



Dave Yost • Auditor of State

**MENTAL HEALTH AND RECOVERY BOARD
BELMONT COUNTY**

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Dave Yost • Auditor of State

INDEPENDENT AUDITOR'S REPORT

Mental Health and Recovery Board
Belmont County
99 North Sugar Street
St. Clairsville, Ohio 43950

To the Members of the Board:

Report on the Financial Statements

We have audited the accompanying financial statements of the governmental activities and the major fund of the Mental Health and Recovery Board, Belmont County, Ohio (the Board), as of and for the year ended December 31, 2013, and the related notes to the financial statements, which collectively comprise the Board's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

Management is responsible for preparing and fairly presenting these financial statements in accordance with the cash accounting basis Note 2C describes. This responsibility includes determining that the cash accounting basis is acceptable for the circumstances. Management is also responsible for designing, implementing, and maintaining internal control relevant to preparing and fairly presenting financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to opine on these financial statements based on our audit. We audited in accordance with auditing standards generally accepted in the United States of America and the financial audit standards in the Comptroller General of the United States' *Government Auditing Standards*. Those standards require us to plan and perform the audit to reasonably assure the financial statements are free from material misstatement.

An audit requires obtaining evidence about financial statement amounts and disclosures. The procedures selected depend on our judgment, including assessing the risks of material financial statement misstatement, whether due to fraud or error. In assessing those risks, we consider internal control relevant to the Board's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not to the extent needed to opine on the effectiveness of the Board's internal control. Accordingly, we express no opinion. An audit also includes evaluating the appropriateness of management's accounting policies and the reasonableness of their significant accounting estimates, as well as our evaluation of the overall financial statement presentation.

We believe the audit evidence we obtained is sufficient and appropriate to support our audit opinions.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective cash financial position of the governmental activities and the major fund of the Mental Health and Recovery Board, Belmont County, Ohio, as of December 31, 2013, and the respective changes in cash financial position thereof and the budgetary comparison for the Mental Health and Recovery Fund thereof for the year then ended in accordance with the accounting basis described in Note 2C.

Accounting Basis

We draw attention to Note 2C of the financial statements, which describes the accounting basis, which differs from generally accepted accounting principles. We did not modify our opinion regarding this matter.

Other Matters

Supplemental and Other Information

We audited to opine on the Board's financial statements that collectively comprise its basic financial statements.

Management's Discussion & Analysis includes tables of net position, changes in net position, and governmental activities. This information provides additional analysis and is not a required part of the basic financial statements.

The Federal Awards Expenditures Schedule (the Schedule) also presents additional analysis as required by the U.S. Office of Management and Budget Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations and is also not a required part of the financial statements.

These tables and the Schedule are management's responsibility, and derive from and relate directly to the underlying accounting and other records used to prepare the basic financial statements. We subjected these tables and the Schedule to the auditing procedures we applied to the basic financial statements. We also applied certain additional procedures, including comparing and reconciling these tables and the Schedule directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and in accordance with auditing standards generally accepted in the United States of America. In our opinion, these tables and the Schedule are fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Other than the aforementioned procedures applied to the tables, we applied no procedures to any other information in Management's Discussion & Analysis, and we express no opinion or any other assurance on it.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated March 28, 2014, on our consideration of the Board's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. That report describes the scope of our internal control testing over financial reporting and compliance, and the results of that testing, and does not opine on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Board's internal control over financial reporting and compliance.

A handwritten signature in black ink that reads "Dave Yost". The signature is written in a cursive style with a large, looping initial "D".

Dave Yost
Auditor of State

Columbus, Ohio

March 28, 2014

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Mental Health and Recovery Board
Management's Discussion and Analysis
For the Year Ended December 31, 2013
Unaudited

The discussion and analysis of the Mental Health and Recovery Board's (the Board) financial performance provides an overall review of the Board's financial activities for the year ended December 31, 2013, within the limitations of the Board's cash basis of accounting. Readers should also review the basic financial statements and notes to enhance their understanding of the Board's financial performance.

Financial Highlights

Key financial highlights for 2013 are as follows:

- Net position of governmental activities decreased \$341,047 or 11.3 percent.
- The Board's general receipts accounted for \$2,584,060 in receipts or 79.7 percent of all receipts, and are primarily property taxes and unrestricted grants and entitlements. Program specific receipts in the form of operating grants and contributions accounted for \$659,925 or 20.3 percent of total receipts of \$3,243,985.
- The Board had \$3,585,032 in disbursements related to governmental activities; only \$659,925 of these disbursements was offset by program specific operating grants and contributions. General receipts of \$2,584,060 were inadequate to provide for these programs.
- The Board's major fund had \$3,243,985 in receipts and \$3,585,032 in disbursements. The cash fund balance decreased \$341,047.

Using the Basic Financial Statement

This annual report is presented in a format consistent with the presentation requirements of Governmental Accounting Standards Board Statement No. 34, as applicable to the Board's cash basis of accounting.

Report Components

The Statement of Net Position – Cash Basis and Statement of Activities – Cash Basis provide information about the cash activities of the Board as a whole.

Fund financial statements provide a greater level of detail. A fund was created and maintained on the financial records of the Board. These statements present financial information by fund.

The notes to the financial statements are an integral part of the government-wide and fund financial statements and provide expanded explanation and detail regarding the information reported in the statements.

Basis of Accounting

The basis of accounting is a set of guidelines that determine when financial events are recorded. The Board has elected to present its financial statements on a cash basis of accounting. This basis of accounting is a basis of accounting other than generally accepted accounting principles. Under the Board's cash basis of accounting, receipts and disbursements are recorded when cash is received or paid.

As a result of using the cash basis of accounting, certain assets and their related revenues (such as accounts receivable) and certain liabilities and their related expenses (such as accounts payable) are not recorded in the financial statements. Therefore, when reviewing the financial information and discussion within this report, the reader must keep in mind the limitations resulting from the use of the cash basis of accounting.

Mental Health and Recovery Board
Management's Discussion and Analysis
For the Year Ended December 31, 2013
Unaudited

Reporting the Board as a Whole

The Statement of Net Position – Cash Basis and Statement of Activities – Cash Basis reflect how the Board did financially during 2013, within the limitations of the cash basis of accounting. The Statement of Net Position – Cash Basis presents the cash balance of the governmental activities of the Board at year end. The Statement of Activities – Cash Basis compares cash disbursements with program receipts for the governmental program. Program receipts include operating grants and contributions restricted to meeting the operational requirements of the particular program. General receipts are all receipts not classified as program receipts. The comparison of cash disbursements with program receipts identifies how each governmental function draws from the Board's general receipts.

