



OHIO AUDITOR OF STATE
KEITH FABER



**CUYAHOGA COUNTY BOARD OF HEALTH
CUYAHOGA COUNTY**

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OHIO AUDITOR OF STATE KEITH FABER



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INDEPENDENT AUDITOR'S REPORT

Cuyahoga County Board of Health
Cuyahoga County
5550 Venture Drive
Parma, Ohio 44130

To the Board Members:

Report on the Financial Statements

We have audited the accompanying cash-basis financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of the Cuyahoga County Board of Health, Cuyahoga County, Ohio, (the Board), as of and for the year ended December 31, 2020, and the related notes to the financial statements, which collectively comprise the Board's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

Management is responsible for preparing and fairly presenting these financial statements in accordance with the cash accounting basis Note 2C describes. This responsibility includes determining that the cash accounting basis is acceptable for the circumstances. Management is also responsible for designing, implementing and maintaining internal control relevant to preparing and fairly presenting financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to opine on these financial statements based on our audit. We audited in accordance with auditing standards generally accepted in the United States of America and the financial audit standards in the Comptroller General of the United States' *Government Auditing Standards*. Those standards require us to plan and perform the audit to reasonably assure the financial statements are free from material misstatement.

An audit requires obtaining evidence about financial statement amounts and disclosures. The procedures selected depend on our judgment, including assessing the risks of material financial statement misstatement, whether due to fraud or error. In assessing those risks, we consider internal control relevant to the Board's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not to the extent needed to opine on the effectiveness of the Board's internal control. Accordingly, we express no opinion. An audit also includes evaluating the appropriateness of management's accounting policies and the reasonableness of their significant accounting estimates, as well as our evaluation of the overall financial statement presentation.

We believe the audit evidence we obtained is sufficient and appropriate to support our audit opinions.

Efficient • Effective • Transparent

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective cash financial position of the governmental activities, each major fund, and the aggregate remaining fund information of the Cuyahoga County Board of Health, Cuyahoga County, Ohio, as of December 31, 2020, and the respective changes in cash financial position and the respective budgetary comparisons for the General Fund, HIV Care and Prevention Fund, COVID-19 Response Fund and Injury Prevention Fund thereof for the year then ended in accordance with the accounting basis described in Note 2C.

Accounting Basis

We draw attention to Note 2C of the financial statements, which describes the accounting basis. The financial statements are prepared on the cash-basis of accounting, which differs from generally accepted accounting principles. We did not modify our opinion regarding this matter.

Emphasis of Matter

As discussed in Note 3 to the financial statements, during 2020, the Board implemented Government Accounting Board (GASB) Statement No. 84, *Fiduciary Activities*, resulting in a reclassification of all Board Fiduciary Funds as Special Revenue Funds. Also, as discussed in Note 15 to the financial statements, the financial impact of COVID-19 and the continuing emergency measures may impact subsequent periods of the Board. We did not modify our opinion regarding these matters.

Other Matters

Supplemental Information

Our audit was conducted to opine on the financial statements taken as a whole.

The Schedule of Expenditures of Federal Awards presents additional analysis as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards and is not a required part of the financial statements.

The schedule is management's responsibility, and derives from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. We subjected this schedule to the auditing procedures we applied to the basic financial statements. We also applied certain additional procedures, including comparing and reconciling this schedule directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and in accordance with auditing standards generally accepted in the United States of America. In our opinion, this schedule is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated March 29, 2023, on our consideration of the Board's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. That report describes the scope of our internal control testing over financial reporting and compliance, and the results of that testing, and does not opine 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 the Board's internal control over financial reporting and compliance.



Keith Faber
Auditor of State
Columbus, Ohio

March 29, 2023

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Cuyahoga County Board of Health
Cuyahoga County
Statement of Net Position - Cash Basis
December 31, 2020

	<u>Governmental Activities</u>
Assets	
Equity in Pooled Cash and Cash Equivalents	<u>\$4,831,056</u>
Net Position	
Restricted for:	
Other Purposes	\$832,155
Unrestricted	<u>3,998,901</u>
<i>Total Net Position</i>	<u>\$4,831,056</u>

See accompanying notes to the basic financial statements

Cuyahoga County Board of Health
Cuyahoga County
Statement of Activities - Cash Basis
For the Year Ended December 31, 2020

