Harris County Hospital District d/b/a Harris Health

Single Audit Reports

September 30, 2024

Harris County Hospital District d/b/a Harris Health (A Component Unit of Harris County, Texas) Contents September 30, 2024

Schedule of Expenditures of Federal and State Awards	1
Notes to the Schedule of Expenditures of Federal and State Awards	4
Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with Government Auditing Standards – Independent Auditor's Report	5
Report on Compliance for Each Major Federal and State Program; Report on Internal Control Over Compliance; and Report on Schedule of Expenditures of Federal and State Awards Required by the Uniform Guidance and the Texas Grant Management Standards – Independent Auditor's Report	7
Schedule of Findings and Questioned Costs	10
Summary Schedule of Prior Audit Findings	12

Harris County Hospital District d/b/a Harris Health (A Component Unit of Harris County, Texas) Schedule of Expenditures of Federal and State Awards Year Ended September 30, 2024

Federal Grantor/Passthrough Grantor/Federal Program Title U.S. Department of Health and Human Services	Assistance Listing Number	Grantor Number	Grant Period	Expenditures	Amount Paid to Subrecipients
Substance Abuse and Mental Health Services Projects of Regional and National Significance Total - ALN 93.243	93.243	5H79TI084352-03	9/30/23 - 9/29/24	\$ 476,485 476,485	\$ - -
Coordinated Services and Access to Research for Women, Infants, Children and Youth					
Ryan White Title IV WICY and A Ryan White Title IV WICY and A Total - ALN 93.153	93.153 93.153	H12HA24800-11-00 H12HA24800-12-00	8/1/23 - 7/31/24 8/1/24 - 7/31/25	370,633 53,862 424,495	
Health Center Program Cluster Health Center Program (Community Health Centers, Migrant Health Centers, Health Care for the Homeless, and Public Housing Primary Care) HOMELESS CARRYOVER GYE 12/23	93.224	H80CS00038-22-07	1/1/23 - 12/31/23	290,911	_
HOMELESS CARRYOVER GYE 12/24	93.224	H80CS00038-23-05	1/1/24 - 12/31/24	242,469	-
HOMELESS ENDING HIV EPIDEMIC GYE 08/24	93.224	H80CS00038-22-06	9/1/23 - 12/31/24	43,087	-
HOMELESS-DENTAL GYE12/23 HOMELESS-DENTAL GYE12/24	93.224 93.224	H80CS00038-22-00 H80CS00038-23-02	1/1/23 - 12/31/23 1/1/24 - 12/31/24	84,511 193,719	-
HOMELESS PRIMARY GYE 12/23 HOMELESS PRIMARY GYE 12/24	93.224 93.224	H80CS00038-22-00 H80CS00038-23-02	1/1/23 - 12/31/23 1/1/24 - 12/31/24	806,627 2,565,849	-
HOMELESS-QIA:UDS+	93.224	H80CS00038-23-06	5/30/24 - 12/31/24	14,720	-
COVID-19 American Rescue Plan - Health Center Program Total - ALN 93.224	93.224	H8FCS40542-01-00	4/1/21 - 3/31/24	1,943,473 6,185,365	<u>-</u>
Grants for New and Expanded Services under the Health Center Program HOMELESS FY 2023 BRIDGE ACCESS PROGRAM Total Health Center Program Cluster	93.527	H8LCS51798-01-00	9/1/23 - 12/31/24	33,266 6,218,631	<u> </u>
Grants for Capital Development in Health Centers COVID-19 American Rescue Plan - Capital	93.526	C8ECS44701-01-00	9/15/21 - 9/14/25	52,471	
Grants to Provide Outpatient Early Intervention Services with Respect to HIV Disease					
Ryan White Part C GYE2023 Ryan White Part C GYE2024 Total - ALN 93.918	93.918 93.918	H76HA00128-32 H76HA00128-33	1/1/23 - 12/31/23 1/1/24 - 12/31/24	310,344 666,488 976,832	
Maternal Opiod Misuse Model Maternal Opiod Misuse Model Maternal Opiod Misuse Model Total - ALN 93.687	93.687 93.687	HHS0008683000001 HHS0008683000001	1/1/23 - 12/31/23 1/1/24 - 12/31/24	104,138 394,715 498,854	
Passed Through Harris County Public Health Department HIV Emergency Relief Project Grants HIV Emergency Relief Project Grants Total ALN 93.914	93.914 93.914	22GEN0391 22GEN0400	3/1/23 - 2/28/24 3/1/24 - 2/28/25	3,771,184 4,951,875 8,723,059	
Research and Development Cluster Passed Through the University of Texas MD Anderson Cancer Center Minority Health and Health Disparities Research Minority Health and Health Disparities Research Randomized Trial for HPV Self-Testing Total Research and Development Cluster	93.307 93.307	5R01MD013715-05 R01MD013715	3/20/23 - 12/31/23 1/1/24 - 12/31/24	54,702 111,528 166,230	-
Passed Through the City of Houston HIV Prevention Activities - Health Department Based HIV Prevention Activities - Health Department Based	93.940 93.940	21-RTN-1809 24-RTN-1809	1/1/23 - 12/31/23 1/1/24 - 12/31/24	63,594 186,405	- -
Passed Through the Texas Department of State Health Services HIV Prevention Activities - Health Department Based Total ALN 93.940	93.940	HHS000322300001	9/1/22 - 12/31/23	22,953 272,952	<u>-</u>
Passed Through Texas Health & Human Services Commission Cancer Prevention & Control Program for State, Territorial and Tribal Organizations (Fee-for-Service)	93.898	HHS 000734600039	9/1/23 - 8/31/24	271,572	
Maternal and Child Health Services Block Grant to the States (Fee-for-Service)	93.994	HHS000136500015	9/1/23 - 8/31/24	152,295	
Passed Through JSI Research & Training Institute Special Projects of National Significance HIV Telehealth Strategies to Maximize HIV Care HIV Telehealth Strategies to Maximize HIV Care	93.928 93.928	35529-02 35529-02	8/1/23 - 7/31/24 8/1/24 - 7/31/25	142,956 19,120	<u> </u>
Total ALN 93.928				\$ 162,076	\$ -

