instance where an 'Application for Leave (DF-1) form' was not signed by an authorized signer.

Cause: The guidance stated in the 'Payroll Policies and Procedures Manual' was not consistently applied by the County and the DWS.

Effect: The lack of adequate internal controls over vacation and sick leave records could result in an over or understatement of liabilities of the County of Maui and the DWS.

Identification as a Repeat Finding, if applicable:

See finding 2015-001 included in the Summary Schedule of Prior Audit Findings.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-001 Internal Controls Over Vacation and Sick Leave Records - Significant

Deficiency (Continued)

Recommendation

Adequate internal controls should be maintained to ensure that vacation and sick leave records are accurately documented, calculated, and recorded in the County's general ledger. Evidence of the submission and review of the 'Application for Leave (DF-2) form' for the County of Maui, or 'Application for Leave (DF-1) form' for the Department of Water Supply (DWS), should be documented through signatures of both the employee taking leave and an appropriate approver.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-002 Accounting for Construction in Progress - Significant Deficiency

Criteria: Generally accepted accounting principles require that assets be transferred from

construction in progress to capital assets when they are placed in service or are available to be placed in service. In addition, the DWS' accounting policy for normal

maintenance and repairs is to expense these amounts as incurred.

Condition: The Department of Water Supply (DWS) prepared construction in progress

schedules to calculate the valid roll-forward balance of on-going projects and determine projects that were completed, placed into service, and capitalized as infrastructure. We noted that projects were only properly accounted for when fiscal staff tracked down the respective project engineer for the contract. This resulted in multiple instances where a project was not capitalized properly or timely and old projects that should have been expensed were part of the roll-forward balance from prior years. The following were the conditions noted during our review of the

construction in progress and capital asset schedules:

 The DWS had a total of \$27 million in capital asset additions in the current year. A review of the additions of the DWS showed a total of \$14,879,018 of capital asset additions that had dates-in-service from prior years that should

have been capitalized as capital assets in prior years.

Cause: The DWS' projects are maintained and accumulated in the DWS' accounting

system and reconciled in a spreadsheet. However, the process to transfer the projects to either expense the normal maintenance and repairs or to transfer the

project to capital assets is a manual process completed periodically.

Effect: Construction in progress was overstated, while capital assets, accumulated

depreciation, and depreciation expense were understated.

Identification as a Repeat Finding, if applicable:

See finding 2015-002 included in the Summary Schedule of Prior Audit Findings.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-002 Accounting for Construction in Progress - Significant Deficiency (Continued)

Recommendation

The DWS should establish formal procedures to ensure that construction in progress and projects placed in service are communicated timely by project engineers to the fiscal staff in order to properly capitalize and depreciate those assets in the appropriate accounting period. The DWS should also establish procedures to maintain and reconcile the construction in progress schedule throughout the year. These procedures will also assist the DWS in completing the schedules required to timely close and prepare the County's comprehensive financial report.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

Internal Control Findings No.

2016-003 Internal Controls Over Automated Payroll Processing System - Significant **Deficiency**

Criteria:

A control environment should be continuously monitored to ensure the completeness and accuracy of the County's payroll processing system. Employee time records, whether manual timesheets or automated time records, should be approved by the employee and their supervisor and properly support the payroll expenditures reflected in the automated pay register used to record expenditures into the County's general ledger.

Condition: The Department of Finance has completed a conversion to a more automated payroll processing system. Included in that conversion was a move toward a fully automated employee time recording system. This conversion also required a change from a more manual, centralized time recording and monitoring system at the Payroll Section to a more decentralized system, with payroll responsibilities disbursed out to individual departments.

> Individual departments have either switched to an automated time recording system or have maintained a manual time keeping system for all or some employees based on its operations. This practice has continued to produce inconsistencies between departments which resulted in the following conditions noted during our review of 40 payroll files:

3 instances (out of 40 samples) where a manual time sheet did not have an approval by the supervisor/department head.

The County has a 'Payroll Policies and Procedures Manual' that indicates the roles and responsibilities of the department/agencies and employees, required forms to be used and procedures to be followed with regard to manual timesheets and automated timesheets. There are certain departments/agencies that will not be able to fully convert to the automated employee time recording system based on logistics and possible bargaining unit restrictions. However, it is still the Department of Finance's goal to convert more departments to the automated payroll processing system by providing continuous training and follow up sessions with each department and its 'Super-Users'.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-003 Internal Controls Over Automated Payroll Processing System - Significant

Deficiency (Continued)

Cause: The change from a centralized to a decentralized system for capturing employee

time has resulted in the implementation of a new internal control environment that

requires continuous monitoring.

Effect: The lack of sufficient controls to ensure the completeness and accuracy of the

payroll records could lead to incorrect payments to County employees and

inaccurate reporting of payroll costs in the County's financial statements.

Identification as a Repeat Finding, if applicable:

See finding 2015-003 included in the Summary Schedule of Prior Audit Findings.

Recommendation

The Department of Finance should continue to implement and monitor the payroll process to ensure that accurate employee compensation expenditures are recorded in the County's general ledger. Monitoring activities include requiring explicit documentation evidencing supervisory reviews of time records prior to processing and periodic reviews of employee and departmental time sheets at the departmental level.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

Internal Control Findings No.

2016-004 **Internal Controls Over Procurement Process - Significant Deficiency**

Criteria:

Under Hawai'i Revised Statutes section 103D-303.5, at least fifteen days prior to the submission of bids for construction or design-build projects with a total estimated contract value of \$500,000 or more, and at least fifteen days prior to submission of proposals for construction for design-build projects with a total estimated contract value of \$100,000 or more, the head of a purchasing agency shall hold a pre-bid conference and shall invite all potential interested bidders, offerors, subcontractors, and union representatives to attend.

Condition: The County of Maui's Code provides policies and procedures for the procurement of contracts. Expenditures of public money shall be made in accordance with the competitive bidding requirements and other applicable sections of the Hawai'i Revised Statutes chapter 103 as applicable, and as required by law. During our current year audit, we noted the following:

> • There were four (4) instances where a 'Pre-Bid' conference was not held prior to the procurement of a contract with contract values exceeding \$500,000, aggregating approximately \$3,000,000.

Cause:

The guidance stated in the chapter 3.12 'Purchasing Procedures' of the County of Maui Code was not consistently applied by the County of Maui.

Effect:

The lack of adequate internal controls over the procurement process may result in violations of the County of Maui Code that could have an adverse effect on future procurements of contracts.

Identification as a Repeat Finding, if applicable:

See finding 2015-005 included in the Summary Schedule of Prior Audit Findings.

Recommendation

Adequate internal controls should be maintained to ensure that all policies established and stated by the County of Maui Code are consistently followed and adhered to.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-005 Internal Controls Over Miscellaneous Cash Receipts - Significant Deficiency

Criteria: Proper internal controls over miscellaneous cash receipts received directly from the

public dictate that adequate segregation of duties exists to ensure that an employee receiving cash is not the same employee that records the receipt transaction into the accounting records and reconciles the cash deposited into the bank. Evidence of this segregation of accounting duties and the appropriate level of supervisory review should be reflected on the daily cash receipt summary report in the form of

sign offs by personnel involved.