These statements report the Board's cash position and the changes in cash position. Keeping in mind the limitations of the cash basis of accounting, you can think of these changes as one way to measure the Board's financial health. Over time, increases or decreases in the Board's cash position are indicators of whether the Board's financial health is improving or deteriorating. When evaluating the Board's financial condition, you should also consider other non-financial factors as well, such as the Board's property tax base, the population base, the extent of the Board's debt obligations, the reliance on non-local financial resources for operations and the need for continued growth in the major local revenue sources such as property taxes.

In the Statement of Net Position – Cash Basis and the Statement of Activities – Cash Basis, the Board's activities consist of:

Governmental activities: The Board's mental health and dependency rehabilitation program services are reported here. State and federal grants and income from property taxes finance most of these activities. Benefits provided through governmental activities are not necessarily paid by the people receiving them.

Reporting the Board's Fund

Fund financial statements provide detailed information about the Board's major fund – not the Board as a whole. The Board established the Mental Health and Recovery Fund to manage its activities and to help demonstrate that restricted money is being spent for the intended purpose. The fund of the Board is governmental.

Governmental Fund - The Board's activities are reported in a governmental fund. The governmental fund financial statements provide a detailed view of the Board's governmental operations and the basic service it provides. Governmental fund information helps determine whether there are more or less financial resources that can be spent to finance the Board's program. The Board's only major governmental fund is the Mental Health and Recovery Fund. The program reported in the governmental fund is closely related to those reported in the governmental activities sections of the entity-wide statements.

Mental Health and Recovery Board
Management's Discussion and Analysis
For the Year Ended December 31, 2013
Unaudited

The Board as a Whole

Table 1 provides a summary of the Board's net position for 2013 compared to 2012 on a cash basis:

Table 1
Net Position – Cash Basis

	Governmental Activities	
	2013	2012
Assets		
Cash and Cash Equivalents	\$2,674,292	\$3,015,339
Total Assets	\$2,674,292	\$3,015,339
Net Position		
Unrestricted	2,674,292	3,015,339
Total Net Position	\$2,674,292	\$3,015,339

As mentioned previously, net position of governmental activities decreased \$341,047 or 11.3 percent during 2013. For the first half of the year, the Board's revenue came primarily from its two major fund providers, the Ohio Department of Mental Health and the Ohio Department of Alcohol and Drug Addiction Services. On July 1, 2013, these two departments were combined to form the Ohio Department of Mental Health and Addiction Services. Mental health and addiction funding will continue to be awarded by this single department on a state fiscal year basis. The decrease in net position represents an attempt by the Board to subsidize service delivery in our community in light of decreased state and federal funding. The Board is aware this approach cannot be continued indefinitely and is closely monitoring the Board's fiscal health.

Mental Health and Recovery Board
Management's Discussion and Analysis
For the Year Ended December 31, 2013
Unaudited

Table 2 reflects the changes in net position on a cash basis in 2013 and 2012 for governmental activities:

Table 2
Changes in Net Position

	Governmental Activities 2013	Governmental Activities 2012
Receipts:		
Program Cash Receipts		
Operating Grants and Contributions	\$659,925	\$4,137,632
Total Program Cash Receipts	659,925	4,137,632
General Receipts		
Property Taxes Levied for General Purposes	805,396	1,022,870
Revenue in Lieu of Taxes	17,998	2,129
Entitlements – Unrestricted	1,747,678	1,647,016
Other Receipts	12,988	8,986
Total General Receipts	2,584,060	2,681,001
Total Receipts	3,243,985	6,818,633
Disbursements:		
Mental Health and Dependency Rehabilitation:		
Salaries	241,290	273,504
Supplies	4,696	3,781
Equipment	0	5,647
Contracts – Repairs	10,476	8,417
Contracts – Services	3,220,782	6,551,119
Travel and Expenses	11,098	9,548
Public Employees' Retirement	35,015	36,710
Worker's Compensation	3,605	4,443
Medicare	2,470	2,965
Other Expenses	55,600	59,599
Total Disbursements	3,585,032	6,955,733
Change in Net Position	\$(341,047)	\$(137,100)

Program cash receipts represent 20.3 percent of total receipts and are primarily comprised of restricted operating grants and contributions.

General receipts represent 79.7 percent of the Board's total receipts, and of this amount, 31.2 percent are local taxes. State subsidies and entitlements make up the majority of the Board's general receipts (67.6 percent). Other receipts are very insignificant and somewhat unpredictable revenue sources.

Disbursements for the Mental Health and Dependency Rehabilitation program represent the overhead costs of running the Board and the contract services provided for the Board activities by not-for-profit agencies. The majority of disbursements were for contract services accounting for \$3,220,782, or approximately 89.8 percent of total disbursements.

Mental Health and Recovery Board
Management's Discussion and Analysis
For the Year Ended December 31, 2013
Unaudited

Governmental Activities

If you look at the Statement of Activities – Cash Basis, you will see that the first column details the mental health and dependency program services provided by the Board. The major program disbursements for governmental activities were for contract services, which accounted for 89.8 percent of all disbursements. The next column on the Statement entitled Program Cash Receipts identifies operating grants and contributions received by the Board that must be used to provide a specific service. The Net (Disbursements) Receipts and Changes in Net Position column compares the program cash receipts to the cost of the service. This “net cost” amount represents the cost of the program service which must be paid from the general receipts, which consists of property taxes, unrestricted grants and state entitlements, and other receipts. A comparison between the total cost of services and the net cost is presented in Table 3.

Table 3
Governmental Activities

	Total Cost of Services		Net Cost of Services	
	2013	2012	2013	2012
Mental Health and Dependency Rehabilitation:				
Salaries	\$241,290	\$273,504	\$241,290	\$273,504
Supplies	4,696	3,781	4,696	3,781
Equipment	0	5,647	0	5,647
Contracts – Repairs	10,476	8,417	10,476	8,417
Contracts – Services	3,220,782	6,551,119	2,563,857	2,415,487
Travel and Expenses	11,098	9,548	11,098	9,548
Public Employee's Retirement	35,015	36,710	35,015	36,710
Worker's Compensation	3,605	4,443	3,605	4,443
Medicare	2,470	2,965	2,470	2,965
Other Expenses	55,600	59,599	52,600	57,599
Total Disbursements	\$3,585,032	\$6,955,733	\$2,925,107	\$2,818,101

In 2013, the Mental Health and Recovery Board depended upon property taxes and unrestricted grants to support 81.6 percent of its governmental activities.

