We found the financial statement presents fairly, in all material respects, the approved budget, expenditures, and costs claimed and accepted for the District Attorney’s Office Audit of Disability and Healthcare Insurance Fraud Program, for Fiscal Year Ending June 30, 2009. Grant amount received and expenditures incurred for FY 2009 were $519,124 and $753,599, respectively.
Dr. Peter Hughes  Ph.D., MBA, CPA, CCEP, CITP, CIA, CFE
Director  Certified Compliance & Ethics Professional (CCEP)
         Certified Information Technology Professional (CITP)
         Certified Internal Auditor (CIA)
         Certified Fraud Examiner (CFE)
E-mail: peter.hughes@iad.ocgov.com

Eli Littner  CPA, CIA, CFE, CFS, CISA
Deputy Director  Certified Fraud Specialist (CFS)
                 Certified Information Systems Auditor (CISA)

Michael J. Goodwin  CPA, CIA
Senior Audit Manager

Alan Marcum  MBA, CPA, CIA, CFE
Senior Audit Manager

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Senior Audit Manager  Certified Government Financial Manager (CGFM)

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To access and view audit reports or obtain additional information about the
OC Internal Audit Department, visit our website:  www.ocgov.com/audit

OC Fraud Hotline (714) 834-3608
Transmittal Letter

Audit No. 2911  October 28, 2009

TO:  Tony Rackauckas, District Attorney

FROM:  Dr. Peter Hughes, CPA, Director Internal Audit Department

SUBJECT:  Report on Audit of the Disability and Healthcare Insurance Fraud Program

Attached are three copies of our report on Audit of the District Attorney’s Disability and Healthcare Insurance Fraud Program for the fiscal year ending June 30, 2009. Please forward one copy to the State of California Department of Insurance as required by the grant documents.

Each month I submit an Audit Status Report to the BOS where I detail any material and significant audit findings released in reports during the prior month and the implementation status of audit recommendations as disclosed by our Follow-Up Audits. Accordingly, the results of this audit will be included in a future status report to the BOS.

Additionally, we will request your department complete a Customer Survey of Audit Services. You will receive the survey shortly after the distribution of our final report.

ATTACHMENTS

Other recipients of this report listed on the Independent Auditor’s Report on page 2.
## Table of Contents

*Report on Audit of the Disability and Healthcare Insurance Fraud Program*

**Audit No. 2911**

For the Fiscal Year Ending
June 30, 2009

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INDEPENDENT AUDITOR’S REPORT

October 22, 2009

State of California
Department of Insurance
Fraud Division
9342 Tech Center Drive, Suite 100
Sacramento, CA 95826

We have audited the accompanying Statement of Revenues and Expenditures - Budget and Actual, of the County of Orange District Attorney’s Office (District Attorney) Disability and Healthcare Insurance Fraud Program for the fiscal year ending June 30, 2009. This financial statement is the responsibility of the District Attorney’s management. Our responsibility is to express an opinion on this financial statement based on our audit.

We conducted our audit in accordance with generally accepted auditing standards of the United States of America and Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statement is free of material misstatements. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statement. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

On this date, and in accordance with Government Auditing Standards, issued by the Comptroller General of the United States, we have also issued a report on our consideration of internal control structure related matters and compliance with laws and regulations based on an audit of a financial statement of the Disability and Healthcare Insurance Fraud Program. The internal control and compliance reports are an integral part of this audit and should be considered with the results of our report on the financial statement.

In our opinion, the financial statement referred to above presents fairly, in all material respects, the revenues and expenditures of the District Attorney’s Disability and Healthcare Insurance Fraud Program for the fiscal year ending June 30, 2009, in conformity with generally accepted accounting principles of the United States of America.

This report is intended solely for the information and use of the County of Orange District Attorney’s Office, the Audit Committee and for filing with the State of California Department of Insurance and should not be used for any other purpose. However, this report is a matter of public record and its distribution is not limited.
Independent Auditor’s Report

Respectfully Submitted,

[Signature]

Dr. Peter Hughes, CPA, Director
Internal Audit Department

Distribution Pursuant to Audit Oversight Committee Procedure No. 1:

- Members, Board of Supervisors
- Members, Audit Oversight Committee
- Thomas G. Mauk, County Executive Officer
- Lisa Bohan-Johnston, Director, District Attorney Administrative Services
- Foreperson, Grand Jury
- Darlene J. Bloom, Clerk of the Board of Supervisors
ORANGE COUNTY
DISTRICT ATTORNEY’S OFFICE
DISABILITY AND HEALTHCARE INSURANCE FRAUD PROGRAM
STATEMENT OF REVENUES AND EXPENDITURES - BUDGET AND ACTUAL
FOR THE FISCAL YEAR ENDING JUNE 30, 2009

<table>
<thead>
<tr>
<th>Revenues:</th>
<th>Budget</th>
<th>Actual</th>
<th>Variance Favorable (Unfavorable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>California Department of Insurance Grant Receipts (Note 4)</td>
<td>$ 521,500</td>
<td>$ 519,124</td>
<td>$ (2,376)</td>
</tr>
<tr>
<td>Interest Income (Note 6)</td>
<td>53</td>
<td>53</td>
<td>0</td>
</tr>
<tr>
<td>Total Revenue</td>
<td>$ 521,553</td>
<td>$ 519,177</td>
<td>(2,376)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenditures:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries and Benefits (Note 3.A)</td>
<td>479,566</td>
<td>696,169</td>
<td>(216,603)</td>
</tr>
<tr>
<td>Operating Expenditures (Note 3.B)</td>
<td>41,987</td>
<td>57,430</td>
<td>(15,443)</td>
</tr>
<tr>
<td>Total Expenditures</td>
<td>$ 521,553</td>
<td>$ 753,599</td>
<td>$ (232,046)</td>
</tr>
<tr>
<td>Excess (Deficiency) of Revenues Over Expenditures (Note 5)</td>
<td>$(234,422)</td>
<td>$(234,422)</td>
<td></td>
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NOTE 1 – BACKGROUND

The District Attorney’s Disability and Healthcare Insurance Fraud Unit (Unit) utilizes various forms of investigative techniques and scientific aids in order to detect, investigate, and bring to justice perpetrators of disability and healthcare insurance fraud in Orange County. The Orange County District Attorney (OCDA) applied for and was awarded funding for the Disability and Healthcare Insurance Fraud Program (Program) by the California Department of Insurance (CDI) for the period July 1, 2008 through June 30, 2009. The Program funds provide for enhanced investigation and prosecution of fraudulent disability and healthcare insurance claims. The funds are available to local district attorneys under provisions of Section 1872.85 of the California Insurance Code.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The OCDA presents its revenues and expenditures on an accrual basis. Revenues are recognized when earned and expenditures are recognized when incurred.

NOTE 3 – EXPENDITURES

Expenditures were made for the purpose of the program as specified in Section 1872.85 of the Insurance Code and California Code of Regulations, Title 10, Sections 2698.95 and 2698.98.1(b)(1), the guidelines in the Request for Application, and the County’s Request for Application.

A. Salaries and Benefits

Expenditures charged to the Program are limited to personnel funded by the grant. These expenditures include salaries and benefits of attorneys and investigators directly involved with the Program. Also included are the salaries and benefits of support personnel (administrative, investigative, and clerical). County of Orange policies and procedures were used to verify the appropriateness of personnel costs. Personnel time charged to the Program was appropriately certified by Program personnel.

See Independent Auditor’s Report
B. Operating Expenditures

Operating expenditures include transportation supplement/allowance, travel/transportation, communication expenses, training and indirect costs. A flat indirect cost rate of ten percent was used for the year ended June 30, 2009. Indirect costs were calculated by applying the indirect cost rate to direct salaries. Direct charges to the program are not included in the calculation of indirect costs charged to the program.

C. Equipment

During the auditing period, no equipment was budgeted nor purchased for the program.

NOTE 4 – FUNDING AMOUNTS

The OCDA was originally awarded $521,500 from the Disability and Healthcare Insurance Fraud Program assessment for FY 2008/09. In a letter dated July 13, 2009, CDI notified the OCDA that the actual collections were lower than projected resulting in a reduction of $2,376 to the original award. The adjusted grant award was $519,124. The OCDA received the award amount in two distributions: $426,460 on March 11, 2009 and $92,664 on September 8, 2009. In addition, interest income for fiscal years 2005-06 and 2006-07 totaling $53 was approved by CDI to further program expenditures. Total grant funding was $519,124.