Condition: During our audit, we noted that the internal controls over miscellaneous cash

receipts collected by the various divisions and departments of the County could be improved. There was a lack of adequate segregation of duties over cash receipts, particularly at the Building Permits Section, between employees responsible for receiving the cash from the public and recording the cash transaction into the daily cash summary report and reconciling this summary report to the daily bank deposit.

Cause: Policies and procedures to enhance the segregation of duties over cash receipts

have not been maintained.

Effect: The lack of adequate internal controls over miscellaneous cash receipts could result

in a loss of revenues to the County.

Identification as a Repeat Finding, if applicable:

See finding 2015-006 included in the Summary Schedule of Prior Audit Findings.

Recommendation

Adequate internal controls should be maintained to ensure that adequate segregation of duties exist and that miscellaneous cash receipts are accurately collected, deposited and recorded in the County's general ledger. Evidence of the performance and review of the various employees should be documented on daily cash summary reports in the form of sign offs by personnel involved.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-006 Timely Reconciliation of Federal and State Grant Programs - Significant

Deficiency

Criteria: Accrual balances presented in the Grant Fund balance sheet should reflect the

amount of unreimbursed grant expenditures (grant receivables). Reconciliations of

these balances should be performed on a timely basis.

Condition: During our audit, we noted that accrual balances in the Grant Fund were reconciled

only upon inquiry with responsible personnel. A lack of frequent reconciliation resulted in delays in providing responses and substantiating support for these balances. The Department of Finance continues to research, reconcile and dispose of unreconciled balances; however, unrelieved balances within the Grant Fund still

exist as of June 30, 2016.

Cause: There does not appear to be a uniform reconciliation process between the

Department of Finance personnel and grant management personnel in the other County departments to ensure the periodic and timely reconciliation of grant

receivables.

Effect: The lack of timely reconciliations performed on the Grant Fund accrual balances

could lead to misstatements in the County's financial statements.

Identification as a Repeat Finding, if applicable:

See finding 2015-007 included In the Summary Schedule of Prior Audit Findings.

Recommendation

The County has implemented mitigating controls such as a periodic reconciliation of federal and state grants. However, old grants and prior year receivables remain and continue to carry forward. The County should implement policies and procedures to complete monthly or quarterly reconciliations and monitoring of federal and state grants.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-007 Logical Access & Access Security - Significant Deficiency

Criteria: A control process exists and is followed to periodically review and confirm access rights.

Procedures exist and are followed to authenticate all users of the system (both internal and external) to support the existence of transactions.

An information security policy exists and has been approved by an appropriate level of management.

A framework of security standards has been developed that supports the objectives of the security policy.

Condition: During our audit, we noted that the County had several deficiencies related to logical access and access security including:

- User access reviews for iasWorld (IAS) are infrequent.
- Permissions assigned to Oracle Utilities Customer Care and Billing System (CC&B) security groups were not reviewed.
- Outside vendor access into IAS is not monitored.
- The County does not have a formal password policy established.
- There is weak password security for the domain, IAS, IFAS and CC&B.
- The County did not have any formally documented security administration policies and procedures.

Cause: The County has not formally documented all of the Logical Access & Access Security controls nor effectively designed all of these controls.

Effect: Unauthorized access to these systems could result in the destruction of data, unauthorized transactions being made, transactions being inaccurately recorded, or internal controls being circumvented.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-007 Logical Access & Access Security - Significant Deficiency (Continued)

Identification as a Repeat Finding, if applicable:

See finding 2015-008 included in the Summary Schedule of Prior Audit Findings.

Recommendation

We recommend that the County:

- 1. Establish a control process to review and confirm access rights periodically. There should be at least a semiannual review of user access.
- 2. Monitor vendor access into IAS.
- 3. Develop formal password policies and procedures and strengthen password controls including a combination of minimum length, complexity, expiration, history, and lockout policy and duration.
- 4. Develop an information security policy, have the policy approved by the appropriate level of management and communicate the policy to employees.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-008 Backup & Recovery - Significant Deficiency

Criteria: Policies and procedures exist for data backup and recovery.

The restoration of backup media is periodically tested.

Condition: During our audit, we noted that the County:

Did not have any formally documented backup and restore policies; and

 Is using some backup software that is no longer supported by the manufacturer.

Cause: The County has not formally documented the backup and restore policies and

procedures.

Effect: Data recorded, processed and reported may not remain complete, accurate and

valid throughout the update and storage process. There may be an inability to

correct or recover from data loss, corruption, or data integrity concerns.

Identification as a Repeat Finding, if applicable:

See finding 2015-009 included in the Summary Schedule of Prior Audit Findings.

Recommendation

We recommend that the County develop a formal backup and restore policy, have the policy approved by the appropriate level of management and communicate the policy to employees.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-009 Information Technology (IT) Governance - Significant Deficiency

Criteria: The organization maintains an appropriate strategic technology plan including capacity planning and availability requirements to meet the needs of the business

units and to adequately support financial reporting.

Effective IT governance helps ensure that IT supports business goals, optimizes business investment in IT, and appropriately manages IT-related risks and

opportunities.

Risk management practices enable management to limit exposures to control

failures.

Condition: During our audit, we noted that the County had several deficiencies related to IT governance including:

 The IT governance function needs to be formalized including a process for review of IT plans and priorities and significant IT related projects and investments.

• An IT Risk Assessment needs to be completed.

Cause: The County has not formally documented IT governance policies and procedures.

Effect: Lack of business monitoring and strategic planning may cause the organization to not be responsive to changes that may affect continuity and quality of service.

Lack of risk management practices will limit management's ability to reduce exposures and control failures.

Identification as a Repeat Finding, if applicable:

See finding 2015-010 included in the Summary Schedule of Prior Audit Findings.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-009 Information Technology (IT) Governance - Significant Deficiency (Continued)

Recommendation

We recommend that the County hold formal steering committee meetings and complete an IT Risk Assessment.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Ref.

No. Internal Control Findings

2016-010 Prior Period Adjustment - Significant Deficiency

Criteria: Internal controls over financial reporting should be in place to ensure the financial

statements are fairly presented in accordance with accounting principles generally

accepted in the United States (GAAP).

Condition: During our audit, we noted that the County recorded prior period adjustments due to

\$12,047,491 in employer paid, employee contributions made after the measurement date for the net pension liability, which were not included in the deferred outflow of resources as of June 30, 2015. The adjustment resulted in an increase in beginning net position of \$11.4 million for governmental activities and \$0.7 million for business-type activities reported in the Comprehensive Annual Financial Report (CAFR) of the County at July 1, 2015. The effect for the fiscal year ended June 30, 2015 was an increase to the change in net position of \$11,374,600 for

governmental activities and \$672,891 for business-type activities.

Cause: Accounts related to the net pension liability were not properly reconciled at year

end.

Effect: A material misstatement of the County's CAFR in the prior year that was not

prevented or detected by the County's internal control system.

Identification as a Repeat Finding, if applicable:

Not applicable.