The Board's Fund

The Board's only governmental fund had total receipts of \$3,243,985 and disbursements of \$3,585,032. The fund balance decreased \$341,047 as a result of providing services to the community in excess of receipts. This deficit spending was a planned action to stabilize service delivery after drastic funding reductions. However, the Board will only continue this practice until it deems the cash flow needs of the system would be in jeopardy. At that point, funding to contract service providers will be reduced with a negative impact to consumer service delivery.

Budgeting Highlights

The Board's budget is prepared according to Ohio law and is based on accounting for certain transactions on a basis of cash receipts, disbursements, and encumbrances.

During 2013, neither the revenue or disbursement budget was amended. The Board did transfer \$5,000 from Other Expenses to Travel and Expenses in order to meet its obligations in those line items.

Mental Health and Recovery Board
Management's Discussion and Analysis
For the Year Ended December 31, 2013
Unaudited

Current Issues

The Board contracts with five provider agencies to deliver mental health and substance abuse services to the residents of Belmont, Harrison, and Monroe Counties.

The administration of Medicaid services was elevated to the Ohio Department of Jobs and Family Services along with funding once used to match the federal portion of Medicaid claims. 2013 was the first full year when no Medicaid funding was passed through the Board. The reduction in total revenue of \$3,574,648 from 2012 to 2013 reflects this operational change. The Board, with the remaining funding, will continue to be responsible for Non-Medicaid services to the indigent consumer. The Board and its administration will continue careful financial planning and prudent fiscal management to maximize these services to the community.

Contacting the Board's Financial Management

This financial report is designed to provide our citizens, taxpayers, and providers with a general overview of the Board's finances and to reflect the Board's accountability for the money it receives. Questions concerning any of the information should be directed to Sandra Kelner, Fiscal Officer, at Mental Health and Recovery Board, 99 North Sugar Street, St. Clairsville, Ohio 43950.

Mental Health and Recovery Board
Statement of Net Position - Cash Basis
December 31, 2013

	<u>Governmental Activities</u>
Assets	
Cash and Cash Equivalents	<u>\$2,674,292</u>
<i>Total Assets</i>	<u>2,674,292</u>
Net Position	
Unrestricted	<u>2,674,292</u>
<i>Total Net Assets</i>	<u><u>\$2,674,292</u></u>

See accompanying notes to the basic financial statements

Mental Health and Recovery Board
Statement of Activities - Cash Basis
For the Year Ended December 31, 2013

	Cash Disbursements	Program Cash Receipts Operating Grants and Contributions	Net (Disbursements) Receipts and Changes in Net Position Governmental Activities
Governmental Activities			
Mental Health and Dependency Rehabilitation:			
Salaries	\$241,290		(\$241,290)
Supplies	4,696		(4,696)
Contracts - Repairs	10,476		(10,476)
Contracts - Services	3,220,782	\$656,925	(2,563,857)
Travel and Expenses	11,098		(11,098)
Public Employee's Retirement	35,015		(35,015)
Worker's Compensation	3,605		(3,605)
Medicare	2,470		(2,470)
Other Expenses	55,600	3,000	(52,600)
<i>Total Governmental Activities</i>	<u>\$3,585,032</u>	<u>\$659,925</u>	<u>(\$2,925,107)</u>
General Receipts			
Property Taxes Levied for General Purposes			805,396
Revenue In Lieu Of Taxes			17,998
Grants and Entitlements not Restricted to Specific Programs			1,747,678
Miscellaneous			12,988
<i>Total General Receipts</i>			<u>2,584,060</u>
Change in Net Position			(341,047)
<i>Net Position Beginning of Year</i>			<u>3,015,339</u>
<i>Net Position End of Year</i>			<u>\$2,674,292</u>

See accompanying notes to the basic financial statements

Mental Health and Recovery Board
Statement of Assets and Fund Balances - Cash Basis
Governmental Fund
December 31, 2013

	Mental Health and Recovery Fund
Assets	
Cash and Cash Equivalents	\$2,674,292
<i>Total Assets</i>	2,674,292
Fund Balance	
Assigned	211,800
Unassigned (Deficit)	2,462,492
<i>Total Cash Basis Fund Balance</i>	\$2,674,292

See accompanying notes to the basic financial statements

Mental Health and Recovery Board

Statement of Receipts, Disbursements, and Changes in Fund Balance - Cash Basis

Governmental Fund

For the Year Ended December 31, 2013

	<u>Mental Health and Recovery Fund</u>
Receipts	
Property Taxes	\$805,396
Revenue In Lieu Of Taxes	17,998
Intergovernmental Grants	2,407,603
Miscellaneous	<u>12,988</u>
<i>Total Cash Receipts</i>	<u>3,243,985</u>
Disbursements	
Current:	
Salaries	241,290
Supplies	4,696
Contracts - Repairs	10,476
Contracts - Services	3,220,782
Travel and Expenses	11,098
Public Employee's Retirement	35,015
Worker's Compensation	3,605
Medicare	2,470
Other Expenses	<u>55,600</u>
<i>Total Cash Disbursements</i>	<u>3,585,032</u>
<i>Excess of Cash Receipts (Under) Cash Disbursements</i>	(341,047)
<i>Cash Basis Fund Balance Beginning of Year</i>	<u>3,015,339</u>
<i>Cash Basis Fund Balance End of Year</i>	<u><u>\$2,674,292</u></u>

See accompanying notes to the basic financial statements

Mental Health and Recovery Board
Statement of Receipts, Disbursements, and Changes
In Cash Basis Fund Balance - Budget and Actual - Budget Basis
Mental Health and Recovery Fund
For the Year Ended December 31, 2013