NOTE 5 – EXCESS OF EXPENDITURES OVER REVENUES

Current years excess expenditures over revenues: $234,422

The net expenditures in excess of revenues as of June 30, 2009 cannot be applied toward future years’ grant revenue. Therefore, the excess expenditures will be absorbed by the OCDA.

NOTE 6 - INTEREST INCOME

The interest income of $14 from fiscal year 2005-06 and $39 from fiscal year 2006-07 were approved by CDI to be used in the current fiscal year.

There is no interest income for the current fiscal year as of June 30, 2009.

See Independent Auditor’s Report
OTHER REPORTS
October 22, 2009

State of California
Department of Insurance
Fraud Division
9342 Tech Center Drive, Suite 100
Sacramento, CA 95826

We have audited the Statement of Revenues and Expenditures - Budget and Actual, of the County of Orange District Attorney’s Office (District Attorney) Disability and Healthcare Insurance Fraud Program, for the fiscal year ending June 30, 2009, and have issued our report thereon dated October 22, 2009.

We conducted our audit in accordance with generally accepted auditing standards of the United States of America and Government Auditing Standards, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statement is free of material misstatements, whether caused by error or fraud.

In planning and performing our audit of the Statement of Revenues and Expenditures - Budget and Actual, of the County of Orange District Attorney’s Office Disability and Healthcare Insurance Fraud Program for the fiscal year ending June 30, 2009, we considered the District Attorney’s internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statement, but not for the purpose of expressing an opinion on the effectiveness of the District Attorney’s internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the District Attorney’s internal control over financial reporting.

A significant deficiency is a control deficiency, or combination of control deficiencies, that adversely affects the District Attorney’s ability to initiate, authorize, record, process, or report financial data reliably in accordance with generally accepted accounting principles such that there is more than a remote likelihood that a misstatement of the District Attorney’s financial statement that is more than inconsequential will not be prevented or detected by the District Attorney’s internal control.

A material weakness is a significant deficiency, or combination of significant deficiencies, that results in more than a remote likelihood that a material misstatement of the financial statement will not be prevented or detected by the District Attorney’s internal control.
Independent Auditor’s Report

Our consideration of internal control over financial reporting was for the limited purpose described in the third paragraph above and would not necessarily identify all deficiencies in internal control that might be significant deficiencies or material weaknesses. We did not identify any significant deficiencies or material weaknesses in the District Attorney’s internal control over financial reporting.

This report is intended solely for the information and use of management of the District Attorney, the Audit Committee, and the California Department of Insurance. This restriction is not intended to limit the distribution of this report, which is a matter of public record.

Sincerely,

[signature]

Dr. Peter Hughes, CPA, Director
Internal Audit Department
INDEPENDENT AUDITOR’S REPORT ON COMPLIANCE
WITH LAWS AND REGULATIONS BASED ON AN AUDIT OF A FINANCIAL
STATEMENT PERFORMED IN ACCORDANCE WITH GOVERNMENT
AUDITING STANDARDS

October 22, 2009

State of California
Department of Insurance
Fraud Division
9342 Tech Center Drive, Suite 100
Sacramento, CA 95826

We have audited the Statement of Revenues and Expenditures - Budget and Actual, of
the County of Orange District Attorney’s Office (District Attorney) Disability and
Healthcare Insurance Fraud Program, for the fiscal year ending June 30, 2009, and have
issued our report thereon dated October 22, 2009.

We conducted our audit in accordance with generally accepted auditing standards of the
United States of America and Government Auditing Standards, issued by the
Comptroller General of the United States. Those standards require that we plan and
perform the audit to obtain reasonable assurance about whether the financial statement
is free of material misstatements.

Compliance with laws, regulations, contracts, and grants applicable to the Disability and
Healthcare Insurance Fraud Program is the responsibility of the District Attorney’s
management. As part of obtaining reasonable assurance about whether the District
Attorney’s financial statement is free of 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.

This report is intended solely for the information and use of management of the District
Attorney, the Audit Committee, and the California Department of Insurance. This
restriction is not intended to limit the distribution of this report, which is a matter of public
record.

Sincerely,

Dr. Peter Hughes, CPA, Director
Internal Audit Department