Recommendation

Management should identify significant nonroutine accounting transactions and new accounting pronouncements and ensure that a process is established in which management-level fiscal personnel are actively involved in both the determination of the proper accounting treatment and timely review of the transactions being posted.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION III - FEDERAL AWARD FINDINGS AND QUESTIONED COSTS

Ref. Questioned No. Internal Control over Compliance Findings Costs

2016-011 Review of Subrecipient Single Audits - Significant Deficiency

Federal agency: Department of Housing and Urban Development

CFDA No: 14.228/14.219

Program: Community Development Block Grants (CDBG) -

State's Program and Non-Entitlement Grants in

Hawaii/Small Cities Program

Criteria:

The U.S. Office of Management and Budget (OMB) issued comprehensive grant reform rules under Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) in December 2013. These rules were effective for new federal awards and changes to funding increments issued after December 26, 2014.

The Uniform Guidance now requires written policies in order to comply with certain requirements. A compliance area for which each entity must maintain written policies includes subrecipient monitoring.

Subrecipient monitoring and management requirements for passthrough entities at 2 CFR §200.331 require that the County verify that every subrecipient is audited as required by the Uniform Guidance when it is expected that the subrecipient's Federal awards expended during the respective fiscal year equaled or exceeded \$750,000.

Condition:

The CDBG grants are awarded to the County to develop viable urban communities by providing decent housing, a suitable living environment, and expanded economic opportunities, principally for persons of low and moderate income. The primary way that the County achieves these objectives is by providing sub-awards to various non-profit organizations (subrecipients) to fund qualifying projects that fulfill the objectives of the CDBG program.

SECTION III - FEDERAL AWARD FINDINGS AND QUESTIONED COSTS (Continued)

Ref. <u>No.</u>	Internal Control over Compliance Findings (Continued)	Questioned Costs
2016-011	Review of Subrecipient Single Audits - Significant Deficiency (Continued)	
Condition:	During our testing of the subrecipient monitoring compliance requirement for the audit period ended June 30, 2016, we noted that the County did not have a system in place to track and monitor subrecipients expending \$750,000 or more in Federal awards during the subrecipient's fiscal year to ensure that audits were completed and submitted in accordance with the Uniform Guidance as required.	
Cause:	The County relied on the subrecipients to submit audits and only reviewed and followed up with subrecipients who submitted Single Audits reports of their own accord.	
Effect:	The County cannot ensure that its subrecipients are performing Single Audits when required under the Uniform Guidance and are in compliance with applicable federal requirements.	\$ <u></u>
Context:	The County provided CDBG funds to four (4) subrecipients during the audit period ended June 30, 2016. All subrecipients were tested to determine if the County followed subrecipient monitoring compliance requirements by verifying if these subrecipients were required to have an audit accordance with the Uniform Guidance.	

We noted that no verification was performed for these subrecipients.

Identification as a Repeat Finding, if applicable:

Not applicable.

Recommendation

We recommend the County create and document a process to comply with the subrecipient monitoring compliance requirement of the Uniform Guidance to annually verify that subrecipients expending \$750,000 or more in Federal awards during the subrecipient's fiscal year complete and submit a Single Audit report.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

SECTION III - FEDERAL AWARD FINDINGS AND QUESTIONED COSTS (Continued)

Ref.
No. Internal Control over Compliance Findings (Continued)

Costs

2016-012 Completeness of Federal Expenditures Reported - Significant

Deficiency

Federal agency: Environmental Protection Agency

CFDA No: 66.468

Program: Capitalization Grants for Drinking Water State

Revolving Funds

Criteria: The Uniform Guidance requires federal expenditures to be recorded

properly and timely to ensure accuracy and completeness of the expenditure amounts reported on the Schedule of Expenditures of

Federal Awards (SEFA).

Condition: The Department of Water Supply (DWS) reported and paid a total of

\$3,105,580 of federal awards for the Capitalization Grants for Drinking Water State Revolving Funds program for the fiscal year ended June 30, 2016. One of the programs funded by this grant expended a total of \$511,168 related to the Wellhead Protection Program in fiscal year 2016. The Wellhead Protection Program is managed by the Planning Division of the DWS. During our testing of

this program, we noted the following condition:

 Approximately \$439,900 of federal expenditures related to the Wellhead Protection Program was incurred during the fiscal year ended June 30, 2015, and should have been

accrued and reflected in the prior fiscal year's SEFA.

Cause: The DWS relied on the Planning Division to timely submit invoices

when received by the vendors performing services for the Wellhead Protection Program. The planner in charge of the Wellhead Protection Program was unaware of the financial reporting process and did not transmit invoices timely to the accounting department for extended periods of time, which resulted in expenditures being

reported and paid in subsequent periods.

Effect: Federal expenditures related to the Wellhead Protection Program

were understated on the SEFA by approximately \$439,900 in the

prior fiscal year.

\$ _____

SECTION III - FEDERAL AWARD FINDINGS AND QUESTIONED COSTS (Continued)

Ref.

No. Internal Control over Compliance Findings (Continued)

2016-012 Completeness of Federal Expenditures Reported - Significant

Deficiency (Continued)

Context: The DWS expended a total of \$3,105,580 of federal awards for

the Capitalization Grants for Drinking Water State Revolving Funds for eight (8) projects during the audit period ended June 30, 2016. We tested the six (6) largest projects with total expenditures of \$3,002,502 during the fiscal year. It was determined that approximately \$439,900 of federal expenditures for one of those projects (Wellhead Protection Program) was incurred during the fiscal year ended June 30, 2015, and should have been accrued and reflected in the prior fiscal year's SEFA.

Identification as a Repeat Finding, if applicable:

Not applicable.

Recommendation

The DWS should ensure that proper accounting procedures are being adhered to by all personnel involved in the financial reporting process to ensure expenditures are reported in the proper period.

Views of Responsible Officials and Planned Corrective Action

The County agrees with the finding and the recommendation. See Part IV Corrective Action Plan.

PART IV CORRECTIVE ACTION PLAN



DANILO F. AGSALOG Director

MARK R.WALKER
DEPUTY DIRECTOR

COUNTY OF MAUI **DEPARTMENT OF FINANCE**

200 S. HIGH STREET WAILUKU, MAUI, HAWAI'I 96793

January 27, 2017

Mr. Blake S. Isobe N&K CPAs Inc. 1001 Bishop Street, Suite 1700 Honolulu, Hawai'i 96813

SUBJECT: SINGLE AUDIT FINDINGS - CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2016

Dear Mr. Isobe:

The County of Maui appreciates that the Comprehensive Annual Financial Report audits often identify opportunities for improving operations and governance. Attached is our Corrective Action Plan in response to the Single Audit Findings for the fiscal year ended June 30, 2016. It is our goal that every audit have a positive result and that our response to findings and recommendations allow us to take positive action and to improve our operations.

Thank you for the opportunity to respond to your recommendations toward improving operations and governance.

Sincerely,

DANILO F. AGSALOG Director of Finance

Ref.

No. Internal Control Findings

2016-001 Internal Controls Over Vacation and Sick Leave Records - Significant

Deficiency

Recommendation

Adequate internal controls should be maintained to ensure that vacation and sick leave records are accurately documented, calculated, and recorded in the County of Maui's general ledger. Evidence of the submission and review of the 'Application for Leave (DF-2) form' for the County of Maui, or 'Application for Leave (DF-1) form' for the Department of Water Supply (DWS), should be documented through signatures of both the employee taking leave and an appropriate approver.

Views of Responsible Officials and Planned Corrective Action

Management concurs with the recommendation.

