

NEW MEXICO OFFICE OF THE STATE AUDITOR
 OSA VERSION - REPORT REVIEW GUIDE FOR REVIEWING AU-C 805
 REPORTS ON PARTICIPANT EMPLOYER ALLOCATION SCHEDULES
OTHER POST EMPLOYMENT BENEFITS (OPEB)

This review guide should be used for reviewing the AU-C 805 reports on the Participant Employer Allocation Schedules produced by Retiree Health Care Authority (RHCA) pursuant to 2.2.2.10(AA) NMAC (2021 Audit Rule)

AGENCY NAME New Mexico Retiree Health Care Authority AU-C 805 Audit Report		AGENCY NUMBER/FISCAL YEAR	
NAME OF AUDITING FIRM		NAME OF AUDIT MANAGER	
NAME OF CONCURRING REVIEW AUDITING FIRM		NAME OF CONCURRING REVIEW AUDIT MANAGER	
DATE REPORT SUBMITTED TO STATE AUDITOR		Yes <input type="checkbox"/> No <input type="checkbox"/> Was the AU-C Report submitted to the OSA timely?	
OPINION(S) RENDERED ON THE AU-C 805 AUDIT		DATE OF OPINION	NUMBER OF FINDINGS
Were representatives of the governing authority(or head of a state agency) and top management present at the exit conference as required by Section 2.2.2.10(M) NMAC? If not, the compliance finding is reported on p. _____.		Yes <input type="checkbox"/> No <input type="checkbox"/>	

Objective:

The objectives of this review guide are to ensure that the audit report follows: (1) the requirements of 2.2.2.10(AA) NMAC; (2) AUC-C 805 Illustration #3, An Auditor’s Report of a Specific Element, Account or Item of a Financial Statement Prepared in Accordance with a General Purpose Framework; and (3) provides the participant governments with the information necessary to prepare the disclosure required by GASBS 75 Appendix C, Illustration #2, Note Disclosures and Required Supplementary Information for a Cost-Sharing Employer (No Nonemployer Contributing Entities).

Instructions:

The agency and/or IPA should review the AU-C report by answering the questions below with a “yes” or “no” answer. Any “no” answers require further explanation from the New Mexico Retiree Health Care Authority or their respective AU-C 805 auditors. Pursuant to 2.2.2.9(A)(3) NMAC, the completed review guide should be submitted to the Office of the State Auditor along with the report.

Authoritative References:

- AU-C *U.S. Auditing Standards – AICPA (Clarified)*
- GASBS *Governmental Accounting Standards Board Statement*
- NMAC *New Mexico Administrative Code*
- 2.2.2 NMAC *Requirements for Contracting and Conducting Audits of Agencies (Audit Rule 2021)*
- AAG-GAS *AICPA Audit and Accounting Guide: Government Auditing Standards and Single Audits (3/1/2019)*

Documents Required by the Office of the State Auditor	
Did the auditor submit an electronic copy of the AU-C 805 audit report along with a copy of the management representation letter pursuant to AU-C 805.A13 and 2.2.2.(9)(A)(3) NMAC?	YES _____ NO _____ Comments: _____ Page Ref: _____
Did the IPA complete a copy of this review guide and submit it to the OSA with the audit report pursuant to 2.2.2.(9)(A)(3) NMAC?	YES _____ NO _____ Comments: _____ Page Ref: _____

1 Requirements for the AU-C 805 Audit Report from Retiree Health Care Authority pursuant to 2.2.2.10(AA) NMAC	
A. Elements of the Independent Auditor’s Report (AU-C 805 Illustration 3 and AU-C 9805)	See below
(1) Does the title include the word <i>independent</i> ?	YES _____ NO _____ N/A _____ Comments: _____ Pg. Ref. _____
(2) Is the report addressed to the State Auditor, the entity and the governing body (if applicable)?	YES _____ NO _____ N/A _____ Comments: _____ Pg. Ref. _____
(3) Does the introductory paragraph state: “We have audited the accompanying schedule of employer allocations of the Retiree Healthcare Authority Postemployment Benefits (OPEB) Plan(s) as of and for the year ended June 30, 20XX, and the related notes. We have also audited the total for all entities of the columns titled net OPEB liability, total deferred outflows of resources, total deferred inflows of resources, and total OPEB expense (specified column totals) included in the accompanying schedule of OPEB amounts by employer of the RHCA OPEB Plan as of and for the year ended June 30 20XX, and the related notes.”	YES _____ NO _____ N/A _____ Comments: _____ Pg. Ref. _____
(4) Does a section with the heading “ Management’s Responsibility for the Schedules ” follow the introductory paragraph, and include the following wording? “Management is responsible for the preparation and fair presentation of these schedules in accordance with accounting principles generally accepted in "the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the	YES _____ NO _____ N/A _____ Comments: _____

