

**September 30, 2022** 

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## Schedule of Expenditures of Federal and State Awards Seven-months Ended September 30, 2022

Federal Grantor/Passthrough Grantor/State Grantor/Federal Program Title	Assistance Listing Number	Grantor Number	Grant Period	Expenditures	Amount Paid to Subrecipients
U.S. Department of Health and Human Services					
Substance Abuse and Mental Health Services					
Projects of Regional and National Significance	93.243	1H79TI084352-01	9/30/21 to 9/29/22	\$ 171,029	\$ -
Coordinated Services and Access to Research for	93.153	H12HA24800-09-00	8/1/21 to 7/31/22	152,680	-
Women, Infants, Children, and Youth		H12HA24800-10-00	8/1/22 to 7/31/23	34,101	-
Total-ALN 93.153				186,781	
Health Center Program Cluster					
Health Center Program	93.224	6 H80CS00039-21-00	1/1/22 to 12/31/22	1,835,503	-
Health Center Program		H80CS00038-10-03	3/1/21 to 2/28/22	29,607	-
Health Center Program		6 H80CS00038-20-08	1/1/22 to 8/31/22	86,776	
COVID-19 Health Center Program		H8FCS40542-01	4/1/21 to 3/31/23	528,591	-
COVID-19 Health Center Program		4 H8ECS38745-01	5/1/20 to 4/30/22	15,515	-
COVID-19 Health Center Program		4 H8DCS36482-01	4/1/20 to 3/31/22	117,872	-
COVID-19 Health Center Program		6 H8CCS35283-01	3/15/20 to 3/14/22	1,101	-
Total-ALN 93.224				2,614,965	
Grants to Provide Outpatient Early Intervention Services with Respect to HIV Disease	93.918	H76HA00128-31	1/1/22 to 12/31/22	382,395	-
COVID-19 Grants to Provide Outpatient Early Intervention		H7CHA37097-01-00	4/1/20 to 3/31/22	2,336	-
Services with Respect to HIV Disease					
Total-ALN 93.918				384,731	
Maternal Opioid Misuse Model	93.687	2A2CMS331766-01-00	1/1/22 to 12/31/22	475,750	
Opioid STR	93.788	HHS001062800003	10/1/21 to 9/30/22	267,256	
Total Direct U.S. Department of Health and Human Services				4,100,512	
Passed Through Harris County Public Health Department:					
HIV Emergency Relief Project Grants	93.914	22GEN0578	3/1/22 to 2/28/23	4,964,911	<u> </u>
Passed Through the Univ of Texas MD Anderson Cancer Center Research and Development Cluster					
Cancer Treatment Research	93.395	3MU1 AI068619	9/1/21 to 12/31/22	23,684	

# **Harris County Hospital District** d/b/a Harris Health System

# (A Component Unit of Harris County, Texas)

Schedule of Expenditures of Federal and State Awards (Continued) Seven-months Ended September 30, 2022

Federal Grantor/Passthrough Grantor/State Grantor/Federal Program Title	Assistance Listing Number	Grantor Number	Grant Period	Expenditures	Amount Paid to Subrecipients
Passed Through City of Houston:					
HIV Prevention Activities – Health Department Based	93.940	C20-002-22	1/1/22 to 12/31/22	144,945	-
Passed Through Texas Department of State Health Services					
HIV Prevention Activities – Health Department Based Total-ALN 93.940	93.940	HHS000322300001	1/1/21 to 8/31/22	76,412 221,357	
Sexually Transmitted Diseases (STD) Prevention and Control Grants	93.977	HHS000322300001	1/1/21 to 8/31/22	76,667	
Passed Through Texas A&M University Health Science Center Immunization Cooperative Agreements	93.268	HHS0001043100001	8/31/21 to 8/31/22	31,487	_
Passed Through Texas Health & Human Services Commission Cancer Prevention & Control Program for State, Territorial and Tribal Organizations (Fee-for-Service)	93.898	HHS 000734600039	9/1/21 to 8/31/22	386,388	
Maternal and Child Health Services Block Grant to the					
States (Fee-for-Service)	93.994	529-17-0023-00037A	9/1/21 to 8/31/22	70,474	-
Passed Through Baylor College of Medicine					
HIV-Related Training and Technical Assistance	93.145	U10HA29290	7/1/21 to 6/30/22	4,823	
Passed Through Baylor College of Medicine Research and Development Cluster					
Minority Health and Health Disparities Research	93.307	1 H8FCS40542-01	1/1/22 to 12/31/22	135,578	
Total U.S. Department of Health and Human Services				10,015,881	
U.S. Department of Homeland Security					
Passed through the Texas Department of Public Safety					
Disaster Grants-Public Assistance (Presidentially Declared Disasters)	97.036	DR-4332	8/23/17 to 8/22/20	371,158	
Total U.S. Department of Homeland Security				371,158	
U.S. Department of Justice					
Passed through the City of Houston					
Crime Victim Assistance	16.575	2016-VA-GX-0033	10/1/21 to 9/30/22	32,949	
Total U.S. Department of Justice				32,949	
Total Expenditures of Federal Awards				\$ 10,419,988	\$ -