Harris County Hospital District d/b/a Harris Health (A Component Unit of Harris County, Texas) Schedule of Expenditures of Federal and State Awards Year Ended September 30, 2024

(Continued)

Federal Grantor/Passthrough Grantor/Federal Program Title	Assistance Listing Number	Grantor Number	Grant Period	Expenditures	Amount Paid to Subrecipients
Passed Through Univ. of Texas HSC at San Antonio Block Grants for Prevention and Treatment of Substance Abuse Medication Asst. Treatment Alcohol and other substances (MAT-AUD) Total U.S. Department of Health and Human Services	93.959	HHS001196700002	9/1/23 - 8/31/24	\$ 312,775 18,708,727	_\$ <u>-</u> _
U.S. Department of Labor				10,100,121	
Employment Service Cluster Passed Through Texas Workforce Commission Employment Service/Wagner-Peyser Funded Activities Total U.S. Department of Labor U.S. Department of Treasury	17.207	2824WPB004	9/1/23 - 8/31/24	343,180 343,180	
Passed Through Harris County Office of County Administration COVID-19 Coronavirus State and Local Fiscal Recovery Funds ARPA - GI Lab ARPA Food Farmacy	21.027 21.027	SLFRFP1966 SLFRF	12/16/23 - 12/16/25 12/19/23 - 12/16/25	471,993 9,467	
Total U.S. Department of Treasury				481,460	
U.S. Department of Justice Passed Through Texas Office of the Governor-Criminal Justice Division Crime Victim Assistance	16.575	3327906	10/1/23 - 9/30/24	69,965	-
Passed Through Texas Office of the Governor Violence Against Women Formula Grants Expanding Forensic Nursing Svcs. In Response to Violence	16.588	4773401	10/1/23 - 9/30/24	13,458	
Total U.S. Department of Justice				83,423	
Total Expenditures of Federal Awards				\$ 19,616,790	\$ -

Harris County Hospital District d/b/a Harris Health (A Component Unit of Harris County, Texas) Schedule of Expenditures of Federal and State Awards Year Ended September 30, 2024

(Continued)