In June 2014, the County's Department of Finance established a policy manual outlining standard payroll procedures and internal controls in its effort to address the audit finding for the fiscal year ended June 30, 2013. This policy is applicable to all County departments including the Department of Water Supply. The Department of Finance has been continuing its effort to train and periodically remind the departments' ADP e-Time users regarding the payroll process and procedures by conducting a SuperUser Meeting on a quarterly basis. On March 7, 2015, a memo from the Finance Director was sent out to all County employees reminding them of the County's Payroll Policies and Procedures relating to the submission, review, and approval of timesheets. Additionally, the Department of Finance conducted an internal audit in May 2016 to test if all County departments' (except for the agencies under the legislative branch) are following the internal controls over submission, review, and approval of employee time cards. The result of the internal review was discussed during the SuperUser Meeting scheduled in December 2016.

The effectiveness of internal controls over submission, review, and approval of employee timecards relies heavily on the departments' management to ensure that all of their employees follow the policies and procedures and their administrative, authorized, and/or appropriate staff are monitoring the accuracy of these payroll processes. The Department of Finance will continue to conduct its quarterly SuperUser Meeting, communicate the importance of these key payroll policies to the new and existing employees, and complete an internal payroll audit at least once a year.

Ref.

No. Internal Control Findings (Continued)

2016-001 Internal Controls Over Vacation and Sick Leave Records - Significant

Deficiency

End Date: Ongoing

Responding Person(s): Ortaine Acidera, Acting Assistant Accounting System Administrator

Department of Finance Phone No. (808) 270-7497

Danielle Navarro, Payroll Manager

Department of Finance Phone No. (808) 270-7499

Holly Ho, Fiscal Officer Department of Water Supply Phone No. (808) 270-7303

Ref.

No. Internal Control Findings

2016-002 Accounting for Construction in Progress - Significant Deficiency

Recommendation

The DWS should establish formal procedures to ensure that construction work in progress and projects placed in service are communicated timely by project engineers to the fiscal staff in order to properly capitalize and depreciate those assets in the appropriate accounting period. The DWS should also establish procedures to maintain and reconcile the construction in progress schedule throughout the year. These procedures will also assist the DWS in completing the schedules required to timely close and prepare the County's comprehensive financial report.

Views of Responsible Officials and Planned Corrective Action

Management concurs with this finding. Management believes that it has implemented and monitored policies and procedures and has performed periodic reviews of the construction in progress schedule. The maintenance and reconciliation of the construction in progress schedule throughout the year takes an enormous amount of effort and the Department of Water Supply was short staffed. Construction work in progress and projects placed in service are now communicated to the appropriate fiscal office staff in a timely manner.

End Date: Procedures have been in place

Responding Person(s): Holly Ho, Fiscal Officer

Department of Water Supply Phone No. (808) 270-7303

Ref.

No. Internal Control Findings

2016-003 Internal Controls Over Automated Payroll Processing System - Significant

Deficiency

Recommendation

The Department of Finance should continue to implement and monitor the payroll process to ensure that accurate employee compensation expenditures are recorded in the County's general ledger. Monitoring activities include requiring explicit documentation evidencing supervisory reviews of time records prior to processing and periodic reviews of employee and departmental time sheets at the departmental level.

Views of Responsible Officials and Planned Corrective Action

Management concurs with the recommendation. Similar to the response to audit finding no. 2016-001 above, in an effort to establish a more uniform system of internal controls over the submission, review, and approval of employee time records, the County's Department of Finance has established a policy manual outlining standard payroll procedures and internal controls in June 2014. The Department of Finance has been continuing its effort to train and periodically remind the departments' ADP e-Time users regarding the payroll process and procedures by conducting a SuperUser Meeting on a quarterly basis. On March 7, 2015, a memo from the Finance Director was sent out to all County employees reminding them of the County's Payroll Policies and Procedures relating to the submission, review, and approval of timesheets. Additionally, the Department of Finance conducted an internal review in May 2016 to determine if all County departments' (except for the agencies under the legislative branch) are following the policies over submission, review, and approval of employee time cards. The result of the review will be discussed in detail in the next scheduled SuperUser Meeting.

The compliance of the policies and procedures on submission, review, and approval of employee timecards relies heavily on the departments' management. The Department of Finance will continue to conduct its quarterly SuperUser Meeting, communicate the importance of these key payroll policies to the new and existing employees, and complete an internal payroll review at least once a year.

End Date: Ongoing

Responding Person(s): Ortaine Acidera, Acting Assistant Accounting System Administrator

Department of Finance Phone No. (808) 270-7497

Danielle Navarro, Payroll Manager Department of Finance Phone No. (808) 270-7499

Ref.

No. Internal Control Findings

2016-004 Internal Controls Over Procurement Process - Significant Deficiency

Recommendation

Adequate internal controls should be maintained to ensure that all policies established and stated by the County of Maui Code are consistently followed and adhered to.

Views of Responsible Officials and Planned Corrective Action

Management concurs with the finding. The Purchasing Division did conduct training within our division to try and correct this deficiency from the previous year. As a result, Purchasing is working on a memo to improve several processes in the construction area which will be issued in the short term. It will include a requirement that all project managers and consultants preparing specifications be aware that if the estimated cost of a project is over \$500,000 there must be a pre-bid meeting. Although it is in the law, management disagrees that this finding is significant. A project dollar threshold is not entirely indicative of the complexity or risk of a contract and whether a pre-bid meeting is needed. It is our opinion that the need for a pre-bid meeting should be made on a case by case basis. However, unless the law is changed, we will take the finding seriously and make every effort to comply with the law.

End Date: Ongoing

Responding Person(s): Greg King, Central Purchasing Agent

Department of Finance Phone No. (808) 270-7488

Ref.

No. Internal Control Findings

2016-005 Internal Controls Over Miscellaneous Cash Receipts - Significant Deficiency

Recommendation

Adequate internal controls should be maintained to ensure that adequate segregation of duties exist and that miscellaneous cash receipts are accurately collected, deposited and recorded in the County's general ledger. Evidence of the performance and review of the various employees should be documented on daily cash summary reports in the form of sign offs by personnel involved.

Views of Responsible Officials and Planned Corrective Action

Management concurs with the finding. The Treasury Division will be reviewing the Cash Handling Policies and Procedures to ensure that it provides adequate internal control measures safeguarding the County's cash assets. The Treasury Division has initially engaged the Internal Control Analyst under the Department of Finance to conduct internal audit to personnel handling cash in January/February 2017 timeframe; this will also provide an opportunity for the Department of Finance to obtain an understanding on the current processes and procedures undertaken by the various departments handling cash. In addition, a Cash Overages and Shortages Policies and Procedures Manual is currently being drafted, of which will require all personnel handling cash to sign a certification that they received and understand the policies and procedures. The County of Maui is also working on the implementation of a countywide cashiering system, iNovah software; currently there are seven departments/agencies that have implemented the iNovah system since 2012. The Treasury Division has also piloted that iCapture Electronic Deposit Program in February 2016, to further simplify the receipt process for check deposits. The management has yet to determine the full implementation of the iCapture Electronic Deposit Program.

End Date: Ongoing

Responding Person(s): May-Anne Alibin, Treasurer

Department of Finance Phone No. (808) 270-7467

Ref.