# **Harris County Hospital District** d/b/a Harris Health System

(A Component Unit of Harris County, Texas)

Schedule of Expenditures of Federal and State Awards (Continued) Seven-months Ended September 30, 2022

Federal Grantor/Passthrough Grantor/ State Grantor/Federal Program Title	Grantor Number	Grant Period	Expenditures	Amount Paid to Subrecipients
			-	
Office of the Texas Governor				
Enhancement of a Community SAFE-Ready Facility	3942103	9/1/21 to 8/31/22	\$ 13,729	\$ -
	3942104	9/1/22 to 8/31/23	9,616	
Total-Enhancement of a Community SAFE-Ready Facility			23,345	
Texas Department of State Health Services				
TB-Prevention and Control – Hospitals (Fee-for-Service)	HHS000454800001	9/1/21 to 8/31/22	7,840	
ACS Epilepsy Program	HHS000701500003	9/1/21 to 8/31/22	68,186	-
	HHS000701500003	9/1/22 to 8/31/23	9,682	-
Total-ACS Epilepsy Program			77,868	
AIDS Drug Assistance Program Eligibility	18HHS00SS-R	4/1/21 to 3/31/22	13,490	-
c c ,	19HHS00SS-R	4/1/22 to 3/31/23	69,701	-
Total - AIDS Drug Assistance Program Eligibility			83,191	
Total Texas Department of State Health Services			168,899	
Texas Health and Human Services Commission				
Title V Fee for Service Prenatal Medical and Dental Grant Program	HHS000136500015	9/1/21 to 8/31/22	28,198	
Family Planning Grant Program (Fee-for-Service)	HHS000734600039	9/1/21 to 8/31/22	844,530	-
	HHS000734600039	9/1/22 to 8/31/23	10,972	-
Total Family Planning Grant Program			855,502	
Healthy Texas Women's Grant Program	HHS000734600039	9/1/21 to 8/31/22	30,876	-
	HHS000734600039	9/1/22 to 8/31/23	3,373	-
Total Healthy Texas Women's Grant Program			34,249	
Breast & Cervical Cancer Control Program (Fee-for-Service)	HHS000734600039	9/1/21 to 8/31/22	352,191	
Total Texas Health and Human Services Commission			1,270,140	-

Schedule of Expenditures of Federal and State Awards (Continued)
Seven-months Ended September 30, 2022

Federal Grantor/Passthrough Grantor/				Amount Paid to
State Grantor/Federal Program Title	Grantor Number	Grant Period	Expenditures	Subrecipients
Cancer Prevention and Research Institute of Texas				
Passed through Baylor College of Medicine				
Colorectal Screening and Follow-up Among an Urban Medically				
Underserved Population	PP170094	8/31/21 to 8/30/22	136,993	
Expansion of Cancer Prevention Services to Rural and Medically				
Underserved Populations	PP220038	8/31/22 to 8/30/23	7,067	
Texas Clinical Trial Participation Program Award	RP210143	8/31/22 to 8/30/23	5,642	
Expanding a Community Network for Cancer Prevention to Increase HPV				
Vaccine Uptake and Tobacco Prevention in a Medically Underserved				
Pediatric Population	PP190051	8/31/21 to 8/30/22	67,431	
Community Network for Cancer Prevention to Improve Cervical and				
Colorectal Screening and Follow-up Among an Urban Medically	PP210007	8/31/21 to 8/30/22	13,030	-
Underserved Population	PP210007	8/31/22 to 8/30/23	19,453	-
Total Cervical Cancer and Colorectal Screening Program			32,483	
Total Cancer Prevention and Research Institute				
of Texas			249,616	
Total Expenditures of State Awards			1,712,000	
Total Expenditures of Federal and State Awards			\$ 12,131,988	\$ -

Notes to the Schedule of Expenditures of Federal and State Awards Seven-months Ended September 30, 2022

#### Note 1: Basis of Presentation

The accompanying schedule of expenditures of federal and state awards (Schedule) includes the federal and state award activity of Harris County Hospital District, d/b/a Harris Health System (System) under programs of the federal and state of Texas governments for the seven-months ended September 30, 2022. The information in this Schedule is presented in accordance with the requirements of the Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) and the Texas Grant Management Standards (TxGMS). Because the Schedule presents only a selected portion of the operations of the System, it is not intended to and does not present the financial position, changes in net position or cash flows of the System.