Federal Grantor/Passthrough Grantor/State Grantor/Program Title	Grantor Number	Grant Period	Expenditures	Amount Paid to Subrecipients
Office of the Texas Governor				
Enhancement of Community SAFE-Ready Facility	3942105	9/1/23 - 8/31/24	\$ 43,325	\$ -
Total Office of the Texas Governor			43,325	-
Fexas Department of State Health Services				
Workplace Violence Against Nurses	HHS001024000002	9/1/22 - 2/29/24	70,304	
TB-Prevention & Control - Hospitals (Fee-for-Service)	HHS000454800001	9/1/23 - 8/31/24	36,260	-
AIDS Drug-Assistance Program Eligibility	18HHS00SS-R	9/1/23 - 8/31/24	140,785	-
AIDS Drug-Assistance Program Eligibility	25HHS00SS	9/1/24 - 8/31/25	8,742	-
Total AIDS Drug-Assistance Program Eligibility			149,527	-
otal Texas Department of State Health Services			256,091	
exas Health and Human Services Commission				
CS Epilepsy Program	HHS000701500003	9/1/23 - 8/31/24	135,553	-
CS Epilepsy Program	HHS000701500003	9/1/24 - 8/31/25	11,452	-
Total ACS Epilepsy Program			147,006	
itle V Fee for Service Prenatal Medical and Dental Grant Program	HHS000558100007	9/1/23 - 8/31/24	53,165	
amily Plann Grant Program (Fee-for-Service)	HHS000734600039	9/1/23 - 8/31/24	3,627,479	-
amily Plann Grant Program (Fee-for-Service)	HHS000734600039	9/1/24 - 8/31/25	47,258	
Total Family Plann Grant Program (Fee-for-Service)			3,674,737	-
lealth Texas Women's Grant Program	HHS000734600039	9/1/23 - 8/31/24	76,293	-
ealth Texas Women's Grant Program	HHS000734600039	9/1/24 - 8/31/25	4,452	
Total Health Texas Women's Grant Program			80,745	
lealthy Texas Women - Patient Navigator	HHS000734600039	9/1/23 - 8/31/24	42,178	-
ealthy Texas Women - Patient Navigator	HHS000734600039	9/1/24 - 8/31/25	5,804	
Total Healthy Texas Women - Patient Navigator			47,982	
reast & Cervical Cancer Control Program (Fee-for-Service)	HHS000734600039	9/1/23 - 8/31/24	893,959	
otal Texas Health and Human Services Commission			4,897,594	
Cancer Prevention and Research Institute of Texas				
Colorectal Screening and Follow-up Among Urban Medically Undeserved Population	PP210007	8/31/23 - 8/30/24	216,881	-
colorectal Screening and Follow-up Among Urban Medically Undeserved Population	PP210007	8/31/24 - 8/30/25	13,469	
Total Colorectal Screening and Follow-up Among Urban Medically Undeserved Population			230,350	-
exas Clinical Trial Participation Program Award	RP210143	8/31/23 - 8/30/24	87,989	-
expanding a Community Network for Cancer Prevention to Increase HPV Vaccine				
Iptake and Tobacco Prevention in a Medically Undeserved Pediatric Population	PP220038	8/31/23 - 8/30/24	231,786	-
xpanding a Community Network for Cancer Prevention to Increase HPV Vaccine ptake and Tobacco Prevention in a Medically Undeserved Pediatric Population Total Expanding a Community Network for Cancer Prevention to Increase HPV	PP220038	8/31/24 - 8/30/25	8,079	
Vaccine Uptake and Tobacco Prevention in a Medically Undeserved Pediatric Population			239,865	
rimary HR-HPV Testing YR 1	PP240017	3/1/24 - 2/28/25	45,927	-
otal Cancer Prevention and Research Institute of Texas			604,131	

Harris County Hospital District d/b/a Harris Health (A Component Unit of Harris County, Texas) Notes to the Schedule of Expenditures of Federal and State Awards Year Ended September 30, 2024

Note 1. Basis of Presentation

The accompanying schedule of expenditures of federal and state awards (the Schedule) includes the federal and state award activity of Harris County Hospital District d/b/a Harris Health (Harris Health) under programs of the federal and state of Texas governments for the year ended September 30, 2024. The information in this Schedule is presented in accordance with the requirements of the Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) and the Texas Grant Management Standards (TxGMS). Because the Schedule presents only a selected portion of the operations of Harris Health, it is not intended to and does not present the financial position, changes in net position or cash flows of Harris Health.

Note 2. Summary of Significant Accounting Policies

Expenditures reported on the Schedule are reported on the accrual basis of accounting. Such expenditures are recognized following, as applicable, either the cost principles contained in the Uniform Guidance or TxGMS, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts shown on the Schedule, if any, represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years.

Note 3. Indirect Cost Rate

Harris Health has elected not to use the 10% de minimis indirect cost rate allowed under the Uniform Guidance.

Note 4. Federal Loan Programs

Harris Health did not have any federal or state loan programs during the year ended September 30, 2024.

Forvis Mazars, LLP 14221 Dallas Parkway, Suite 400 Dallas, TX 75254 P 972.702.8262 | F 972.702.0673

forvismazars.us



Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*

Independent Auditor's Report

Board of Trustees Harris County Hospital District d/b/a Harris Health Houston, Texas

We have audited, in accordance with 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 (*Government Auditing Standards*), the financial statements of the business-type activities and the aggregate discretely presented component units of Harris County Hospital District d/b/a Harris Health (Harris Health), a component unit of Harris County, Texas, as of and for the year ended September 30, 2024, and the related notes to the financial statements, which collectively comprise Harris Health's basic financial statements, and have issued our report thereon dated February 13, 2025, which includes reference to other auditors who audited the financial statements of Harris County Hospital District Foundation and an other matter paragraph regarding the omission of required supplementary information. The financial statements of the Harris County Hospital District Foundation, Community Health Choice, Inc. and Community Health Choice Texas, Inc., the discretely presented component units included in Harris Health's financial statements, were not audited in accordance with *Government Auditing Standards* and accordingly, this report does not include reporting on internal control over financial reporting or instances of reportable noncompliance associated with these discretely presented component units.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Harris Health's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Harris Health's internal control. Accordingly, we do not express an opinion on the effectiveness of Harris Health's internal control.

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 financial statements 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.

Board of Trustees Harris County Hospital District d/b/a Harris Health

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 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. However, material weaknesses or significant deficiencies may exist that were not identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether Harris Health's financial statements 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 financial statements. 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 results 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.

Forvis Mazars, LLP

Dallas, Texas February 13, 2025 Forvis Mazars, LLP
14221 Dallas Parkway, Suite 400
Dallas, TX 75254
P 972.702.8262 | F 972.702.0673
forvismazars.us



Report on Compliance for Each Major Federal and State Program; Report on Internal Control over Compliance; and Report on Schedule of Expenditures of Federal and State Awards Required by the Uniform Guidance and the *Texas Grant Management Standards*

Independent Auditor's Report

Board of Trustees Harris County Hospital District d/b/a Harris Health Houston, Texas

Report on Compliance for Each Major Federal and State Program

Opinion on Each Major Federal and State Program

We have audited Harris County Hospital District d/b/a Harris Health's (Harris Health) compliance with the types of compliance requirements identified as subject to audit in the *OMB Compliance Supplement* and the *Texas Grant Management Standards* (TxGMS) that could have a direct and material effect on each of Harris Health's major federal and state programs for the year ended September 30, 2024. Harris Health's major federal and state programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, Harris Health's complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal and state programs for the year ended September 30, 2024.

Basis for Opinion on Each Major Federal and State Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*); the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance) and TxGMS. Our responsibilities under those standards, the Uniform Guidance and TxGMS are further described in the "Auditor's Responsibilities for the Audit of Compliance" section of our report.

We are required to be independent of Harris Health and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal and state program. Our audit does not provide a legal determination of Harris Health's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to Harris Health's federal and state programs.

Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on Harris Health's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, the Uniform Guidance and TxGMS will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about Harris Health's compliance with the requirements of each major federal and state program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, the Uniform Guidance and TxGMS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design
 and perform audit procedures responsive to those risks. Such procedures include examining, on a
 test basis, evidence regarding Harris Health's compliance with the compliance requirements
 referred to above and performing such other procedures as we considered necessary in the
 circumstances.
- Obtain an understanding of Harris Health's internal control over compliance relevant to the audit in
 order to design audit procedures that are appropriate in the circumstances and to test and report
 on internal control over compliance in accordance with the Uniform Guidance and TxGMS, but not
 for the purpose of expressing an opinion on the effectiveness of Harris Health's internal control
 over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on 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, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal or state program on a timely basis. A material weakness in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal or

state program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal or state program 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 "Auditor's Responsibilities for the Audit of Compliance" section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance and TxGMS. Accordingly, this report is not suitable for any other purpose.

Report on Schedule of Expenditures of Federal and State Awards Required by the Uniform Guidance and TxGMS

We have audited the financial statements of the business type activities and the aggregate discretely presented component units of Harris Health as of and for the year ended September 30, 2024, and the related notes to the financial statements, which collectively comprise Harris Health's basic financial statements. We issued our report thereon dated February 13, 2025, which contained unmodified opinions on those financial statements and reference to other auditors and an other matter paragraph regarding omission of required supplementary information. Our audit was performed for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. The accompanying schedule of expenditures of federal and state awards is presented for purposes of additional analysis as required by the Uniform Guidance and TxGMS and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audits of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal and state awards is fairly stated in all material respects in relation to the financial statements as

Forvis Mazars, LLP

Dallas, Texas February 13, 2025 Harris County Hospital District d/b/a Harris Health (A Component Unit of Harris County, Texas) Schedule of Findings and Questioned Costs Year Ended September 30, 2024

Section I – Summary of Auditor's Results

Fin	ancial Statements					
1.	Type of report the au		her the financial sta	tements audited wer	re prepared in	
	☑ Unmodified	☐ Qualified	Adverse	Disclaimer		
2.	Internal control over	financial reporting:				
	Significant deficien	cy(ies) identified?		☐ Yes	⊠ None repo	orted
	Material weakness	(es) identified?		☐ Yes	⊠ No	
3.	Noncompliance mate	erial to the financial s	tatements noted?	☐ Yes	⊠ No	
Fed	deral Awards					
4.	Internal control over	major federal and sta	ate awards program	s:		
	Significant deficien	cy(ies) identified?		☐ Yes	⊠ None repo	orted
	Material weakness	(es) identified?		☐ Yes	⊠ No	
5.	Type of auditor's rep	ort issued on compli	ance for major feder	ral and state award բ	orograms:	
		Qualified	Adverse	Disclaimer		
6.	Any audit findings die 2 CFR 200.516(a)?	sclosed that are requ	ired to be reported	by 🗌 Yes	⊠ No	
7.	Any audit findings dis TxGMS?	sclosed that are requ	ired to be reported	by 🗌 Yes	⊠ No	
8.	Identification of majo	r federal and state p	rograms:			
		Cluste	er/Program			ssistance Listing Number
	HIV Emergency	navirus State and Lo Relief Project Grants e Outpatient Early Ir	s [Federal]			21.027 93.914
	[Federal] Family Planning	Grant Program [State	te]	-		93.918 State

Harris County Hospital District d/b/a Harris Health (A Component Unit of Harris County, Texas) Schedule of Findings and Questioned Costs Year Ended September 30, 2024

(Continued)

	Reference Number	Finding	
Sec	tion IV – State Award Findings and Question	ned Costs	
	No	o matters are reportable.	
	Reference Number	Finding	
Sec	tion III – Federal Award Findings and Quest	ioned Costs	
	No	o matters are reportable.	
	Reference Number	Finding	
Sec	tion II – Financial Statement Findings		
11.	Auditee qualified as a low-risk auditee?	⊠ Yes	□No
10.	The threshold used to distinguish between Ty	pe A and Type B state programs: \$7	750,000.
9.	The threshold used to distinguish between Ty	pe A and Type B federal programs:	\$750,000.

No matters are reportable.

Harris County Hospital District d/b/a Harris Health (A Component Unit of Harris County, Texas) Summary Schedule of Prior Audit Findings Year Ended September 30, 2024

Reference		
Number	Summary of Finding	Status

No matters are reportable.