	Program Receipts			Net Receipts (Disbursements) and Change in Net Position
Disbursements	Charges for Services and Sales	Operating Grants and Contributions	Governmental Activities	
Governmental Activities				
Administration	\$3,301,867	\$0	\$0	(\$3,301,867)
Environmental Public Health	8,986,875	5,024,308	3,431,799	(530,768)
Prevention & Wellness	11,732,413	880,772	7,249,997	(3,601,644)
Epidemiology, Surveillance and Informatics	5,563,226	0	4,532,269	(1,030,957)
Principal Retirement	224,000	0	0	(224,000)
Interest and Fiscal Charges	248,406	0	0	(248,406)
<i>Total Governmental Activities</i>	<u>\$30,056,787</u>	<u>\$5,905,080</u>	<u>\$15,214,065</u>	<u>(\$8,937,642)</u>
		General Receipts		
		Property Taxes Levied for General Health Purposes	4,679,014	
		Grants and Entitlements not Restricted to Specific Programs	1,376,247	
		Other	574,845	
		<i>Total General Receipts and Transfers</i>	<u>6,630,106</u>	
		Change in Net Position		(2,307,536)
		<i>Net Position, Beginning of Year - Restated</i>		<u>7,138,592</u>
		<i>Net Position, End of Year</i>		<u>\$4,831,056</u>

See accompanying notes to the basic financial statements

Cuyahoga County Board of Health
Cuyahoga County
 Statement of Cash Basis Assets and Fund Balances
 Governmental Funds
 December 31, 2020

	<u>General</u>	<u>COVID-19 Response</u>	<u>HIV Care and Prevention</u>	<u>Injury Prevention</u>	<u>Other Governmental Funds</u>	<u>Total Governmental Funds</u>
Assets						
Equity in Pooled Cash and Cash Equivalents	<u>\$7,159,168</u>	<u>(\$260,031)</u>	<u>(\$2,014,514)</u>	<u>(\$494,203)</u>	<u>\$440,636</u>	<u>\$4,831,056</u>
Fund Balances						
Restricted	\$0	\$0	\$0	\$0	\$832,155	\$832,155
Unassigned (Deficit)	<u>7,159,168</u>	<u>(260,031)</u>	<u>(2,014,514)</u>	<u>(494,203)</u>	<u>(391,519)</u>	<u>3,998,901</u>
Total Fund Balances	<u>\$7,159,168</u>	<u>(\$260,031)</u>	<u>(\$2,014,514)</u>	<u>(\$494,203)</u>	<u>\$440,636</u>	<u>\$4,831,056</u>

See accompanying notes to the basic financial statements.

Cuyahoga County Board of Health
Cuyahoga County
Statement of Cash Receipts, Disbursements and Changes in Cash Basis Fund Balances
Governmental Funds
For the Year Ended December 31, 2020

	General	COVID-19 Response	HIV Care and Prevention	Injury Prevention	Other Governmental Funds	Total Governmental Funds
Receipts						
Property Taxes	\$4,679,014	\$0	\$0	\$0	\$0	\$4,679,014
Intergovernmental	1,376,247	3,387,878	4,278,250	2,750,692	4,797,245	16,590,312
Fines, Licenses and Permits	3,265,656	0	0	0	0	3,265,656
Charges for Services	2,635,715	0	0	0	3,709	2,639,424
Other	33,974	0	0	0	540,871	574,845
<i>Total Receipts</i>	<u>11,990,606</u>	<u>3,387,878</u>	<u>4,278,250</u>	<u>2,750,692</u>	<u>5,341,825</u>	<u>27,749,251</u>
Disbursements						
Administration	2,882,655	0	0	0	419,212	3,301,867
Environmental Public Health	5,302,468	0	0	2,712,902	971,505	8,986,875
Prevention & Wellness	4,092,038	0	5,206,297	166,062	2,268,016	11,732,413
Epidemiology, Surveillance and Informatics	875,796	3,647,909	0	0	1,039,521	5,563,226
Principal Retirement	224,000	0	0	0	0	224,000
Interest and Fiscal Charges	248,406	0	0	0	0	248,406
<i>Total Disbursements</i>	<u>13,625,363</u>	<u>3,647,909</u>	<u>5,206,297</u>	<u>2,878,964</u>	<u>4,698,254</u>	<u>30,056,787</u>
<i>Excess of Receipts Over (Under) Disbursements</i>	<u>(1,634,757)</u>	<u>(260,031)</u>	<u>(928,047)</u>	<u>(128,272)</u>	<u>643,571</u>	<u>(2,307,536)</u>
Other Financing Sources (Uses)						
Transfers In	172,565	0	0	0	3,162	175,727
Transfers Out	(3,162)	0	0	0	(172,565)	(175,727)
<i>Total Other Financing Sources (Uses)</i>	<u>169,403</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>(169,403)</u>	<u>0</u>
<i>Net Change in Fund Balances</i>	<u>(1,465,354)</u>	<u>(260,031)</u>	<u>(928,047)</u>	<u>(128,272)</u>	<u>474,168</u>	<u>(2,307,536)</u>
<i>Fund Balance (Deficit), Beginning of Year - Restated</i>	<u>8,624,522</u>	<u>0</u>	<u>(1,086,467)</u>	<u>(365,931)</u>	<u>(33,532)</u>	<u>7,138,592</u>
<i>Fund Balance (Deficit), End of Year</i>	<u><u>\$7,159,168</u></u>	<u><u>(\$260,031)</u></u>	<u><u>(\$2,014,514)</u></u>	<u><u>(\$494,203)</u></u>	<u><u>\$440,636</u></u>	<u><u>\$4,831,056</u></u>