and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion 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 RHCA's internal control over financial reporting and compliance.	
(11) Does the report include the manual or printed signature of the auditor's firm?	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(12) Does the report include the name of the city and state where the auditor practices? (If the information appears in the letterhead, that is sufficient)	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(13) Does the report include the date of the auditor's report?	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
B. Schedules and Contents	See below
(1) Is there a schedule titled "Schedule of Employer Allocations"?	YES ___ NO ___ N/A ___ Comments: Page Ref:
(a) Does the "Schedule of Employer Allocations" have three columns: (1) that shows each employer; (2) each employer's actual employer contributions; and (3) each employer's allocation percentage based on the contributions shown?	YES ___ NO ___ N/A ___ Comments: Page Ref:
(b) In the column labeled "Actual Employer Contributions" do all the contribution amounts total to the amount shown at the bottom of the column?	YES ___ NO ___ N/A ___ Comments: Page Ref:
(c) In the column labeled "Employer Allocation Percentage" do all the percentages add up to 100%?	YES ___ NO ___ N/A ___ Comments: Page Ref:
(2) Is there a schedule titled "Schedule of OPEB Amounts by Employer"?	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(a) Does the first column on the left show each participant employer?	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(b) Is the second column from the left "Net OPEB Liability" by employer? And does the total amount of this column equal the total net OPEB liability for the entire plan? (GASBS 75.96)	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(c) Do the next four columns show "Deferred Outflows of Resources" as listed below?	See below
(i) "Differences Between Expected and Actual Experience" by employer? GASBS 75.96(h)(1)	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(ii) "Net Difference Between Projected and Actual Investment Earnings on OPEB Plan Investments" by employer?	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(iii) "Changes of Assumptions" by employer? GASBS 75.96(h)(2)	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(iv) "Changes in Proportion and Differences Between Employer Contributions and Proportionate Share of Contributions" by employer? GASBS 75.96(h)(4)	YES ___ NO ___ N/A ___ Comments: Pg. Ref. _____

(v) Is the next column the “Total Deferred Outflows of Resources” by employer?	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(d) Do the next four columns show “Deferred Inflows of Resources” as listed below?	See below
(i) “Differences Between Expected and Actual Experience” by employer?	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(ii) “Net Difference Between Projected and Actual Investment Earnings on OPEB Plan Investments” by employer?	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(iii) “Changes of Assumptions” by employer? GASBS 75.96(h)(2)	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(iv) “Changes in Proportion and Differences Between Employer Contributions and Proportionate Share of Contributions” by employer? GASBS 75.96(h)(4)	YES ___ NO ___ N/A ___ Comments: Pg. Ref. ___
(v) Is the next column “Total Deferred Inflows of Resources” by employer?	YES ___ NO ___ N/A ___ Comments: Pg. Ref.
(e) Does the “Schedule of OPEB Amounts by Employer” include a section labeled “OPEB Expense” consisting of the following three columns?	See below
(i) “Proportionate Share of Plan OPEB Expense” by employer? (GASBS 75.63)	YES ___ NO ___ N/A ___ Comments: Page Ref:
(ii) “Net Amortization of Deferred Amounts from Changes in Proportion and Differences Between Employer Contributions and Proportionate Share of Contributions” by employer? (GASBS 75.64)	YES ___ NO ___ N/A ___ Comments: Page Ref: ___
(iii) “Total OPEB Expense” by employer? (GASBS 75.96(g))	YES ___ NO ___ N/A ___ Comments: Page Ref:
(f) Does each column described in (b) through (e) above show a total amount at the bottom of each column for all the employers?	YES ___ NO ___ N/A ___ Comments: Page Ref:
(g) Do the amounts shown in the columns add down and across? (test a few columns and rows)	YES ___ NO ___ N/A ___ Comments: Page Ref:
(3) Test the amortization amounts to be sure that they total to the sum of the current year additions to the deferred outflow and deferred inflow of resources that will be amortized in the future.	YES ___ NO ___ N/A ___ Comments: Page Ref:
(4) Is there a schedule presenting the following pursuant to GASBS 75.96(i)?	See below
(a) For each subsequent five years, and in the aggregate thereafter, the net amount of the employer’s balances of deferred outflows of resources and deferred inflows of resources in GASBS 75.96 subparagraph (h) that will be recognized in the employer’s OPEB liability?	YES ___ NO ___ N/A ___ Comments: Page Ref:
C. Additional Required Information for Participant Employers	See below
(1) For each participating employer, is the employer’s proportionate share disclosed of the collective net OPEB liability calculated using (a) a discount rate that is 1 –percentage-point higher; and (b) a discount rate that is 1-percentage-point lower? (GASBS 75.94(g))	YES ___ NO ___ N/A ___ Comments: Page Ref:
(2) Regarding an employer’s portion of the collective net OPEB liability, is the basis on which the proportion was determined disclosed, and any change in	YES ___ NO ___ N/A ___ Comments:

an employer’s proportion since the prior measurement date (if applicable)? (GASBS 75.96(b))	Page Ref: _____
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<p>D. Note Disclosures (GASBS 75 Illustration 2 and the items included below)</p> <p>(1) Do the note disclosures detail each component of allocable OPEB expense at the fund level, excluding employer-specific OPEB expense for changes in proportion plan? GASBS 75.60</p> <p>(2) Do the note disclosures include a detailed collective fund-level deferred outflows of resources and deferred inflows of resources by fund? GASBS 75.60</p>	<p>YES _____ NO _____ N/A _____</p> <p>Comments:</p> <p>Page Ref:</p>
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<p>A. Report on Internal Control over Financial Reporting and on Compliance and Other Matters Based on an Audit of Schedules Performed in Accordance with Government Auditing Standards</p> <p>These reports should follow the examples available from the latest version of the AAG GAS Chapter 4 Appendix.</p>	
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<p>(1) Example report wording is provided below for instances with “no material weaknesses identified; no significant deficiencies, no reportable instances of noncompliance or other matters identified” (AAG GAS 4.89 Example 4-3). Refer to the other examples provided in the AAG GAS 4.89 Appendix as needed based on the types of findings.</p>	<p>YES _____ NO _____ N/A _____</p> <p>Comments:</p> <p>Page Ref:</p>
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<p style="text-align: center;">Independent Auditor’s Report</p> <p>[Appropriate Addressee]</p> <p>We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the United States, the schedule of employer allocations and the specified column totals in the schedule of OPEB amounts by employer of RHCA as of and for the year ended June 30, 20XX, and the related notes and have issued our report thereon dated month day, 20XX.</p> <p>Internal Control Over Financial Reporting</p> <p>In planning and performing our audit of the schedules of employer allocations and the specified column totals in the schedule of OPEB amounts by employer, we considered RHCA’s internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the schedule of employer allocations and the specified column totals in the schedule of OPEB amounts by employer, but not for the purpose of expressing an opinion on the effectiveness of RHCA’s internal control. Accordingly, we do not express an opinion on the effectiveness of RHCA’s internal control.</p> <p>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 schedule of employer allocations and the specified column totals in the schedule of OPEB amounts by employer 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.</p> <p>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</p>	<p>Page Ref:</p>
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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.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether RHCA’s schedule of employer allocations and the specified column totals in the schedule of OPEB amounts by employer are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of the schedule of employer allocations and the specified column totals in the schedule of OPEB amounts by employer 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.

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 result 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.

[Auditor’s signature]
 [Auditor’s city and state]
 [Date of the auditor’s report]

B. Exit Conference	See below
(1) Is the date of the exit conference and the names and titles of those in attendance at the exit conference listed on the last page of the audit report? (Section 2.2.2.10(M)(1) NMAC)	YES _____ NO _____ N/A _____ Comments: Page Ref:
(2) If a quorum of a public body subject to the Open Meetings Act was present at the exit conference, was the exit conference held in a closed meeting to preserve the confidentiality of the information? If so, the disclosure should state that it was held in a closed session. If not, is there a related finding for noncompliance with the Open Meetings Act? (Section 2.2.2.10(M)(1-3) NMAC)	YES _____ NO _____ N/A _____ Comments: Page Ref:

Note: When this review guide is used by RHCA’s audit firm, it should be completed and signed by the audit manager or the audit firm employee in charge of the firm’s quality control system and the concurring reviewer by the outside IPA firm.

I hereby certify that the employer allocations of RHCA’s OPEB Plan and related notes were presented in accordance with applicable auditing, accounting and financial reporting standards, and 2.2.2 NMAC. I also certify that all of the questions noted above were answered correctly, page numbers were properly referenced for all “yes” answers, and all answers were fully explained or corrected.

IPA:

Print Name

Title

Signature

Date

Concurring Reviewer by outside IPA firm:

Print Name

Title

Signature

Date