



# **Ryan White Fiscal Requirements for Grantees and Subgrantees**

---

Presenter: Tom Hickey, MHS



# DSS Expectations of Grantees

---

- ❑ Stewardship of grant funds
- ❑ Quality management Program
- ❑ Appropriate Membership of Planning council/Planning Body (Part A Only)
- ❑ Adherence to Reporting Requirements
- ❑ Program and Fiscal Compliance
- ❑ Monitoring of Subcontractors (Part A & B)



# Stewardship of Grant Funds

---

- Allowable, proper, authorized, reasonable and necessary costs
- Ensuring that funds are used for Ryan White Program purposes
- Verification of payer of last resort
- Monitoring of cost caps
- Adequate documentation
- No supplanting



# Allowable Costs

---

Administrative Costs

Admin versus Indirect

Direct Program Costs

Costs must be tied to the delivery of services.

Hidden Administrative Costs – Rent, Etc.



# Monitoring of Cap on Charges

---

- Applies to all Ryan White Program A, B, C
- Must utilize a sliding-fee discount schedule
- Based on Charges
- Based on Local Policy and Procedure
- No longer charge once patient has exceeded cap.



# Payor of Last Resort

---

- ❑ Allocation of Expenses Among Funding Sources
- ❑ Grantees Receive Multiple RW Funding
- ❑ Grantees Receive Other Sources Of Funding
- ❑ Billing Medicaid, Medicare and other payors



# Allocation of Expenses Between Multiple Ryan White Funding Sources

---

How to ensure that the Ryan White Grantee is only paying for the service one time.

1. Know the overall subcontractor budget
2. Know the other Ryan White Funding sources and how they pay for services.
3. Know what services other RW funding sources are paying for.
4. Know the percentage of insured patients in the service area.

Ryan White Part C grantees that receive funding from Parts A and/or B must be sure that only one RW resource may be charged for a service.



# Allocation of Expenses Continued

---

## Payment Methodology

Unit Versus Line-Item (Categorical)

When to use each methodology?

Rural versus Urban?

High Volume Versus Lower Volume.

Expectations – From Contractors.



# Allocation of Expenses - Monitoring

---

Auditing/Monitoring

Unit Cost – Potential to Double Bill (Ryan White, Medicare, Medicaid)

Line-item – Sample Provider Schedules

Were there non-HIV Patients?

Where there patients that had Medicaid/Medicare?

If so Program Income rules in effect.



# **HRSA/HAB: What do they want in Fiscal area?**

---

Eligible clients and services

Third Party Reimbursement

UOB Tracking (Part A & B)

Fiscal Monitoring

Compliance with RW, GAAP and other  
Fiscal Requirements.



# ELIGIBILITY

---

Ryan White Services are being offered to eligible clients when:

Client is HIV positive

Client meets poverty guidelines (Excluding Part C)

Client is uninsured or if insured the grantee/  
subcontractor must have the ability to bill third  
party payors



# Third Party Reimbursement

---

Must Bill Third Party Payors including Medicare and Medicaid if the service is billable

Office of General Counsel – Interpretation

Subcontractor Reporting of Program Income

Use of Program Income



# Unobligated Balances Requirements

---

- **Budget Planning Tracking**

- Use spreadsheet/ year to date variance reports

- **Legislative Categories**

- Subcontractors 75/25 rule
- Administrative caps Quality management
- Allowable vs Non-Allowable Carry-over
- Rebates

- **Proactive Reallocation**



# Fiscal monitoring

---

*DSS the Federal Administrator for the Ryan White Program expects grantees to fiscally monitor its programs to assure that federal funds are expended according to federal requirements.*

*Therefore the grantee is expected to monitor the subcontractors through site visits and the invoice approval process.*

**Cost principles/standards A-122, A-87,**

**Federal Administration Required -133**

**Payer of last resort**

**Administrative cost caps**

**Allocations**

**Third Party reimbursements**

**Eligible Recipients**

**Covered services / Allowable activities  
,services and costs**

**Reporting of un-obligated balances  
additional funds**

**Quality and quantity of services being  
provided**



# Definition of Program Accountability

(cont.)

---

- Verify the delivery of services in compliance with:
  - HIV Treatment Modernization Act legislation
  - Federal requirements
  - HAB policies and procedures
  - Scope of work
  - Local contract requirements
  - Approved budget



## Successful Program Monitoring Includes

- Program reports
- Site visits
- Reviewing client records or charts
- Reviewing client satisfaction surveys
- Capacity development/technical assistance  
(best practices)



## Program Monitoring – OIG Findings

---

- Program monitoring and documentation not adequate (47% or 7 of 15)
  
- OIG For Cause Visits
  - Inadequate documentation of service provision
  - Client eligibility
  - Internal controls
  - Lack of payer of last resort documentation



## Program Monitoring – OIG Recommendations

- Clearer expectations in contract: specify level of program services (13% or 2 of 15)
- Improve program monitoring: adequate controls, monitoring, documentation, ensure policies and procedures are routinely followed (53% or 8 of 15)



# **Contract Monitoring**

---

## **□ Program Monitoring**

- Progress reports
- Data reports
- Monthly reports
- Quarterly reports

## **□ Fiscal Monitoring**

- Monthly invoicing
- Quarterly expenditure review
- Redistribution of funds (sweeps)
- Annual Agency Financial Audit Review



# Thank you

---

- Tom Hickey – [tjhickey1 @prodigy.net](mailto:tjhickey1@prodigy.net)