See accompanying notes to the basic financial statements.

Cuyahoga County Board of Health
Cuyahoga County
Statement of Receipts, Disbursements and Changes
In Fund Balance - Budget and Actual - Budget Basis
General Fund
For the Year Ended December 31, 2020

	<u>Budgeted Amounts</u>		<u>Actual</u>	<u>Variance with Final Budget Positive (Negative)</u>
	<u>Original</u>	<u>Final</u>		
Receipts				
Property Taxes	\$4,186,875	\$4,814,023	\$4,679,014	(\$135,009)
Intergovernmental	1,222,420	1,393,455	1,376,247	(17,208)
Fines, Licenses and Permits	3,259,289	3,740,912	3,265,656	(475,256)
Charges for Services	1,613,220	1,649,415	2,635,715	986,300
Other	279,579	268,954	33,974	(234,980)
<i>Total Receipts</i>	<u>10,561,383</u>	<u>11,866,759</u>	<u>11,990,606</u>	<u>123,847</u>
Disbursements				
Administration	3,109,131	3,192,855	2,882,655	310,200
Environmental Public Health	5,098,560	5,288,928	5,302,468	(13,540)
Prevention & Wellness	2,956,914	2,959,540	4,092,038	(1,132,498)
Epidemiology, Surveillance and Informatics	557,489	852,907	875,796	(22,889)
Capital Outlay	242,706	311,802	0	311,802
Principal Retirement	221,000	224,000	224,000	0
Interest and Fiscal Charges	253,585	248,406	248,406	0
<i>Total Disbursements</i>	<u>12,439,385</u>	<u>13,078,438</u>	<u>13,625,363</u>	<u>(546,925)</u>
<i>Excess of Receipts Over (Under) Disbursements</i>	<u>(1,878,002)</u>	<u>(1,211,679)</u>	<u>(1,634,757)</u>	<u>(423,078)</u>
Other Financing Sources (Uses)				
Debt Proceeds	1,303,000	0	0	0
Transfers In	0	0	172,565	172,565
Transfers Out	(274,160)	(251,913)	(3,162)	248,751
<i>Total Other Financing Sources (Uses)</i>	<u>1,028,840</u>	<u>(251,913)</u>	<u>169,403</u>	<u>421,316</u>
<i>Net Change in Fund Balances</i>	(849,162)	(1,463,592)	(1,465,354)	(1,762)
<i>Fund Balance, Beginning of Year</i>	<u>8,624,522</u>	<u>8,624,522</u>	<u>8,624,522</u>	<u>0</u>
<i>Fund Balance, End of Year</i>	<u>\$7,775,360</u>	<u>\$7,160,930</u>	<u>\$7,159,168</u>	<u>(\$1,762)</u>

See accompanying notes to the basic financial statements

Cuyahoga County Board of Health
Cuyahoga County
Statement of Receipts, Disbursements and Changes
In Fund Balance - Budget and Actual - Budget Basis
HIV Care and Prevention Fund
For the Year Ended December 31, 2020