No. Internal Control Findings

2016-006 Timely Reconciliation of Federal and State Grant Programs - Significant

Deficiency

Recommendation

The County has implemented mitigating controls such as a periodic reconciliation of federal and state grants. However, old grants and prior year receivables remain and continue to carry forward. The County should implement policies and procedures to complete monthly or quarterly reconciliations and monitoring of federal and state grants.

Views of Responsible Officials and Planned Corrective Action

Management concurs with the finding. A Grants Specialist was hired into the Office of the Mayor's Budget office on January 1, 2016. The Grants Specialist has been working diligently to resolve old grant balances and has been working with respective grant personnel in various departments to assist with the reconciliation process. Beginning in fiscal year 2017, the departments are required to submit a quarterly update of all outstanding grants in an effort to better monitor the balance, status and activities of all grants. The Grants Specialist and Finance personnel will continue to work with the respective grant managers to close old grants, resolve prior year grants receivables and perform necessary reconciliations.

End Date: Ongoing

Responding Person(s): Marci Sato, Senior Budget Specialist

Office of the Mayor

Phone No. (808) 270-7215

Ref.

No. Internal Control Findings

2016-007 Logical Access & Access Security - Significant Deficiency

Recommendation

We recommend that the County:

- 1. Establish a control process to review and confirm access rights periodically. There should be at least a semiannual review of user access.
- Monitor vendor access into IAS.
- 3. Develop formal password policies and procedures and strengthen password controls including a combination of minimum length, complexity, expiration, history, and lockout policy and duration.
- 4. Develop an information security policy, have the policy approved by the appropriate level of management and communicate the policy to employees.

Views of Responsible Officials and Planned Corrective Action

Management concurs with the finding.

- Once a year, the Real Property Assessment Division (RPAD) administrator signs an
 official user profile list. It is on our operational schedule in January. Security user profiles
 are reviewed frequently. Every time an employee leaves RPAD, joins RPAD, has a
 change in duties, is promoted or demoted, security profiles are reviewed and updated.
 When updating one user, it is common to scan all profiles for possible corrections.
- 2. Outside vendor access into IAS is closely monitored. Offsite access to iasWorld is monitored by ITSD through BOMGAR as of September 1, 2016. Offsite outside vendors are only given security when it is necessary. First they complete their assignments in iasWorld test. When their work has been approved in test, RPAD allows them to update production. Offsite vendor access is very infrequent. If data was compromised, there is a backup and recovery program.
- 3. Password policies and procedures have been recently implemented, September 2016.
- 4. An information security policy is being developed and will be implemented as soon as the policy is completed and approved by the appropriate level of management.

Ref.

No. Internal Control Findings (Continued)

2016-007 Logical Access & Access Security - Significant Deficiency

End Date: September 30, 2016 and ongoing

Responding Person(s): Jacob Verkerke, Chief Technology Offier

Department of Management Phone No. (808) 270-7842

Marcy Martin, Property Technical Officer

Department of Finance Phone No. (808) 463-3155

Ref.

No. Internal Control Findings

2016-008 Backup & Recovery - Significant Deficiency

Recommendation

We recommend that the County develop a formal backup and restore policy, have the policy approved by the appropriate level of management and communicate the policy to employees.

Views of Responsible Officials and Planned Corrective Action

Management concurs with the finding. The Backup Policy was published on July 1, 2016.

End Date: July 1, 2016 and ongoing

Responding Person(s): Jacob Verkerke, Chief Technology Officer

Department of Management Phone No. (808) 270-7842

Ref.

No. Internal Control Findings

2016-009 Information Technology (IT) Governance - Significant Deficiency

Recommendation

We recommend that the County hold formal steering committee meetings and complete IT Risk Assessment.

Views of Responsible Officials and Planned Corrective Action

Management concurs with the finding. The IT Governance function is currently being implemented. A cyber security assessment is being performed annually since FY2015.

End Date: Ongoing

Responding Person(s): Jacob Verkerke, Chief Technology Officer

Department of Management Phone No. (808) 270-7842

Ref.

No. Internal Control Findings

2016-010 Prior Period Adjustment - Significant Deficiency

Recommendation

Management should identify significant nonroutine accounting transactions and new accounting pronouncements and ensure that a process is established in which management-level fiscal personnel are actively involved in both the determination of the proper accounting treatment and timely review of the transactions being posted.

Views of Responsible Officials and Planned Corrective Action

Management concurs with the finding. The prior period adjustment was required due to the new Governmental Accounting Standards Board (GASB) Statement No. 68 - Accounting and Financial Reporting for Pensions.

The County of Maui strives for financial reports that are both transparent and accurate. The County of Maui believes that it had dedicated extensive time and resources towards the understanding and preparation of GASB Statement No. 68 reporting requirements. The journal entries relating to GASB Statement No. 68 is highly complex and thus, the County of Maui works collaboratively with the external auditors to ensure that the County of Maui meets the reporting requirements for accounting standard changes.

The County will work on documenting procedures related to the implementation of this new standard and will strive to get outside professional training and assistance to ensure this standard is correctly reflected in all future Financial Statements.

The County appreciates the efforts, assistance and recommendations of the external auditors. The County is committed to ongoing quality improvement and will strive to provide adequate staff training, seek professional technical guidance to ensure accurate and timing preparation, review and reporting of the Financial Statements.

End Date: June 30, 2016 and ongoing

Responding Person(s): Steve Tesoro, Accounting System Administrator

Department of Finance Phone No. (808) 270-7503

Ortaine Acidera, Acting Assistant Accounting System Administrator

Department of Finance Phone No. (808) 270-7497

Ref.

No. Internal Control over Compliance Findings

2016-011 Review of Subrecipient Single Audits - Significant Deficiency

Federal agency: Department of Housing and Urban Development

CFDA No: 14.228/14.219

Program: Community Development Block Grants (CDBG) - State's Program

and Non-Entitlement Grants in Hawaii/Small Cities Program

Recommendation:

We recommend the County create and document a process to comply with the subrecipient monitoring compliance requirement of the Uniform Guidance to annually verify that subrecipients expending \$750,000 or more in Federal awards during the subrecipient's fiscal year complete and submit a Single Audit report.

Views of Responsible Officials and Planned Corrective Action

Management concurs with the finding. CDBG will include the audit recommendation into the CDBG Program Operations Manual to ensure subrecipient's compliance with the requirement of the Uniform Guidance.

End Date: Ongoing

Responding Person(s): Joe Pontanilla, CDBG Director

Office of the Mayor

Phone No. (808) 270-7213

Ref.

No. Internal Control over Compliance Findings

2016-012 Completeness of Federal Expenditures Reported - Significant Deficiency

Federal agency: Environmental Protection Agency

CFDA No: 66.468

Program: Capitalization Grants for Drinking Water State Revolving Funds

Recommendation:

The DWS should ensure that proper accounting procedures are being adhered to by all personnel involved in the financial reporting process to ensure expenditures are reported in the proper period.

Views of Responsible Officials and Planned Corrective Action

Management concurs with this finding. The DWS has discussed proper accounting procedures with all personnel involved in the financial reporting process to ensure expenditures are reported in the proper period. Management has also reassigned Wellhead Protection Program financial reporting responsibilities to higher level staff.

End Date: Ongoing

Responding Person(s): Holly Ho, Fiscal Officer

Department of Water Supply Phone No. (808) 270-7303

PART V SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

County of Maui State of Hawai'i STATUS REPORT Fiscal Year Ended June 30, 2016

This section contains the current status of our prior audit recommendations. The recommendations are referenced to the pages of the previous audit report for the fiscal year ended June 30, 2015, dated February 12, 2016.