## Note 2: Summary of Significant Accounting Policies

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following, as applicable, either the cost principles contained in the Uniform Guidance or TxGMS, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts shown on the Schedule, if any, 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 System has elected not to use the 10 percent de minimis indirect cost rate allowed under the Uniform Guidance.

## Note 4: Federal Loan Programs

The System did not have any federal or state loan programs during the seven-months ended September 30, 2022.

## **Note 5: FEMA Expenditures**

Non-federal entities must record expenditures for Federal Emergency Agency (FEMA) projects on the Schedule when: 1) FEMA has approved the non-federal entity's project worksheet and, 2) the non-federal entity has incurred the eligible expenditures. The expenditures for the seven-months ended September 30, 2022 for Federal Assistance Listing Number 97.036 include \$371,158 of expenditures that were incurred by the System prior to March 1, 2022 that the project worksheet was approved during the seven-months ended September 30, 2022.

# FORV/S

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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**

Board of Trustees Harris County Hospital District d/b/a Harris Health System Houston, Texas

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*. issued by the Comptroller General of the United States (Government Auditing Standards), the financial statements of the business-type activities and the aggregate discretely presented component units of Harris County Hospital District, d/b/a Harris Health System (System), a component unit of Harris County, Texas, as of and for the seven-months ended September 30, 2022, and the related notes to the financial statements, which collectively comprise the System's basic financial statements, and have issued our report thereon dated February 9, 2023. Our report includes reference to other auditors who audited the financial statements of Harris County Hospital District Foundation and an emphasis of matter paragraph regarding the adoption of a new standard, as described in our report on the System's financial statements. The financial statements of the Harris County Hospital District Foundation, Community Health Choice, Inc., and Community Health Choice Texas, Inc., the discretely presented component units included in the System's financial statements, were not audited in accordance with Government Auditing Standards and accordingly, this report does not include reporting on internal control over financial reporting or instances of reportable noncompliance associated with these discretely presented component units.

#### Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the System's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the System's internal control. Accordingly, we do not express an opinion on the effectiveness of the System'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.



Board of Trustees Harris County Hospital District d/b/a Harris Health System Page 7

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. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

#### Report on Compliance and Other Matters

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

#### 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.

FORVIS, LLP

Dallas, Texas February 9, 2023

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Report on Compliance for Each Major Federal and State Program; Report on Internal Control over Compliance; and Report on Schedule of Expenditures of Federal and State Awards Required by the Uniform Guidance and the *Texas Grant Management Standards* 

#### **Independent Auditor's Report**

Board of Trustees Harris County Hospital District d/b/a Harris Health System Houston, Texas

### Report on Compliance for Each Major Federal and State Program

#### Opinion on Each Major Federal and State Program

We have audited Harris County Hospital District, d/b/a Harris Health System's (System) compliance with the types of compliance requirements identified as subject to audit in the *OMB Compliance Supplement* and the *Texas Grant Management Standards* (TxGMS) that could have a direct and material effect on each of the System's major federal and state programs for the seven-months ended September 30, 2022. The System's major federal and state programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, the System complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal and state programs for the seven-months ended September 30, 2022.

#### Basis for Opinion on Each Major Federal and State Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*); 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) and TxGMS. Our responsibilities under those standards, the Uniform Guidance and TxGMS are further described in the "Auditor's Responsibilities for the Audit of Compliance" section of our report.

We are required to be independent of the System and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal and state program. Our audit does not provide a legal determination of the System's compliance with the compliance requirements referred to above.

#### Responsibilities of Management for Compliance

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



Board of Trustees Harris County Hospital District d/b/a Harris Health System Page 9

#### Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the System's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, Government Auditing Standards, the Uniform Guidance and TxGMS will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the System's compliance with the requirements of each major federal and state program as a whole.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and
  perform audit procedures responsive to those risks. Such procedures include examining, on a test
  basis, evidence regarding the System's compliance with the compliance requirements referred to
  above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the System's internal control over compliance relevant to the audit in order
  to design audit procedures that are appropriate in the circumstances and to test and report on internal
  control over compliance in accordance with the Uniform Guidance and TxGMS, but not for the purpose
  of expressing an opinion on the effectiveness of the System's internal control over compliance.
  Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

#### **Report on 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 or state program on a timely basis. A material weakness in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal or state 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 or state program that is less severe than a material weakness in internal control over compliance, vet 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 "Auditor's Responsibilities for the Audit of Compliance" section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

Board of Trustees Harris County Hospital District d/b/a Harris Health System Page 10

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 and TxGMS. Accordingly, this report is not suitable for any other purpose.

# Report on Schedule of Expenditures of Federal and State Awards Required by the Uniform Guidance and TxGMS

We have audited the financial statements of the business type activities and the aggregate discretely presented component units of the System as of and for the seven-months ended September 30, 2022, and the related notes to the financial statements, which collectively comprise the System's basic financial statements. We issued our report thereon dated February 9, 2023, which contained unmodified opinions on those financial statements and reference to other auditors and an emphasis of matter paragraph regarding the adoption of a new accounting standard. Our audits were performed for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. The accompanying schedule of expenditures of federal and state awards is presented for purposes of additional analysis as required by the Uniform Guidance and TxGMS 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 audits 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 and state awards is fairly stated in all material respects in relation to the financial statements as a whole.

FORVIS, LLP

Dallas, Texas February 9, 2023

**Schedule of Findings and Questioned Costs** Seven-months Ended September 30, 2022

## Section I – Summary of Auditor's Results

	Statements

1.	Type of report the auditor issued on whether the financial stateme accordance with GAAP:	ents audited wer	e prepared in
		Disclaimer	
2.	Internal control over financial reporting:		
	Significant deficiency(ies) identified?	☐ Yes	⊠ None reported
	Material weakness(es) identified?	☐ Yes	⊠ No
3.	Noncompliance material to the financial statements noted?	☐ Yes	⊠ No
Fed	deral and State Awards		
4.	Internal control over major federal and state awards programs:		
	Significant deficiency(ies) identified?	☐ Yes	⊠ None reported
	Material weakness(es) identified?	☐ Yes	⊠ No
5.	Type of auditor's report issued on compliance for major federal ar	nd state award p	orograms:
	☐ Unmodified ☐ Qualified ☐ Adverse ☐ ☐	Disclaimer	
6.	Any audit findings disclosed that are required to be reported by 2 CFR 200.516(a)?	Yes	⊠ No
7.	Any audit findings disclosed that are required to be reported by TxGMS?	Yes	⊠ No
8.	Identification of major federal and state programs:		
	Cluster/Program		Assistance Listing Number
	Health Center Program [Federal] Family Planning Grant Program [State]		93.224 State
9.	The threshold used to distinguish between Type A and Type B fe	deral programs:	\$750,000.

- 10. The threshold used to distinguish between Type A and Type B state programs: \$750,000.

Schedule of Findings and Questioned Costs (Continued)
Seven-months Ended September 30, 2022

11. Auditee qualified as a low-risk auditee?		⊠ Yes	□ No
Section II – Financial Statement Finding	gs		
Reference Number	Finding		
	No matters are reportable	€.	
Section III – Federal Award Findings an	d Questioned Costs		
Reference Number	Finding		
	No matters are reportable	<del>)</del> .	
Section IV – State Award Findings and	Questioned Costs		
Reference			
Number	Finding		
	No matters are reportable	e.	

Summary Schedule of Prior Audit Findings Seven-months Ended September 30, 2022

Reference Number	Summary of Finding	Status
2022-001	COVID-19 Provider Relief Fund and American Rescue Plan (ARP) Rural Distribution	Resolved
	ALN 93.498 U.S. Department of Health and Human Services	
	Program Year 2021 - 2022	
	Criteria or specific requirement – Activities Allowed or Unallowed – Law (Pub. L. No 116-136, 134 Stat. 563 and Pub. L. No 116-139, 134 Stat. 622 and 623); Allowable Costs/Cost Principles	
	Condition – The System's records reflected an invoice in the total other PRF expenses of \$1,040, but the supporting invoices and payment support was for \$225.	
	Questioned Costs – \$815	
	Context – Out of a population of \$3,780 other PRF expenses reported in the PRF Reporting Portal, a sample of 40 was selected for testing. Our sample was not, and was not intended to be, statistically valid. Support for one expense was less than what was reflected in the System's records.	
	Effect – Other PRF expenses were overstated.	
	Cause – A purchase order was improperly marked in the system as fully received, resulting in the full amount being accrued when only a part of the invoice had been received.	