	<u>Budgeted Amounts</u>		<u>Actual</u>	<u>Variance with Final Budget Positive (Negative)</u>
	<u>Original</u>	<u>Final</u>		
Receipts				
Intergovernmental	<u>\$6,099,445</u>	<u>\$9,821,762</u>	<u>\$4,278,250</u>	<u>(\$5,543,512)</u>
<i>Total Receipts</i>	<u>6,099,445</u>	<u>9,821,762</u>	<u>4,278,250</u>	<u>(5,543,512)</u>
Disbursements				
Prevention & Wellness	4,987,084	8,679,178	5,206,297	3,472,881
Capital Outlay	<u>26,103</u>	<u>56,326</u>	<u>0</u>	<u>56,326</u>
<i>Total Disbursements</i>	<u>5,013,187</u>	<u>8,735,504</u>	<u>5,206,297</u>	<u>3,529,207</u>
<i>Excess of Receipts Over (Under) Disbursements</i>	<u>1,086,258</u>	<u>1,086,258</u>	<u>(928,047)</u>	<u>(2,014,305)</u>
<i>Net Change in Fund Balances</i>	1,086,258	1,086,258	(928,047)	(2,014,305)
<i>Fund Balance (Deficit), Beginning of Year</i>	<u>(1,086,467)</u>	<u>(1,086,467)</u>	<u>(1,086,467)</u>	<u>0</u>
<i>Fund Balance (Deficit), End of Year</i>	<u>(\$209)</u>	<u>(\$209)</u>	<u>(\$2,014,514)</u>	<u>(\$2,014,305)</u>

See accompanying notes to the basic financial statements

Cuyahoga County Board of Health
Cuyahoga County
Statement of Receipts, Disbursements and Changes
In Fund Balance - Budget and Actual - Budget Basis
COVID-19 Response Fund
For the Year Ended December 31, 2020

	<u>Budgeted Amounts</u>		<u>Actual</u>	<u>Variance with Final Budget Positive (Negative)</u>
	<u>Original</u>	<u>Final</u>		
Receipts				
Intergovernmental	<u>\$8,467,285</u>	<u>\$10,856,996</u>	<u>\$3,387,878</u>	<u>(\$7,469,118)</u>
<i>Total Receipts</i>	<u>8,467,285</u>	<u>10,856,996</u>	<u>3,387,878</u>	<u>(7,469,118)</u>
Disbursements				
Epidemiology, Surveillance and Informatics	8,428,196	10,845,916	3,647,909	7,198,007
Capital Outlay	<u>39,089</u>	<u>11,080</u>	<u>0</u>	<u>11,080</u>
<i>Total Disbursements</i>	<u>8,467,285</u>	<u>10,856,996</u>	<u>3,647,909</u>	<u>7,209,087</u>
<i>Excess of Receipts Over (Under) Disbursements</i>	<u>0</u>	<u>0</u>	<u>(260,031)</u>	<u>(260,031)</u>
<i>Net Change in Fund Balances</i>	0	0	(260,031)	(260,031)
<i>Fund Balance (Deficit), Beginning of Year</i>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
<i>Fund Balance (Deficit), End of Year</i>	<u><u>\$0</u></u>	<u><u>\$0</u></u>	<u><u>(\$260,031)</u></u>	<u><u>(\$260,031)</u></u>

See accompanying notes to the basic financial statements

Cuyahoga County Board of Health
Cuyahoga County
Statement of Receipts, Disbursements and Changes
In Fund Balance - Budget and Actual - Budget Basis
Injury Prevention Fund
For the Year Ended December 31, 2020

	<u>Budgeted Amounts</u>		<u>Actual</u>	<u>Variance with Final Budget Positive (Negative)</u>
	<u>Original</u>	<u>Final</u>		
Receipts				
Intergovernmental	\$4,891,193	\$4,888,593	\$2,750,692	(\$2,137,901)
<i>Total Receipts</i>	<u>4,891,193</u>	<u>4,888,593</u>	<u>2,750,692</u>	<u>(2,137,901)</u>
Disbursements				
Prevention & Wellness	384,227	381,627	166,062	215,565
Environmental Public Health	4,228,483	4,228,483	2,712,902	1,515,581
Capital Outlay	19,172	19,172	0	19,172
<i>Total Disbursements</i>	<u>4,631,882</u>	<u>4,629,282</u>	<u>2,878,964</u>	<u>1,750,318</u>
<i>Excess of Receipts Over (Under) Disbursements</i>	<u>259,311</u>	<u>259,311</u>	<u>(128,272)</u>	<u>(387,583)</u>
<i>Net Change in Fund Balances</i>	259,311	259,311	(128,272)	(387,583)
<i>Fund Balance (Deficit), Beginning of Year</i>	<u>(365,931)</u>	<u>(365,931)</u>	<u>(365,931)</u>	<u>0</u>
<i>Fund Balance (Deficit), End of Year</i>	<u><u>(\$106,620)</u></u>	<u><u>(\$106,620)</u></u>	<u><u>(\$494,203)</u></u>	<u><u>(\$387,583)</u></u>