SECTION II - FINANCIAL STATEMENT FINDINGS

Recommendations Status 2015-001 Internal Controls Over Vacation and Sick Leave **Records - Significant Deficiency** Adequate internal controls should be maintained to Not accomplished. Refer to ensure that vacation and sick leave records are finding 2016-001. accurately documented, calculated, and recorded in the County of Maui's general ledger. Evidence of the submission and review of the 'Application for Leave (DF-2) form' for the County of Maui, or 'Application for Leave (DF-1) form' for the Department of Water Supply (DWS), should be documented through signatures of both the employee taking leave and an appropriate approver. 2015-002 **Accounting for Construction in Progress - Significant** Deficiency The County and the DWS should establish formal Partially accomplished. Refer procedures to ensure that construction work in to finding 2016-002. progress and projects placed in service are communicated timely by project engineers to the fiscal staff in order to properly capitalize and depreciate those assets in the appropriate accounting period. The County should also establish procedures to maintain and reconcile the construction in progress schedule throughout the year. These procedures will also assist the County in completing the schedules required to timely close and prepare the County's comprehensive financial report. 2015-003 Internal Controls Over Automated Payroll Processing **System - Significant Deficiency** The Department of Finance should continue to Not accomplished. Refer to implement and monitor the payroll process to ensure finding 2016-003. that accurate employee compensation expenditures are recorded in the County's general ledger. activities include requiring Monitorina

documentation evidencing supervisory reviews of time records prior to processing and periodic reviews of employee and departmental time sheets at the

departmental level.

County of Maui State of Hawai'i STATUS REPORT (Continued) Fiscal Year Ended June 30, 2016

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Recommendations		Status
2015-004	Internal Controls Over pCard Purchases - Significant Deficiency	
	Adequate internal controls should be maintained to ensure that pCard transactions are properly documented, reviewed, and approved. Evidence of submission and review of the pCard transaction log should be documented through signatures of both the employee making the purchase and an appropriate approver.	Accomplished.
2015-005	Internal Controls Over Procurement Process	
	Adequate internal controls should be maintained to ensure that all policies established and stated by the County of Maui Code are consistently followed and adhered to.	Not accomplished. Refer to finding 2016-004.
2015-006	Internal Controls Over Miscellaneous Cash Receipts - Significant Deficiency	
	Adequate internal controls should be maintained to ensure that adequate segregation of duties exist and that miscellaneous cash receipts are accurately collected, deposited and recorded in the County's general ledger. Evidence of the performance and review of the various employees should be documented on daily cash summary reports in the form of sign offs by personnel involved.	Not accomplished. Refer to finding 2016-005.
2015-007	Timely Reconciliation of Federal and State Grant Programs - Significant Deficiency	
	The County has implemented mitigating controls such as a periodic reconciliation of federal and state grants. However, old grants and prior year receivables remain and continue to carry forward as there is no specific federal program compliance officer and compliance responsibilities are being handled at the departmental level. The County should implement policies and procedures to complete monthly or quarterly reconciliations and monitoring of federal and state grants.	Partially accomplished. Refer to finding 2016-006.

County of Maui State of Hawai'i STATUS REPORT (Continued) Fiscal Year Ended June 30, 2016

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Recommendations Status 2015-008 Logical Access & Access Security - Significant **Deficiency** We recommend that the County establish a control Partially accomplished. process in place to review and confirm access rights Refer to finding 2016-007. periodically with at least a semiannual review of user access. The review should include a report which includes a list of users and the security role assignments, department and accounts should be generated. These reports should be forwarded to the respective departments for review, with each department head noting any discrepancies. These updated lists should be sent to Finance for approval. and all changes should be documented by completion of a Network Access Security Form. The County should also monitor vendor access into IAS, develop formal password policies and procedures and strengthen password controls including a combination of minimum length, complexity, expiration, history, and lockout policy and duration. Lastly, the County should develop an information security policy, have the policy approved by the appropriate level of management and communicate the policy to employees. 2015-009 **Backup & Recovery - Significant Deficiency** We recommend that the County develop a formal Partially accomplished. backup and restore policy, have the policy approved Refer to finding 2016-008. by the appropriate level of management and communicate the policy to employees. Additionally, the County should perform formal system restoration testing. 2015-010 Information Technology (IT) Governance **Significant Deficiency** We recommend that the County hold formal steering Partially accomplished.

Refer to finding 2016-009.

committee meetings and complete an IT Risk

Assessment and fraud related assessment.

County of Maui State of Hawai'i STATUS REPORT (Continued) Fiscal Year Ended June 30, 2016

SECTION II - FINANCIAL STATEMENT FINDINGS (Continued)

Recommendations		Status
2015-011	Centralized Position to Monitor Federal Program Compliance - Significant Deficiency	
	The County should establish a centralized position charged with overseeing the County's compliance with federal award program requirements. That centralized position would coordinate with the departmental program managers to ensure that the County is complying with federal program requirements.	Accomplished.
2015-012	Completeness and Accuracy of the Financial Data Schedule - Material Weakness	
	The DHHC should hire, train, and maintain knowledgeable personnel in the Section 8 HCV Program to comply with the Uniform Financial Reporting Standards (24 CFR section 5.801) requirement of the program and timely reconcile financial reports to the general ledger accounting system on a consistent basis.	Accomplished.
	Controls over financial reporting ensure that timely and accurate reconciliations are consistently performed and supporting documentation is maintained.	

MANAGEMENT ADVISORY REPORT

County of Maui, Hawai'i



For the Fiscal Year Ended June 30, 2016

COUNTY OF MAUI

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To the Council Chair, and Members of the Council County of Maui Wailuku, Maui, Hawai'i

In planning and performing our audit of the financial statements of the County of Maui, State of Hawai'i (the County) as of and for the fiscal year ended June 30, 2016, in accordance with auditing standards generally accepted in the United States of America, we considered the County's internal control over financial reporting (internal control) as a basis for designing our auditing procedures 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 County's internal control. Accordingly, we do not express an opinion on the effectiveness of the County's internal control.

However, during our audit, we became aware of several matters that are opportunities for strengthening internal controls and operating efficiency. The memorandum that accompanies this report summarizes our findings and recommendations regarding these matters. We previously communicated to you about the County's internal control in our report dated December 13, 2016. This letter does not affect our report dated December 13, 2016, on the financial statements of the County.

We will review the status of these comments during our next audit engagement. We have already discussed many of these comments and suggestions with various County personnel, and we will be pleased to discuss them in further detail at your convenience, to perform any additional study of these matters, or to assist you in implementing these recommendations.

This communication is intended solely for the information and use of management, county council, and others within the County, and is not intended to be, and should not be, used by anyone other than these specified parties.

N&K OPAS, Inc.

Honolulu, Hawai'i December 13, 2016

County of Maui, Hawai'i **CURRENT FINDINGS AND RECOMMENDATIONS** Fiscal Year Ended June 30, 2016

2016-001 Improve Internal Controls Over pCard Purchases

Criteria:

Under the County of Maui's "Purchasing Card Program Policy and Procedures", the responsibility of the cardholder is to prepare and sign the monthly transaction log. The Department or Division Head must establish processes within the Department or Division to support the pCard program and to approve monthly transaction logs.