	<u>Budgeted Amounts</u>		<u>Actual</u>	<u>Variance with Final Budget</u>
	<u>Original</u>	<u>Final</u>		
Receipts				
Property Taxes	\$800,000	\$800,000	\$805,396	\$5,396
Revenue In Lieu Of Taxes	0	0	17,998	17,998
Intergovernmental Grants	7,125,000	7,125,000	2,407,603	(4,717,397)
Miscellaneous	75,000	75,000	12,988	(62,012)
<i>Total Cash Receipts</i>	<u>8,000,000</u>	<u>8,000,000</u>	<u>3,243,985</u>	<u>(4,756,015)</u>
Disbursements				
Current:				
Salaries	280,530	280,530	241,290	39,240
Supplies	7,700	7,700	6,196	1,504
Equipment	6,000	6,000	0	6,000
Contracts - Repairs	16,000	16,000	12,976	3,024
Contracts - Services	6,075,000	6,075,000	3,420,782	2,654,218
Advertising and Printing	750	750	0	750
Travel and Expenses	10,250	15,250	13,898	1,352
Public Employee's Retirement	39,274	39,274	35,015	4,259
Worker's Compensation	6,000	6,000	3,605	2,395
Medicare	3,125	3,125	2,470	655
Other Expenses	135,000	130,000	60,600	69,400
<i>Total Cash Disbursements</i>	<u>6,579,629</u>	<u>6,579,629</u>	<u>3,796,832</u>	<u>2,782,797</u>
Excess of Cash Receipts Over/(Under) Cash Disbursements	<u>1,420,371</u>	<u>1,420,371</u>	<u>(552,847)</u>	<u>(1,973,218)</u>
<i>Unencumbered Cash Basis Fund Balance Beginning of Year</i>	2,931,589	2,931,589	2,931,589	0
Prior Year Encumbrances Appropriated	<u>83,750</u>	<u>83,750</u>	<u>83,750</u>	<u>0</u>
<i>Unencumbered Cash Basis Fund Balance End of Year</i>	<u><u>\$4,435,710</u></u>	<u><u>\$4,435,710</u></u>	<u><u>\$2,462,492</u></u>	<u><u>(\$1,973,218)</u></u>

See accompanying notes to the basic financial statements

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Mental Health and Recovery Board
Notes to the Basic Financial Statements
For the Fiscal Year Ended December 31, 2013

Note 1 – Reporting Entity

The Mental Health and Recovery Board, Belmont County (the Board), is a body politic and corporate established to exercise the rights and privileges the constitution and laws of the State of Ohio convey to it.

The Board is directed by an eighteen-member Board. Members shall be residents of the District. The Director of the Ohio Department of Mental Health and Addiction Service shall appoint eight members and the remaining ten members shall be appointed by the County Commissioners of Belmont, Harrison, and Monroe counties proportionate to population. The Board provides alcohol, drug addiction, and mental health services and programs to citizens of the Board area. These services are provided primarily through contracts with not-for-profit agencies.

The Board participates in the Eastern Alliance Council of Governments, which is defined as a jointly governed organization. Additional information concerning the jointly governed organization is discussed in Note 9.

A. Primary Government

A reporting entity is comprised of the primary government, component units and other organizations included ensuring that the basic financial statements are not misleading. The primary government of the Board consists of all funds, departments, boards, and agencies that are not legally separate from the Board.

B. Component Units

Component units are legally separate organizations for which the Board is financially accountable. Component units may also include organizations that are fiscally dependent on the Board in that the Board approves their budget, the issuance of their debt or the levying of their taxes. No separate governmental units meet the criteria for inclusion as a component unit.

Note 2 – Summary of Significant Accounting Policies

As discussed further in Note 2.C., these financial statements are presented on a cash basis of accounting. This cash basis of accounting differs from accounting principles generally accepted in the United States of America (GAAP). Generally accepted accounting principles include all relevant Governmental Accounting Standards Board (GASB) pronouncements, which have been applied to the extent they are applicable to the cash basis of accounting. Following are the more significant of the Board's accounting policies.

A. Basis of Presentation

The Board's basic financial statements consist of government-wide financial statements, including a Statement of Net Position – Cash Basis and a Statement of Activities – Cash Basis, and fund financial statements which provide a more detailed level of financial information.

The Statement of Net Position – Cash Basis and the Statement of Activities – Cash Basis displays information about the Board as a whole. These statements include the financial activities of the primary government. The statements distinguish the activities of the Board that are governmental in nature. Governmental activities generally are financed through taxes, intergovernmental receipts or other non-exchange transactions.

The Statement of Net Position – Cash Basis presents the cash balance of the governmental activities of the Board at year end. The Statement of Activities – Cash Basis compares disbursements and program receipts for each program or function of the Board's governmental activities. Disbursements are reported by function.

Mental Health and Recovery Board
Notes to the Basic Financial Statements
For the Fiscal Year Ended December 31, 2013

Note 2 – Summary of Significant Accounting Policies (Continued)

A. Basis of Presentation (Continued)

A function is a group of related activities designed to accomplish a major service or regulatory program for which the Board is responsible. The Board reports only one function, Mental Health and Dependency Rehabilitation, with associated objects. Program receipts include grants and contributions that are restricted to meeting the operational requirements of a particular program.

Receipts which are not classified as program receipts are presented as general receipts of the Board, with certain limited exceptions. The comparison of direct disbursements with program receipts identifies the extent to which each governmental program is self-financing on a cash basis or draws from the general receipts of the Board.

During the year, the Board segregates transactions related to the Board's function or activity in a separate fund in order to demonstrate legal compliance. Fund financial statements are designed to present financial information of the Board at this more detailed level. The focus of governmental fund financial statements is on major funds. Each major fund is presented in a separate column. The Board has only one fund which is its major fund.

B. Fund Accounting

The Board uses a fund to maintain its financial records during the year. A fund is defined as a fiscal and accounting entity with a self-balancing set of accounts. The fund of the Board is governmental.

Mental Health and Recovery Fund - This fund accounts for a county-wide property tax levy and federal and state grants that are primarily used to pay the costs of contracts with local mental health agencies that provide services to the public.

C. Basis of Accounting

The Board's financial statements are prepared using the cash basis of accounting. Receipts are recorded in the Board's financial records and reported in the financial statements when cash is received rather than when earned and disbursements are recorded when cash is paid rather than when a liability is incurred.

As a result of the use of this cash basis of accounting, certain assets and their related revenues (such as accounts receivable and revenue for billed or provided services not yet collected) and certain liabilities and their related expenses (such as accounts payable and expenses for goods or services received but not yet paid, and accrued expenses and liabilities) are not recorded in these financial statements.

D. Budgetary Data

Ohio law requires all funds, other than agency funds, to be budgeted and appropriated. The major documents prepared are the tax budget, the appropriation resolution, and the certificate of estimated resources, which use the budgetary basis of accounting. The tax budget demonstrates a need for existing or increased tax rates. The certificate of estimated resources establishes a limit on the amounts that the Board may appropriate. The appropriation resolution is the Board's authorization to spend resources and sets annual limits on expenditures plus encumbrances at a level of control selected by the Board. The Board uses the object as its legal level of control.

The certificate of estimated resources may be amended during the year if the Board's fiscal officer projects increases or decreases in receipts. The amounts reported as the original budget in the budgetary statements reflect the amounts in the certificate when the original appropriations were adopted. The amounts reported as the final budget in the budgetary statements reflect the amounts in the amended certificate in effect at the time the final appropriations were passed.

Mental Health and Recovery Board
Notes to the Basic Financial Statements
For the Fiscal Year Ended December 31, 2013

Note 2 – Summary of Significant Accounting Policies (Continued)

D. Budgetary Data (Continued)

The Board may amend appropriations throughout the year with the restriction that appropriations may not exceed estimated resources. The amounts reported as the original budget reflect the first appropriation for that fund covering the entire fiscal year, including amounts automatically carried over from prior years. The amounts reported as the final budget represent the final appropriation the Board passed during the year.

E. Cash

As required by Ohio Revised Code, the Belmont County Treasurer is custodian for the Board's cash. The Board's cash is held in the County's cash and investment pool, and is valued at the County Treasurer's carrying amount. Deposits and investment disclosures for the County as a whole may be obtained from the County.

F. Accumulated Leave

In certain circumstances, such as upon leaving employment or retirement, employees are entitled to cash payments for unused leave. Unpaid leave is not reflected as a liability under the Board's cash basis of accounting.

G. Employer Contributions to Cost-Sharing Pension Plans

The Board recognizes the disbursement for employer contributions to cost-sharing pension plans when they are paid. As described in Notes 6 and 7, the employer contributions include portions for pension benefits and for postretirement health care benefits.

H. Net Position

Net Position is reported as restricted when there are limitations imposed on their use either through enabling legislation or through external restrictions imposed by creditors, grantors, or laws or regulations of other governments. The Board's policy is to first apply restricted resources when an expense is incurred for purposes for which both restricted and unrestricted resources are available.

I. Fund Balance

Fund balance is divided into five classifications based primarily on the extent to which the Board is bound to observe constraints imposed upon the use of the resources in the governmental funds. The classifications are as follows:

Nonspendable The nonspendable fund balance category includes amounts that cannot be spent because they are not in spendable form, or are legally or contractually required to be maintained intact. The "not in spendable form" criterion includes items that are not expected to be converted to cash. It also includes the long-term amount of interfund loans.

Restricted Fund balance is reported as restricted when constraints placed on the use of resources are either externally imposed by creditors (such as through debt covenants), grantors, contributors, or laws or regulations of other governments; or is imposed by law through constitutional provisions.

Mental Health and Recovery Board
Notes to the Basic Financial Statements
For the Fiscal Year Ended December 31, 2013

Note 2 – Summary of Significant Accounting Policies (Continued)

I. Fund Balance (Continued)

Committed The committed fund balance classification includes amounts that can be used only for the specific purposes imposed by formal action (resolution) of the Board. Those committed amounts cannot be used for any other purpose unless the Board removes or changes the specified use by taking the same type of action (resolution) it employed to previously commit those amounts. In contrast to fund balance that is restricted by enabling legislation, the committed fund balance classification may be redeployed for other purposes with appropriate due process. Constraints imposed on the use of committed amounts are imposed by the Board, separate from the authorization to raise the underlying revenue; therefore, compliance with these constraints is not considered to be legally enforceable. Committed fund balance also incorporates contractual obligations to the extent that existing resources in the fund have been specifically committed for use in satisfying those contractual requirements.

Assigned Amounts in the assigned fund balance classification are intended to be used by the Board for specific purposes but do not meet the criteria to be classified as restricted or committed. In governmental funds other than the general fund, assigned fund balance represents the remaining amount that is not restricted or committed. In the general fund, assigned amounts represent intended uses established by the Board.

Unassigned Unassigned fund balance is the residual classification for the general fund and includes amounts not contained in the other classifications. In other governmental funds, the unassigned classification is used only to report a deficit balance.

The Board applies restricted resources first when expenditures are incurred for purposes for which either restricted or unrestricted (committed, assigned, and unassigned) amounts are available. Similarly, within unrestricted fund balance, committed amounts are reduced first followed by assigned, and then unassigned amounts when expenditures are incurred for purposes for which amounts in any of the unrestricted fund balance classifications could be used.

J. Property, Plant and Equipment

The Board records disbursements for acquisitions of property, plant, and equipment when paid. The accompanying financial statements do not report these items as assets.

Note 3 – Budgetary Basis of Accounting

The budgetary basis as provided by law is based upon accounting for certain transactions on the basis of cash receipts, disbursements, and encumbrances. The Statement of Receipts, Disbursements, and Changes in Cash Basis Fund Balance – Budget and Actual - Budget Basis presented for the Mental Health and Recovery Fund is prepared on the budgetary basis to provide a meaningful comparison of actual results with the budget. The difference between the budgetary basis and the cash basis is outstanding year end encumbrances which are treated as expenditures (budgetary basis) rather than as a reservation of fund balance (cash basis). The encumbrances outstanding at year end (budgetary basis) amounted to:

Mental Health and Recovery Fund	\$211,800
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Note 4 – Property Taxes

Property taxes include amounts levied against all real property and public utility property located in Belmont County. Property tax receipts received in 2013 for real and public utility taxes represents collections of 2012 taxes.

Mental Health and Recovery Board
Notes to the Basic Financial Statements
For the Fiscal Year Ended December 31, 2013

Note 4 – Property Taxes (Continued)

2013 real property taxes are levied after October 1, 2013 on the assessed values as of January 1, 2013, the lien date. Assessed values for real property taxes are established by State statute at 35 percent of appraised market value. 2013 real property taxes are collected in and intended to finance 2014.

Real property taxes are payable annually or semi-annually. If paid annually, payment is due December 31; if paid semi-annually, the first payment is due December 31, with the remainder payable by June 20. Under certain circumstances, State statute permits alternate payment dates to be established.

Public utility tangible personal property currently is assessed at varying percentages of true value; public utility real property is assessed at 25 percent of true value. 2013 public utility property taxes which became a lien December 31, 2012, are levied after October 1, 2013, and are collected in 2014 with real property taxes.

The full tax rate for all County operations for the year ended December 31, 2012, was \$14.80 per \$1,000 of assessed value. The assessed values of real and tangible personal property upon which 2012 property tax receipts were based are as follows (the latest information available):

Real Property	\$1,060,333,960
Public Utility Personal Property	118,782,540
Total	\$1,179,116,500

The County Treasurer collects property taxes on behalf of all taxing districts in the county, including the County. The County Auditor periodically remits to the Board its portion of the taxes collected.

Note 5 – Risk Management

The Board is exposed to various risks of loss related to torts and errors and omissions. During 2013, the Board contracted with two companies for insurance. Significant coverage is as follows:

Type of Coverage	Coverage	Deductible
Scottsdale Insurance Company:		
Directors and Officers Liability	\$2,000,000	\$0
State Auto Insurance Company:		
Building	\$222,300	\$267
Business Personal Property	\$41,800	\$117

Settled claims have not exceeded this commercial coverage in any of the past three years and there was no significant reduction in coverage from the prior year.

The Board pays the State Workers' Compensation System a premium based on a rate per \$100 of salaries. The rate is calculated based on accident history and administrative costs.

Note 6 – Defined Benefit Pension Plan

OHIO PUBLIC EMPLOYEES RETIREMENT SYSTEM

Plan Description – The Board participates in the Ohio Public Employees Retirement System (OPERS). OPERS administers three separate pension plans. The Traditional Pension Plan is a cost-sharing, multiple-employer defined benefit pension plan. The Member-Directed Plan is a defined contribution plan in which the member invests both member and employer contributions (employer contributions vest over five years at 20 percent per year).

Mental Health and Recovery Board
Notes to the Basic Financial Statements
For the Fiscal Year Ended December 31, 2013

Note 6 – Defined Benefit Pension Plan (Continued)

Under the Member-Directed Plan, members accumulate retirement assets equal to the value of the member and vested employer contributions plus any investment earnings. The Combined Plan is a cost-sharing, multiple-employer defined benefit pension plan. Under the Combined Plan, OPERS invests employer contributions to provide a formula retirement benefit similar in nature to, but less than, the Traditional Pension Plan benefit. Member contributions, the investment of which is self-directed by the members, accumulate retirement assets in a manner similar to the Member-Directed Plan.

OPERS provides retirement, disability, survivor and death benefits, and annual cost-of-living adjustments to members of the Traditional Pension and Combined Plans. Members of the Member-Directed Plan do not qualify for ancillary benefits. Authority to establish and amend benefits is provided by Chapter 145 of the Ohio Revised Code. OPERS issues a stand-alone financial report. Interested parties may obtain a copy by visiting <https://www.opers.org/investments/cafr.shtml>, writing to OPERS, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling 614-222-5601 or 800-222-7377.

Funding Policy – The Ohio Revised Code provides statutory authority for member and employer contributions and currently limits the employer contribution to a rate not to exceed 14 percent of covered payroll for state and local employer units. Member contribution rates, as set in the Ohio Revised Code, are not to exceed 10 percent of covered payroll for members in state and local employer units. For the year ended December 31, 2013, members in state and local classifications contributed 10 percent of covered payroll. Members in the state and local divisions may participate in all three plans. For 2013, member and employer contribution rates were consistent across all three plans.

The Board's 2013 contribution rate was 14.0 percent. The portion of employer contributions used to fund pension benefits is net of post-employment health care benefits. The portion of employer contribution allocated to health care for members in the Traditional Plan was 4 percent for 2012 (the latest information available). The portion of employer contributions allocated to health care for members in the Combined Plan was 6.05 percent for 2013. Employer contribution rates are actuarially determined.

The Board's required contributions for pension obligations to the Traditional Pension and Combined Plans for the years ended December 31, 2013, 2012, and 2011 were \$33,914, \$36,309, and \$39,224, respectively; 94 percent has been contributed for 2013 and 100 percent for 2012 and 2011.

Note 7 – Postemployment Benefits

OHIO PUBLIC EMPLOYEES RETIREMENT SYSTEM

Plan Description – Ohio Public Employees Retirement System (OPERS) administers three separate pension plans: The Traditional Pension Plan—a cost sharing, multiple-employer defined benefit pension plan; the Member-Directed Plan—a defined contribution plan; and the Combined Plan—a cost sharing, multiple employer defined benefit pension plan that has elements of both a defined benefit and defined contribution plan.

OPERS maintains a cost-sharing multiple-employer defined benefit post-employment health care plan for qualifying members of both the Traditional Pension and the Combined Plans. Members of the Member-Directed Plan do not qualify for ancillary benefits, including post-employment health care coverage. The plan includes a medical plan, prescription drug program and Medicare Part B premium reimbursement.

In order to qualify for post-employment health care coverage, age-and-service retirees under the Traditional Pension and Combined Plans must have 10 or more years of qualifying Ohio service credit. Health care coverage for disability benefit recipients and qualified survivor benefit recipients is available. The Ohio Revised Code permits, but does not mandate, OPERS to provide health care benefits to its eligible members and beneficiaries. Authority to establish and amend benefits is provided in Chapter 145 of the Ohio Revised Code.

Mental Health and Recovery Board
Notes to the Basic Financial Statements
For the Fiscal Year Ended December 31, 2013

Note 7 – Postemployment Benefits (Continued)

Disclosures for the health care plan are presented separately in the OPERS financial report which may be obtained by visiting <https://www.opeers.org/investments/cafr.shtml>, writing to OPERS, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling 614-222-5601 or 800-222-7377.

Funding Policy – The post-employment health care plan was established under, and is administrated in accordance with, Internal Revenue Code 401(h). The Ohio Revised Code provides the statutory authority requiring public employers to fund post retirement health care through contributions to OPERS. A portion of each employer's contribution to OPERS is set aside for the funding of post-retirement health care.

Employer contribution rates are expressed as a percentage of the covered payroll of active members. In 2013, state and local employers contributed at a rate of 14.0 percent of covered payroll. The Ohio Revised Code currently limits the employer contribution to a rate not to exceed 14 percent of covered payroll for state and local employer units.

Each year, the OPERS Retirement Board determines the portion of the employer contribution rate that will be set aside for funding of post-employment health care benefits. The portion of employer contributions allocated to health care for members in the Traditional Plan was 4.0 percent for 2012 (the latest information available). The portion of employer contributions allocated to health care for members in the Combined Plan was 6.05 percent for 2012 (the latest information available).

The OPERS Retirement Board is also authorized to establish rules for the payment of a portion of the health care benefits provided, by the retiree or their surviving beneficiaries. Payment amounts vary depending on the number of covered dependents and the coverage selected. Active members do not make contributions to the post-employment health care plan.

The Board's contributions allocated to fund post-employment health care benefits for the years ended December 31, 2013, 2012 and 2011 were \$9,690, \$10,001, and \$14,274, respectively; 94 percent has been contributed for 2013 and 100 percent for 2012 and 2011.

Changes to the health care plan were adopted by the OPERS Board of Trustees on September 19, 2012, with a transition plan commencing January 1, 2014. With the recent passage of pension legislation under SB 343 and the approved health care changes, OPERS expects to be able to consistently allocate 4 percent of the employer contributions toward the health care fund after the end of the transition period.

Note 8 – Contingencies

Grants

Amounts grantor agencies pay to the Board are subject to audit and adjustment by the grantor, principally the federal government. Grantors may require refunding any disallowed costs. Management cannot presently determine amounts grantors may disallow. However, based on prior experience, management believes any refunds would be immaterial.

Note 9 – Jointly Governed Organization

The Board is a member of the Eastern Alliance Council of Governments (the Council), which is a jointly governed organization, consisting of three Alcohol, Drug Addiction and Mental Health Services Boards serving Jefferson, Coshocton, Guernsey, Morgan, Muskingum, Noble, Perry, Belmont, Harrison, and Monroe counties. The Council was established under Chapter 167 of the Ohio Rev. Code. The purpose of the council is to promote cooperative agreements and coordinated action among members, state departments, and other local service entities, develop and implement joint quality improvement activities on a regular basis, plan, develop, fund and administer joint residential programming for target populations, and optimize comprehensive planning and program development.

Mental Health and Recovery Board
Notes to the Basic Financial Statements
For the Fiscal Year Ended December 31, 2013

Note 9 – Jointly Governed Organization (Continued)

The Council is managed by a board of trustees composed of the Executive Director, or the Director's designee, from each of its members. The continued existence of the Council is not dependent on the Board's continued participation and the Board has no equity interest or financial responsibility for the Council.

**MENTAL HEALTH AND RECOVERY BOARD
BELMONT COUNTY**

**FEDERAL AWARDS EXPENDITURES SCHEDULE
FOR THE YEAR ENDED DECEMBER 31, 2013**

FEDERAL GRANTOR Pass Through Grantor Program / Cluster Title	Grant Year	Federal CFDA Number	Expenditures
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			
<i>Passed Through Ohio Department of Mental Health:</i>			
Social Services Block Grant	2013	93.667	\$40,807
Block Grants for Community Mental Health Services	2013	93.958	<u>31,708</u>
Total Passed Through Ohio Department of Mental Health			72,515
<i>Passed Through Ohio Department of Alcohol and Drug Addiction Services:</i>			
Block Grants for Prevention and Treatment of Substance Abuse	2013	93.959	<u>300,909</u>
Total Passed Through Ohio Department of Alcohol and Drug Addiction Services			300,909
<i>Passed Through Ohio Department of Mental Health and Addiction Services:</i>			
Social Services Block Grant	2014	93.667	38,006
Block Grants for Community Mental Health Services	2014	93.958	21,236
Block Grants for Prevention and Treatment of Substance Abuse	2014	93.959	<u>207,366</u>
Total Passed Through Ohio Department of Mental Health and Addiction Services			266,608
<i>Passed Through Ohio Suicide Prevention Foundation:</i>			
Substance Abuse and Mental Health Services -			
Projects of Regional and National Significance	2013	93.243	1,000
Block Grants for Community Mental Health Services	2013	93.958	1,000
Block Grants for Prevention and Treatment of Substance Abuse	2013	93.959	<u>1,000</u>
Total Passed Through Ohio Suicide Prevention Foundation			<u>3,000</u>
Total U.S. Department of Health and Human Services			<u>643,032</u>
Total Federal Awards Expenditures			<u><u>\$643,032</u></u>

The accompanying notes are an integral part of this Schedule.

**MENTAL HEALTH AND RECOVERY BOARD
BELMONT COUNTY**

**NOTES TO THE FEDERAL AWARDS EXPENDITURES SCHEDULE
FOR THE YEAR ENDED DECEMBER 31, 2013**

NOTE A – SIGNIFICANT ACCOUNTING POLICIES

The accompanying Federal Awards Expenditures Schedule (the Schedule) reports the Board's federal award program disbursements. The Schedule has been prepared on the cash basis of accounting.

NOTE B – SUBRECIPIENTS

For the first half of the year, the Board passes certain federal awards received from the Ohio Department of Mental Health and the Ohio Department of Alcohol and Drug Addiction Services to other governments (sub-recipients). On July 1, 2013, these two departments were combined to form the Ohio Department of Mental Health and Addiction Services. As Note A describes, the Board reports expenditures of Federal awards to sub-recipients when paid in cash.

As a sub-recipient, the Board has certain compliance responsibilities, such as monitoring its sub-recipients to help assure they use these sub-awards as authorized by laws, regulations, and the provisions of contracts or grant agreements, and that sub-recipients achieve the award's performance goals.

NOTE C – MATCHING REQUIREMENTS

Certain Federal programs require the Board to contribute non-Federal funds (matching funds) to support the Federally-funded programs. The Board has met its matching requirements. The Schedule does not include the expenditure of non-Federal matching funds.



Dave Yost • Auditor of State

INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS REQUIRED BY GOVERNMENT AUDITING STANDARDS

Mental Health and Recovery Board
Belmont County
99 North Sugar Street
St. Clairsville, Ohio 43950

To the Members of the Board:

We have audited in accordance with auditing standards generally accepted in the United States and the Comptroller General of the United States' *Government Auditing Standards*, the financial statements of the governmental activities and the major fund of the Mental Health and Recovery Board, Belmont County, Ohio (the Board), as of and for the year ended December 31, 2013, and the related notes to the financial statements, which collectively comprise the Board's basic financial statements and have issued our report thereon dated March 28, 2014, wherein we noted the Board uses a special purpose framework other than generally accepted accounting principles.

Internal Control Over Financial Reporting

As part of our financial statement audit, we considered the Board's internal control over financial reporting (internal control) to determine the audit procedures appropriate in the circumstances to the extent necessary to support our opinions on the financial statements, but not to the extent necessary to opine on the effectiveness of the Board's internal control. Accordingly, we have not opined on it.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, when performing their assigned functions, to prevent, or detect and timely correct misstatements. A material weakness is a deficiency, or combination of internal control deficiencies resulting in a reasonable possibility that internal control will not prevent or detect and timely correct a material misstatement of the Board's financial statements. 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 internal control deficiencies that might be material weaknesses or significant deficiencies. Given these limitations, we did not identify any deficiencies in internal control that we consider material weaknesses. However, unidentified material weaknesses may exist.

Compliance and Other Matters

As part of reasonably assuring whether the Board's financial statements are free of material misstatement, we tested its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could directly and materially affect the determination of financial statement amounts. However, opining on compliance with those provisions was not an objective of our audit and, accordingly, we do not express an opinion. The results of our tests disclosed no instances of noncompliance or other matters we must report under *Government Auditing Standards*.

Purpose of this Report

This report only describes the scope of our internal control and compliance testing and our testing results, and does not opine on the effectiveness of the Board's internal control or on compliance. This report is an integral part of an audit performed under *Government Auditing Standards* in considering the Board's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

A handwritten signature in black ink that reads "Dave Yost". The signature is written in a cursive style with a large, looping "D" and "Y".

Dave Yost
Auditor of State

Columbus, Ohio

March 28, 2014



Dave Yost • Auditor of State

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH REQUIREMENTS APPLICABLE TO EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY OMB CIRCULAR A-133

Mental Health and Recovery Board
Belmont County
99 North Sugar Street
St. Clairsville, Ohio 43950

To the Members of the Board:

Report on Compliance for Each Major Federal Program

We have audited the Mental Health and Recovery Board's, Belmont County, Ohio (the Board), compliance with the applicable requirements described in the U.S. Office of Management and Budget (OMB) *Circular A-133, Compliance Supplement* that could directly and materially affect the Mental Health and Recovery Board's major federal program for the year ended December 31, 2013. The *Summary of Audit Results* in the accompanying Schedule of Findings identifies the Board's major federal program.

Management's Responsibility

The Board's management is responsible for complying with the requirements of laws, regulations, contracts, and grants applicable to its federal program.

Auditor's Responsibility

Our responsibility is to opine on the Board's compliance for the Board's major federal program based on our audit of the applicable compliance requirements referred to above. Our compliance audit followed auditing standards generally accepted in the United States of America; the standards for financial audits included in the Comptroller General of the United States' *Government Auditing Standards*; and OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. These standards and OMB Circular A-133 require us to plan and perform the audit to reasonably assure whether noncompliance with the applicable compliance requirements referred to above that could directly and materially affect a major federal program occurred. An audit includes examining, on a test basis, evidence about the Board's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe our audit provides a reasonable basis for our compliance opinion on the Board's major program. However, our audit does not provide a legal determination of the Board's compliance.

Opinion on the Major Federal Program

In our opinion, the Board complied, in all material respects with the compliance requirements referred to above that could directly and materially affect its major federal program for the year ended December 31, 2013.

Report on Internal Control Over Compliance

The Board's management is responsible for establishing and maintaining effective internal control over compliance with the applicable compliance requirements referred to above. In planning and performing our compliance audit, we considered the Board's internal control over compliance with the applicable requirements that could directly and materially affect a major federal program, to determine our auditing procedures appropriate for opining on each major federal program's compliance and to test and report on internal control over compliance in accordance with OMB Circular A-133, but not to the extent needed to opine on the effectiveness of internal control over compliance. Accordingly, we have not opined on the effectiveness of the Board'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, when performing their assigned functions, to prevent, or to timely detect and correct, noncompliance with a federal program's applicable compliance requirement. 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 federal program compliance requirement will not be prevented, or timely detected and corrected. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with federal program's applicable compliance requirement 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 would not necessarily identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

This report only describes the scope of our internal control compliance tests and the results of this testing based on OMB Circular A-133 requirements. Accordingly, this report is not suitable for any other purpose.



Dave Yost
Auditor of State

Columbus, Ohio

March 28, 2014

**MENTAL HEALTH AND RECOVERY BOARD
BELMONT COUNTY**

**SCHEDULE OF FINDINGS
OMB CIRCULAR A-133 § .505
DECEMBER 31, 2013**

1. SUMMARY OF AUDITOR'S RESULTS

(d)(1)(i)	Type of Financial Statement Opinion	Unmodified
(d)(1)(ii)	Were there any material control weaknesses reported at the financial statement level (GAGAS)?	No
(d)(1)(ii)	Were there any significant deficiencies in internal control reported at the financial statement level (GAGAS)?	No
(d)(1)(iii)	Was there any reported material noncompliance at the financial statement level (GAGAS)?	No
(d)(1)(iv)	Were there any material internal control weaknesses reported for major federal programs?	No
(d)(1)(iv)	Were there any significant deficiencies in internal control reported for major federal programs?	No
(d)(1)(v)	Type of Major Programs' Compliance Opinion	Unmodified
(d)(1)(vi)	Are there any reportable findings under § .510(a)?	No
(d)(1)(vii)	Major Programs (list):	Block Grants for the Prevention and Treatment of Substance Abuse - CFDA #93.959
(d)(1)(viii)	Dollar Threshold: Type A\B Programs	Type A: > \$ 300,000 Type B: all others
(d)(1)(ix)	Low Risk Auditee?	Yes

**2. FINDINGS RELATED TO THE FINANCIAL STATEMENTS
REQUIRED TO BE REPORTED IN ACCORDANCE WITH GAGAS**

None.

3. FINDINGS FOR FEDERAL AWARDS

None.

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Dave Yost • Auditor of State

MENTAL HEALTH AND RECOVERY BOARD

BELMONT COUNTY

CLERK'S CERTIFICATION

This is a true and correct copy of the report which is required to be filed in the Office of the Auditor of State pursuant to Section 117.26, Revised Code, and which is filed in Columbus, Ohio.

Susan Babbitt

CLERK OF THE BUREAU

CERTIFIED
APRIL 17, 2014