See accompanying notes to the basic financial statements

Cuyahoga County Board of Health
Cuyahoga County
Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Note 1 – Description of the Board and Reporting Entity

The Cuyahoga County Board of Health, Cuyahoga County, Ohio (the Board) is a body corporate and politic established to exercise the rights and privileges conveyed to it by the constitution and laws of the State of Ohio. The Board administers and enforces, within its jurisdiction, all public health and sanitation laws of the State of Ohio. The Board provides public health services for the prevention or restriction of disease. In addition to the required programs, the Board adopts regulations and provides programs to enable residents of the Board to live in a healthy and environmentally safe community. The Board is comprised of 36 cities, 19 villages and two townships within Cuyahoga County representing over 850,000 residents. The five-member Board is appointed by the District Advisory Council which consists of the President of the Board of County Council, the chief executive of each municipal corporation not constituting a city health district and the chairman of the board of trustees of each township. The Board appoints a Health Commissioner and can hire and fix compensation of employees. The Board is dependent upon the County to provide facilities and legal counsel and act as custodian for its funds. The budget is approved by the Board which is responsible for fiscal management through its authority to enter into contracts and prepare financial reports. The Board is not part of the reporting entity of the County of Cuyahoga.

Component units are legally separate organizations for which the Board is financially accountable. The Board is financially accountable for an organization if the Board members appoints a voting majority of the organization's governing board and (1) the Board is able to significantly influence the programs or services performed or provided by the organization; or (2) the Board is legally entitled to or can otherwise access the organization's resources; the Board is legally obligated or has otherwise assumed the responsibility to finance the deficits of, or provide financial support to, the organization; or the Board is obligated for the debt of the organization. The Board is also financially accountable for any organizations for which the Board approves the budget, the issuance of debt or the levying of taxes. Component units also include legally separate, tax-exempt entities whose resources are for the direct benefit of the Board, are accessible to the Board and are significant in amount to the Board. The Board has no component units.

The Board participates in the Public Entities Pool of Ohio (PEP), a public entity risk pool. This organization is presented in Note 8 to the basic financial statements.

The Board's management believes these financial statements present all activities for which the Board is financially accountable.

Note 2 – Summary of Significant Accounting Policies

As discussed further in Note 2.C, these financial statements are presented on a cash basis of accounting. This cash basis of accounting differs from accounting principles generally accepted in the United States of America (GAAP). Generally accepted accounting principles include all relevant Governmental Accounting Standards Board (GASB) pronouncements, which have been applied to the extent they are applicable to the cash basis of accounting. Following are the more significant of the Board's accounting policies.

Cuyahoga County Board of Health
Cuyahoga County
Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

A. Basis of Presentation

The Board's basic financial statements consist of government-wide financial statements, including a statement of net position and a statement of activities, and fund financial statements which provide a more detailed level of financial information.

Government-Wide Financial Statements

The statement of net position and the statement of activities display information about the Board as a whole. These statements include the financial activities of the primary government. The statements distinguish between those activities of the Board that are governmental and those that are considered business-type. Governmental activities generally are financed through taxes, intergovernmental receipts or other nonexchange transactions. Business-type activities are financed in whole or in part by fees charged to external parties for goods or services. The Board has no business-type activities.

The statement of net position presents the cash balances of the governmental activities of the Board at year end. The statement of activities compares disbursements with program receipts for each of the Board's governmental activities. Disbursements are reported by function. A function is a group of related activities designed to accomplish a major service or regulatory program for which the Board is responsible. Program receipts include charges paid by the recipient of the program's goods or services and grants and contributions restricted to meeting the operational or capital requirements of a particular program. General receipts are all receipts not classified as program receipts, with certain limited exceptions. The comparison of direct disbursements with program receipts identifies the extent to which each governmental function is self-financing on a cash basis or draws from the Board's general receipts.

Fund Financial Statements

During the year, the Board segregates transactions related to certain Board functions or activities in separate funds to aid financial management and to demonstrate legal compliance. Fund financial statements are designed to present financial information of the Board at this more detailed level. The focus of governmental fund financial statements is on major funds. Each major fund is presented in a separate column. Non-major funds are aggregated and presented in a single column.

B. Fund Accounting

The Board uses fund accounting to maintain its financial records during the year. A fund is defined as a fiscal and accounting entity with a self-balancing set of accounts. Funds are used to segregate resources that are restricted as to use. The funds of the Board consist of only governmental funds.

Cuyahoga County Board of Health
Cuyahoga County
Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Governmental Funds

Governmental funds are financed primarily from taxes, intergovernmental receipts (e.g. grants), and other nonexchange transactions. Monies are assigned to the various governmental funds according to the purposes for which they may or must be used. The following are the Board's major governmental funds:

General Fund - The general fund accounts for all financial resources except those required to be accounted for in another fund. The general fund balance is available to the Board for any purpose provided it is expended or transferred according to the general laws of Ohio.

HIV Care and Prevention Fund - This fund receives federal and state grant funding to provide HIV- related services to those living with HIV who do not have sufficient health care coverage or financial resources for coping with HIV disease. Program goals include reducing new HIV infections, increasing access to care and improving health outcomes for people living with HIV, and reducing HIV-related health disparities and health inequities. Program services include core medical as well as support services.

COVID-19 Response Fund – This fund accounts for and reports federal grant and non-grant monies restricted to COVID-19 response activities for the purpose of case investigation, contact tracing, infection prevention and control and other related activities to stop the spread of COVID-19 in the community.

Injury Prevention Fund – This fund accounts for and reports federal, state and/or local grant and non-grant monies restricted to injury prevention programming. The injury prevention programming focuses on two primary areas for the purpose of reducing opioid overdose deaths and reducing child fatality incidents in children from birth to eighteen years old.

The other governmental funds of the Board account for and report grants and other resources whose use is restricted, committed or assigned to a particular purpose.

Cuyahoga County Board of Health
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Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

C. Basis of Accounting

The Board's financial statements are prepared using the cash basis of accounting. Except for modifications having substantial support, receipts are recorded in the Board's financial records and reported in the financial statements when cash is received rather than when earned and disbursements are recorded when cash is paid rather than when a liability is incurred. Any such modifications made by the Board are described in the appropriate section in this note.

As a result of the use of this cash basis of accounting, certain assets and their related revenues (such as accounts receivable and revenue for billed or provided services not yet collected) and certain liabilities and their related expenses (such as accounts payable and expenses for goods or services received but not yet paid, and accrued liabilities and the related expenses) are not recorded in these financial statements.

D. Budgetary Process

All board funds are legally required to be budgeted and appropriated. The major documents prepared are the tax budget, the certificate of estimated resources, and the appropriations resolution, all of which are prepared on the budgetary basis of accounting. The tax budget demonstrates a need for existing or increased tax rates. The certificate of estimated resources establishes a limit on the amount the Board may appropriate. The appropriations resolution is the Board's authorization to spend resources and sets limits on cash disbursements plus encumbrances at the level of control set by statute. The legal level of control has been established at the object/summary level for all funds. The County Budget Commission must also approve the annual appropriation measure. Grant funds are appropriated one time and the appropriations carryover from year to year until the grant is closed. For the general fund, unencumbered appropriations lapse at year-end.

ORC Section 5705.28(C) (1) requires the Board to file an estimate of contemplated revenue and expenses with the municipalities and townships within the Board by about June 1 (forty-five days prior to July 15). The County Office of the Fiscal Officer cannot allocate property taxes from the municipalities and townships within the Board if the filing has not been made.

ORC Section 3709.28 establishes budgetary requirements for the Board, which are similar to ORC Chapter 5705 budgetary requirements. On or about the first Monday of April the Board must adopt an itemized appropriation measure. The appropriation measure, together with an itemized estimate of revenues to be collected during the next fiscal year, shall be certified to the County Budget Commission. Subject to estimated resources, the Board may, by resolution, transfer appropriations from one appropriation item to another, reduce or increase any item, create new items, and make additional appropriations or reduce the total appropriation. