

**Health Resources & Services Administration (HRSA), HIV/AIDS Bureau (HAB), Division of Metropolitan HIV/AIDS Program  
Ryan White HIV/AIDS Program Part A Final Unobligated Balance Report and Final Carryover Request**

Instructions: This form provides a suggested format for reporting final Unobligated Balances (UOB) and final Carryover Requests. Section I contains sources of Unobligated Funds, Section II includes Reasons for Unobligated Funds, Section III includes Plans for use of the Carryover Funds, Section IV includes required signatures confirming the planned use of carryover funds. See the "Instructions" tab for additional detail.

Recipient Name: Fort Lauderdale EMA		Date: 8-17-23			
<b>Section I: Sources for Unobligated Funds Reported by Recipient</b>					
Fiscal Year and Source of Funds	Award Amount	Expenditures	UOB Amount	UOB %	Carryover Amount Requested
FY 2022 Part A Formula Funds	\$9,821,238	\$9,667,437	\$153,801	1.57%	\$153,801
FY 2021 Part A Carryover Funds to FY 2022			\$0	#DIV/0!	
FY 2022 Part A Supplemental Funds	\$4,983,171	\$4,983,171	\$0	0.00%	
<b>Part A SubTotal</b>	<b>\$14,804,409</b>	<b>\$14,650,608</b>	<b>\$153,801</b>		<b>\$153,801</b>
FY 2022 MAI Formula Funds	\$1,306,373	\$851,499	\$454,874	34.82%	\$454,874
FY 2021 MAI Carryover Funds to FY 2022	\$566,794	\$566,794	\$0	0.00%	
<b>MAI SubTotal</b>	<b>\$1,873,167</b>	<b>\$1,418,293</b>	<b>\$454,874</b>		<b>\$454,874</b>
<b>TOTAL PART A GRANT</b>	<b>\$16,677,576</b>	<b>\$16,068,901</b>	<b>\$608,675</b>		<b>\$608,675</b>
<b>FORMULA UOB PENALTY WAIVER</b>					
If your FY 2022 Part A Formula Funds UOB percent is greater than 5%, did you receive an approved Formula UOB penalty waiver due to the impact of the COVID-19 pandemic for FY 2022? (select option from drop-down list in B20)					
<b>Section II: Reasons for Unobligated Funds Reported by Recipient</b>					
Part A Source of Funds	UOB Amount	Reason(s) Funds Are Unobligated (Note: if you received an approved Formula UOB penalty waiver, based on your FY 2022 Part A Formula Funds UOB being greater than 5%, include a brief explanation of how the COVID-19 pandemic impacted ability to expend funds)			
Part A Formula: Administration	\$63,407	The Recipient's office was not fully staffed. Project full staffing within FY23-24			
Part A Formula: Quality Management	\$28,185	The Recipient's office was not fully staffed in FY22-23. Quality Management is now fully staffed.			
<b>List Core Medical Services Below by Amount (insert rows as appropriate):</b>					
Outpatient/Ambulatory Health Services (IPCBH)	\$15,725	One provider no longer able to bill for Ambulatory. Another provider underutilized.			
AIDS Pharmaceutical Assistance	\$4	Service category was essentially fully utilized. Providers left with unreimbursed units.			
Oral Health Care (Routine)	\$27,466	Majority of OH routine providers were underutilized. All providers working to build capacity.			
Oral Health Care (Specialty)	\$23	Service category was essentially fully utilized. Only one subrecipient providing this service.			
Medical Case Management (Disease Case Management)	\$14,918	Two providers in service category were modestly underutilized.			
Mental Health Services (Trauma-Informed)	\$40	Service category was essentially fully utilized. Providers left with unreimbursed units.			
Health Insurance Premium & Cost Sharing Assistance for Low Income Individuals	\$29	Service category was essentially fully utilized. Providers left with unreimbursed units.			
Substance Abuse Outpatient Care	\$8	Service category was essentially fully utilized. Providers left with unreimbursed units.			
<b>List Support Services Below by Amount (insert rows as appropriate):</b>					
Non-Medical Case Management Services (Centralized Intake and Eligibility Determination)	\$5	Service category was essentially fully utilized. Providers left with unreimbursed units.			
Non-Medical Case Management	\$3,938	One provider in service category was underutilized.			
Food Bank/Home Delivered Meals (Food Bank)	\$29	Service category was essentially fully utilized. Providers left with unreimbursed units.			
Food Bank/Home Delivered Meals (Food Voucher)	\$21	Service category was essentially fully utilized. Providers left with unreimbursed units.			
Other Professional Services (Legal Services)	\$3	Service category was essentially fully utilized. Providers left with unreimbursed units.			
<b>Overall Total Part A Formula Unobligated Funds (Services, Admin, CQM)</b>	<b>\$153,801</b>				
<b>Supplemental Source of Funds (not available for carryover)</b>					
<b>Supplemental: Administration</b>					
<b>Supplemental: Quality Management</b>					
<b>List Core Medical Services Below by Amount (insert rows as appropriate):</b>					
<b>List Support Services Below by Amount (insert rows as appropriate):</b>					
<b>Overall Total Supplemental Unobligated Funds (Services, Admin, CQM)</b>	<b>\$0</b>				
<b>MAI Source of Funds</b>					
<b>MAI: Administration</b>	<b>\$34,174</b>	<b>Reason(s) Funds Are Unobligated</b>			
<b>MAI: Quality Management</b>	<b>\$7,877</b>	The Recipient's office was not fully staffed in FY22-23. Quality Management is now fully staffed.			
<b>List Core Medical Services Below by Amount (insert rows as appropriate):</b>					
MAI Outpatient/Ambulatory Health Services	\$107,299	Ambulatory provider was unable to bill for ambulatory after 5th month due to affiliate relationship.			
MAI Mental Health Services	\$199	Service category was essentially fully utilized. Provider left with unreimbursed units.			
MAI Substance Abuse Outpatient Care	\$2	Service category was essentially fully utilized. Provider left with unreimbursed units.			
<b>List Support Services Below by Amount (insert rows as appropriate):</b>					
MAI Non-Medical Case Management (Centralized Intake and Eligibility Determination)	\$214,715	Provider underutilized due to additional funds swept into the category.			
MAI Non-Medical Case Management	\$10	Service category was essentially fully utilized. Providers left with unreimbursed units.			
No Assigned Contract	\$90,598	Recipient's Office unable to add additional MAI providers without an RFP.			
<b>Overall Total MAI Unobligated Funds (Services, Admin, CQM)</b>	<b>\$454,874</b>				

Unexpended Prior Year Carryover (Please describe in detail the reason(s) prior year Carryover funds identified in Section I were not expended ):

### Section III: Plan for the Use of Requested Carryover Funds

Planned Service Category (List Formula and MAI Allocations separately and insert rows as appropriate)	Carryover Amount Requested	Number of Clients to be Served	Number of Planned Service Units	Will this be a New, Expanded, or Continuing Service?	Is this a One Time Planned Expense? Yes/No
Outpatient/Ambulatory Health Services	\$153,801	128	3712	Continuing	No
MAI Mental Health Services	\$134,874	211	950	Continuing	No
MAI Substance Abuse Outpatient Care	\$145,000	24	1512	Continuing	No
MAI Non-Medical Case Management	\$175,000	251	2460	Continuing	No
<b>TOTAL CARRYOVER AMOUNT REQUESTED (Should match the amount in F18)</b>	<b>\$608,675</b>				

Comments (provide rationale on the planned use of carryover funds for any new, expanded, and/or continuing services listed above) :

We anticipate that the carryover funds for Part A will be fully expended in FY 23-24 as numerous providers end each year with unreimbursed units. We also anticipate that carryover funds for MAI will be fully expended in FY23-24 as our newest MAI provider continues to acquire new clients in the County and is requesting additional funds. Overall MAI Non-Medical Case Management (non-CIED) was underfunded last year. With Medicaid unwinding, we foresee increased need for NMCM services (including CIED) to assist clients in navigating loss of Medicaid coverage and educating them regarding the benefits of ACA enrollment. With MAI NMCM better funded, this would relieve some of the costs for Part A NMCM. The Recipient's Office and Planning Council PSRA Committee continue to hone the effectiveness of our reallocation efforts. MAI Substance Abuse and Mental Health Services were also underfunded. Similar to MAI NMCM, better funding would relieve some of the costs on the Part A corollary of these service categories.

### Section IV: Confirmation of Concurrence for Planned Use of Carryover Funds

The signature(s) below confirms that the planned use of Carryover funds is consistent with the Planning Council/Body FY 2022 priorities and allocations for the EMA/TGA.

Planning Council/Body Chair/Co-chair Signature(s): <i>Gary Rasmussen</i>	Date: 8-28-2023
Recipient Signature: <i>Jessica Roy</i>	Date: 8/28/23