

# National Monitoring Standards

## August 29, 2017

**Kibibi Matthews-Brown, M.S.**

**Division of HIV/AIDS Program (DSHAP)**

**HIV/AIDS Bureau (HAB)**

**Health Resources and Services Administration  
(HRSA)**



# National Monitoring Standards

---

- The purpose of the National Monitoring Standards (NMS)
- The implementation of the NMS
- Highlights of changes



# National Monitoring Standards: Purpose

---

- **Compilation of all major Ryan White HIV/AIDS Program documents used for COMPLIANCE, OVERSIGHT, and EXPECTATIONS**
- **Set of minimum expectations for use by all RWHAP Part A & Part B (including ADAP) recipients and subrecipients for administration, program, and fiscal monitoring**
- **Developed by: HRSA/HAB and expert fiscal and program consultants**



# National Monitoring Standards: Purpose

---

- **To aid recipients in meeting expectations for**
  - Fiscal and Program Management
  - Monitoring subrecipients
  - Reporting
- **To streamline, standardize, and improve program efficiency and responsiveness**

# National Monitoring Standards: Source Citations

- **Clear Source Citations for Requirements**
  - Ryan White HIV/AIDS Program Legislation
  - 45 CFR 75 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards
  - HRSA/HAB Policies
  - RWHAP Parts A and B Program Guidance
  - RWHAP Part A and Part B Manuals (clarification, best practice)



# National Monitoring Standards: Implementation

- **National Monitoring Standards Packet for Ryan White HIV/AIDS Program Part B contains**
  - Universal Monitoring Standards
  - Fiscal Monitoring Standards
  - Program Monitoring Standards
  - Frequently Asked Questions
- **Each individual monitoring standard**
  - Standard
  - Performance Measure/Method
  - Recipient Responsibility
  - Subrecipient Responsibility
  - Source Citation



# National Monitoring Standards: Implementation

- Review the NMS
- Share the NMS and supporting materials with program and fiscal staff who have monitoring responsibilities
- Review current monitoring systems, written procedures, and tools for potential revision
- Meet with legal, contracts, procurement, finance and other support offices to familiarize them with the NMS
- Review RFPs and subrecipient contract language to assure that they specify services to be provided, data to be collected and reported, and compliance requirements in accordance with the NMS



# National Monitoring Standards: Implementation

- Implement recipient and subrecipient responsibilities (*make sure alternate approaches meet standards*)
- Integrate the NMS into subrecipient contracting and monitoring efforts – monitoring tools, site visit schedules, and scopes as needed
- Hold meetings with subrecipients to review the NMS and clarify compliance issues
- Make the NMS easily accessible to subrecipients
- Fully implement any needed changes in your subrecipient monitoring (*policies, written procedures, tools, management, and reporting*)



# National Monitoring Standards: Implementation

---

- **Work with your HAB Project Officer**
- **Technical Assistance**
  - Consultant, Peer to Peer, HAB staff
  - Cooperative Agreements
  - TARGET Center Resources (tools, samples, presentations)
- **Individualized conference calls**
- **National webinars/conference calls**



# National Monitoring Standards: Updates

- **Revised Content Highlights**

- 45 CFR Part 75
- HAB Policy Notices
  - PCN 16-02 – RWHAP Services: Eligible Individuals and Allowable Uses of Funds and Corresponding FAQs
  - PCN 15-04 – Utilization and Reporting of Pharmaceutical Rebates and Corresponding FAQs
  - PCN 15-03 – Clarifications Regarding the RWHAP and Program Income



# National Monitoring Standards: 45 CFR Part 75

---

**2 CFR 200 OMB Uniform Guidance: Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance)** was implemented by the Department of Health and Human Services (HHS) as [45 CFR Part 75](#) on December 26, 2014



# National Monitoring Standards: 45 CFR Part 75

## 45 CFR 75 GOALS

- Streamline guidance for Federal awards to ease administrative burden
- Strengthen oversight over Federal funds to reduce risks of waste, fraud, and abuse
- Increase efficiency and effectiveness of Federal awards

# National Monitoring Standards: 45 CFR Part 75

## 45 CFR 75 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards

- **Subparts**

- A – Acronyms and Definition
- B – General Provisions
- C – Pre-Federal Award Requirements and Contents of Federal Awards
- D – Post Federal Award Requirements
- E – Cost Principles
- F – Audit Requirements



# National Monitoring Standards: 45 CFR Part 75

## 45 CFR 75 – Vocabulary

- **Recipient instead of grantee**
- **Subrecipient instead of subgrantee or subcontractor**
- **Contractor – no longer using the term Vendor**
  - Subrecipient carries out programmatic activities to meet the goals and objectives of the funded project
  - Contractor provides goods and services within normal business operations for the benefit of the recipient (ancillary to the operation of the State DOH)



# National Monitoring Standards: 45 CFR Part 75

---

- **Indirect cost rates** will remain in place until they are due to be re-negotiated
  - Adjustments may be required if unallowable costs were included (see §75.411)
- Subpart F, **Audit requirements**, are applicable to fiscal years beginning on or after December 26, 2014



# National Monitoring Standards: 45 CFR Part 75

---

- **RWHAP Statutory limit on administrative costs trump negotiated indirect cost rates**
  - Part B recipients: Up to 10% of the total award (direct and indirect) for administration 2618(b)(3)(A)
  - Part B subrecipients: the AGGREGATE total of direct administration costs and ALL indirect costs may not exceed 10%



# National Monitoring Standards: 45 CFR Part 75

## 45 CFR 75 – Subpart F, Audit Requirements

- The threshold for single audits raised from \$500,000 to **\$750,000**
- Federal agencies are prohibited from granting an extension to the single audit deadline
- Threshold for questioned costs – raised from \$10,000 to **\$25,000**



# National Monitoring Standards: 45 CFR 75

- **45 CFR 75 – Subrecipient Monitoring**

- Subrecipient and contractor determinations §75.351
- Requirement for pass-through entities §75.352
- Risk-based monitoring of subrecipients §75.352
- Also see Appendix II to Part 75 – Contract Provisions for Non Federal Entity Contracts Under Federal Awards
- **A recipient's failure to monitor their subrecipients is the #2 Single Audit finding**



# National Monitoring Standards: 45 CFR 75 Resources

---

- [45 CFR 75](#)
- [Council on Financial Assistance Reform FAQs re. 2 CFR 200](#)
- [Preamble and original Federal Register Notice \(12/26/13\) for Uniform Guidance](#)
- [Federal Register Notice \(12/19/14\) Final Rule Implementing 45 CFR 75](#)



# National Monitoring Standards: HAB Policy Notices

- **PCN 16-02 - RWHAP Services: Eligible Individuals and Allowable Uses of Funds and Corresponding FAQs**
  - RWHAP Core Medical Services
    - Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals
    - Medical Case Management, including Treatment Adherence Services
    - Substance Abuse Outpatient Care
  - RWHAP Support Services
    - Housing
    - Non-Medical Case Management Services
    - Other Professional Services



# National Monitoring Standards: PCN 16-02 – RWHAP

## Services: Eligible Individuals and Allowable Uses of Funds

- **RWHAP Core Medical Care:**

- Health Insurance Premium and Cost Sharing Assistance for Low-Income Individuals –
  - Health insurance also includes standalone dental insurance premiums to provide comprehensive oral health care services for eligible clients
- Medical Case Management, including Treatment Adherence Services –
  - Have as their objective improving health care outcomes where are non-medical case management services objective is improving access to needed services
- Substance Abuse Outpatient Care –
  - Acupuncture therapy may be allowable under this service category only when, as part of a substance use disorder treatment program funded under the RWHAP, and it is included in a documented plan
  - Syringe access services are allowable, to the extent that they comport with current appropriations law and applicable HHS guidance, including HRSA- or HAB-specific guidance



# National Monitoring Standards: PCN 16-02

- **RWHAP Support Services**

- Housing –

- Must have mechanisms in place to allow newly identified clients access to housing services
    - Must develop an individualized housing plan for each client receiving housing services and update it annually

- Non-Medical Case Management Services –

- Have as their objective improving access where are medical case management services objective is improving health care outcomes to needed services

- Other Professional Services –

- Legal Services – Excludes criminal defense and class-action suits unless related to access to services eligible for funding under the RWHAP
    - Permanency Planning
    - Income Tax Preparation



# National Monitoring Standards: PCN 15-04 – Utilization and Reporting of Pharmaceutical Rebates

- **Utilization and Reporting of Pharmaceutical Rebates**

- Rebates – Return of a part of a payment
- RWHAP Legislative Requirement – Rebates collected on ADAP medication purchased must be applied to the RWHAP with a priority, but not a requirement, that the rebates be placed back in ADAP
- Must be used for statutorily permitted purposes under the RWHAP Part B Program.
  - May be used for services that exceed the recipient's accepted RWHAP Part B implementation work plan
- Can be used for the State Match and Maintenance of Effort (MOE) requirements
- To the extent available, recipients and subrecipients must disburse funds available from rebates before requesting additional cash payments



# National Monitoring Standards: PCN 15-03 – Clarification Regarding the RWHAP and Program Income

- **Clarifications Regarding the Ryan White HIV/AIDS Program and Program Income:**
  - Program Income – Gross income earned by a non-Federal entity that is directly generated by a supported activity or earned as a result of the Federal award
  - Allowable costs limited to core medical and support services, CQM and administrative expenses, including planning and evaluation
  - To the extent available, recipients and subrecipients must disburse funds available from program income before requesting additional cash payments
  - The responsibility of the recipient to monitor and track program income earned by subrecipients



# Questions

---



# Contact Information

---

**Kibibi Matthews-Brown, M.S.**

**Public Health Analyst, Division of State HIV/AIDS  
Program (DSHAP)**

**HIV/AIDS Bureau (HAB)**

**Health Resources and Services Administration (HRSA)**

**Email: [KMatthews-Brown@hrsa.gov](mailto:KMatthews-Brown@hrsa.gov)**

**Phone: 301-443-1035**

**Web: [hab.hrsa.gov](http://hab.hrsa.gov)**

**Twitter: [twitter.com/HRSAgov](https://twitter.com/HRSAgov)**

**Facebook: [facebook.com/HHS.HRSA](https://facebook.com/HHS.HRSA)**