Condition: Approved employees are provided a pCard which is used for County authorized purchases. Purchases must be listed on a monthly pCard transaction log with supporting receipts or other documentation. Both the cardholder and a Department or Division Head must sign and approve the monthly transaction log. During our current year audit, we noted the following:

> We noted three (3) instances where a pCard transaction log was signed by the pCard cardholder, but the individual with authority to approve the transaction log did not match the authorized approver in the signature log maintained by the Purchasing Department.

Cause:

The Purchasing Department keeps a log of authorized signors for each department of the County, which would ordinarily be the Department or Division Head. However, as the Department or Division Heads are provided the directive that they may be able to establish processes within their own Department for the pCard program, they may be able to delegate an authorized signor that may sign off on pCard logs with their authority.

Effect:

The Department or Division Head should notify the Purchasing Department of any changes in the authorized approver to ensure the signature log is accurate and up to date. The lack of adequate internal controls over pCard purchases could result in misuse of the pCard for non-approved purchases in violation of the policies and procedures in place.

Recommendation

Adequate internal controls should be maintained to ensure that pCard transactions are properly approved. Evidence of submission and review of the pCard transaction log should be documented through signatures of both the employee making the purchase and an appropriate documented approver.

Views of Responsible Officials and Planned Correction Action

The County agrees with the finding and the recommendation. See Corrective Action Plan on page 7.

County of Maui, Hawai'i CURRENT FINDINGS AND RECOMMENDATIONS Fiscal Year Ended June 30, 2016

2016-002 Improve Monitoring over Worker's Compensation Claims

Criteria:

As part of an entity's framework of internal control, monitoring activities should be performed which involves assessing the design and operations of controls on a timely basis, capturing and reporting identified control deficiencies, and taking actions as necessary. Effective monitoring ensures that internal controls are modified as changes in conditions occur through ongoing activities and/or separate evaluations. The Risk Management Department should have monitored the change in vendors in order to verify that the claim files were transferred completely and accurately.

Condition: The County's Risk Management Department uses an outside vendor to calculate and process worker's compensation claims. In the 2015 fiscal year, we noted that the County switched vendors. During this transition in early 2015, all County manual files held by the previous vendor were scanned into electronic files into the new vendor's online system. The scanned files were not properly named and therefore the following documents were difficult to

- WC-1 Employer's Report of Industrial Injury
- WC-2 Physician's Report

retrieve:

WC-3 Carrier's Case Report

In addition, some electronic claim files were incomplete and documents were obtained from the Risk Management Office rather than the vendor's scanned files. During the 2016 audit, we continued to have difficulty in locating and obtaining these forms associated with older claims.

Cause: The County did not have a monitoring process over worker's compensation claims throughout the change in vendors.

Documentation that should be maintained in claimant files was not easily located. The County's worker's compensation files are not organized and appear incomplete.

Recommendation

Effect:

When using a third-party vendor to support County functions, the County's Risk Management Department should assign an individual with appropriate oversight to manage the relationship. This includes maintaining frequent contact with key vendor personnel, following up on unusual items, resolving issues in a timely manner, and reporting any issues to the County.

Views of Responsible Officials and Planned Correction Action

The County agrees with the finding and the recommendation. See Corrective Action Plan on page 8.

CORRECTIVE ACTION PLAN

County of Maui, Hawaii Management Advisory Report Current Findings and Recommendations - Corrective Action Plan Fiscal Year Ended June 30, 2016

2016-001 Improve Internal Controls Over pCard Purchases

Recommendation

Adequate internal controls should be maintained to ensure that pCard transactions are properly approved. Evidence of submission and review of pCard transaction should be documented through signatures of both the employee making the purchase and an appropriate documented approver.

View of Responsible Officials and Planned Corrective Action

Management concurs with the finding, however the Purchasing Division began a new and separate signature log system dedicated specifically for pCard transactions prior to the end of fiscal year 2016. In our opinion, this new and separate signature log should be noted in the current finding. After working with all the departments, the new log system is complete. In addition, based on preliminary recommendations from the County Auditor, the Purchasing Division has taken other steps to improve the pCard program including:

- 1. Archiving old data so it can be reviewed at any time.
- 2. Reviewing and cutting monthly expenditure limits for pCards wherever possible.
- 3. Insuring that all of our cardholder agreements are up to date.

The Purchasing Division is continuing to work on improving the pCard program, and our current focus is on developing an annual web based refresher training program. In the future we will be working on other preliminary and final audit recommendations from the County Auditor.

End Date: Ongoing

Responding Person(s): Greg King, Central Purchasing Agent

Department of Finance Phone No. (808) 270-7488

County of Maui, Hawaii Management Advisory Report Current Findings and Recommendations - Corrective Action Plan Fiscal Year Ended June 30, 2016

2016-002 Improve Monitoring over Worker's Compensation Claims

Recommendation

When using a third-party vendor to support County functions, the County's Risk Management Division should assign an individual with appropriate oversight to manage the relationship. This includes maintaining frequent contact with key vendor personnel, following up on unusual items, resolving issues in a timely manner, and reporting any issues to the County.

View of Responsible Officials and Planned Corrective Action

Management concurs with the recommendation. The TPA relationship is managed by the County's Risk Management Officer (RMO), who was involved in and oversaw the transition of TPAs beginning in March 2015. With the transition complete, RMO remains involved in the current TPA's day-to-day activities, responding to inquiries from claims adjusters, and working closely with TPA's WC team leader and account executive to address procedural or other matters requiring decision. Matters that cannot be resolved at the RMO level are escalated to the deputy corporation counsel assigned to workers compensation or the department head. From a document maintenance standpoint, the current TPA continues its effort to itemize batches of unindexed documents received in the transition period, and to update claims files in its client portal, viaOne. Meanwhile, WC documents are also being stored by Risk Management Division personnel in Legal Files, a department-wide database/filing system that was implemented in or around November 2014.

End Date: Ongoing

Responding Person(s): Lydia Toda, Risk Management Officer

Department of the Corporation Counsel

Phone No. (808) 270-7897

STATUS OF PRIOR YEAR'S RECOMMENDATIONS

County of Maui, Hawai'i STATUS REPORT Fiscal Year Ended June 30, 2016

This section contains the current status of our prior audit recommendations. The recommendations are referenced to the pages of the management advisory report for the fiscal year ended June 30, 2015, dated February 11, 2016.

Recommendations		Status	
2015-001	IMPROVE INTERNAL CONTROLS OVER PCARD PURCHASES (page 4)		
	Adequate internal controls should be maintained to ensure that pCard transactions are properly approved. Evidence of submission and review of the pCard transaction log should be documented through signatures of both the employee making the purchase and an appropriate documented approver.	Not accomplished. Refer to current year finding 2016-001.	
2015-002	IMPROVE MONITORING OVER WORKER'S COMPENSATION CLAIMS (page 5)		
	When using a third-party vendor to support County functions, the County's Risk Management Department should assign an individual with appropriate oversight to manage the relationship. This includes maintaining frequent contact with key vendor personnel, following up on unusual items, resolving issues in a timely manner, and reporting any issues to the County.	Not accomplished. Refer to current year finding 2016-002.	



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To the Honorable Mike White, Council Chair, COUNTY AND THE and Members of the County Council County of Maui, Hawai'i

We have audited the financial statements of the governmental activities, the business-type activities, each major fund, and the aggregate remaining fund information of the County of Maui, State of Hawai'i (County) for the fiscal year ended June 30, 2016. We have also audited the financial statements of the Department of Water Supply of the County of Maui (the Department), a proprietary fund of the County for the fiscal year ended June 30, 2016. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards and if applicable, Government Auditing Standards and the Uniform Guidance), as well as certain information related to the planned scope and timing of our audit. We have communicated such information in our letter to you dated August 17, 2016. Professional standards also require that we communicate to you the following information related to our audit.

Significant Audit Findings

Qualitative Aspects of Accounting Practices

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by the County are described in Note 1 to the financial statements. The County adopted the provisions of Governmental Accounting Standings Board (GASB) Statement No. 72, Fair Value Measurement and Application, GASB Statement No. 73, Accounting and Financial Reporting for Pensions and Related Assets that are not within the Scope of GASB Statement 68, and Amendments to Certain Provisions of GASB Statements 67 and 68, and GASB Statement No. 76, The Hierarchy of Generally Accepted Accounting Principles for State and Local Governments. We noted no transactions entered into by the County during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimates affecting the County's financial statements were:

- Estimate of the allowance for doubtful accounts
- Estimate of the useful lives of the County's capital assets used to compute depreciation expense
- Estimate of the liability for postretirement benefits other than pensions
- Estimate of the liability for the County's net pension liability
- Estimate of the loss reserves for claims and judgments
- Estimate of the landfill closure, post-closure cost liability, and pollution remediation obligation.

Management's estimate of the allowance for doubtful accounts is based on an analysis of past due accounts, the County's historical experience with the account, and other relevant factors to arrive at an overall assessment of whether the past due accounts will be collected. We evaluated the key factors and assumptions used to develop the estimate of the allowance for doubtful accounts in determining that it is reasonable in relation to the financial statements taken as a whole.

Management's estimate of the depreciation recorded on capital assets is based in part on the estimated useful lives of those capital assets. We evaluated the key factors and assumptions used to develop the estimated useful lives used to depreciate the County's capital assets in determining that it is reasonable in relation to the financial statements taken as a whole.

Management's estimate of the liability for postretirement benefits other than pensions was determined using actuarial calculations. We evaluated the key factors and assumptions used to compute the liability for postretirement benefits other than pensions in determining that it is reasonable in relation to the financial statements taken as a whole.

The collective net pension liability, deferred inflows of resources, and deferred outflows of resources of the cost-sharing multiple employer defined pension plan administered by the State of Hawaii's Employee Retirement System was determined by an actuarial valuation. The County's proportionate share of the collective net pension liability, deferred inflows of resources, deferred outflow of resources was based on the County's contributions to the pension plan relative to the contributions of all participating employers during the measurement period. We evaluated the key factors and assumptions used to compute the liability for the pension plan and reviewed the pension plan auditor's report in determining that the County's share of the net pension liability is reasonable in relation to the financial statements taken as a whole.

Management's estimate of the claims and judgments liability is based on the assessment of the County's legal counsel and an analysis of workers' compensation, automobile and general liability insurance claims. We evaluated the key factors and assumptions used to develop the estimate of the claims and judgments liability in determining that it is reasonable in relation to the financial statements taken as a whole.

Management's estimate of the landfill closure, post-closure cost liability, and pollution remediation obligation was determined by the County's engineers and the third party contractor. We evaluated the key factors and assumptions used to develop the liability in determining that it is reasonable in relation to the financial statements taken as a whole.

The financial statement disclosures are neutral, consistent, and clear.

Difficulties Encountered in Performing the Audit

We encountered no significant difficulties in dealing with management in performing and completing our audit.

Corrected and Uncorrected Misstatements

Professional standards require us to accumulate all known and likely misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management.

The following misstatements detected as a result of audit procedures were corrected by management:

1) Adjustment to properly state depreciation expense and accumulated depreciation (Department of Water Supply).

The following misstatements were detected as a result of audit procedures and were not corrected by management:

- 1) Adjustment to properly state accumulated depreciation (County).
- 2) Adjustment to properly capitalize interest on construction in progress (Department of Water Supply).
- 3) Adjustment to record vouchers payable (County and Department of Water Supply).
- 4) Adjustment to properly state net position for the 2015 expenses related to the Wellhead Project (Department of Water Supply).
- 5) Adjustment to record an allowance for a receivable balance (County).
- 6) Adjustment to record accounts receivable (County).
- 7) Adjustment to properly record reissued stale dated checks (County).

Management has determined that the effect is immaterial, both individually and in the aggregate, to the financial statements taken as a whole.

Disagreements with Management

For purposes of this letter, a disagreement with management is a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the auditor's report. We are pleased to report that no such disagreements arose during the course of our audit.

Management Representations

We have requested certain representations from management that are included in the management representation letter dated December 13, 2016 and an updated letter dated January 27, 2017.

Management Consultations with Other Independent Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If a consultation involves application of an accounting principle to the County's financial statements or a determination of the type of auditor's opinion that may be expressed on those statements, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

Other Audit Findings or Issues

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as the County's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

Other Matters

We applied certain limited procedures to the following which are required supplementary information (RSI) that supplements the basic financial statements:

- Management's Discussion and Analysis (MD&A),
- Statement of Revenues, Expenditures, and Changes in Fund Balance Budget and Actual General Fund
- Statement of Revenues, Expenditures, and Changes in Fund Balance Budget and Actual Highway Fund
- Statement of Revenues, Expenditures, and Changes in Fund Balance Budget and Actual -Sewer Fund
- Notes to the Budgetary Comparison Schedules
- Schedule of Funding Progress for the Hawaii Employer-Union Health Benefits Trust Fund (EUTF)
- Schedule of County's Proportionate Share of the Net Pension Liability
- Schedule of Employer Pension Contributions

Our procedures consisted of inquiries of management regarding the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We did not audit the RSI and do not express an opinion or provide any assurance on the RSI.

We were engaged to report on Combining Statements; as well as Schedule of Revenues, Expenditures, and Changes in Fund Balance – Budget and Actual; Schedules of Revenues – Budget and Actual; Schedules of Appropriations, Expenditures, and Encumbrances; and Capital Assets Used in Operations of Governmental Activities, which accompany the financial

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statements but are not RSI. With respect to this supplementary information, we made certain inquiries of management and evaluated the form, content, and methods of preparing the information to determine that the information complies with accounting principles generally accepted in the United States of America, the method of preparing it has not changed from the prior period, and the information is appropriate and complete in relation to our audit of the financial statements. We compared and reconciled the supplementary information to the underlying accounting records used to prepare the financial statements or to the financial statements themselves.

We were not engaged to report on the Statistical section, which accompanies the financial statements but are not RSI. Such information has not been subjected to the auditing procedures applied in the audit of the basic financial statements, and accordingly, we do not express an opinion or provide any assurance on it.

Restriction on Use

This information is intended solely for the information and use of the Chair and Members of the County Council and management of the County of Maui, Hawai'i, and is not intended to be, and should not be, used by anyone other than these specified parties.

N&K OPAS, Inc.

Honolulu, Hawaii January 27, 2017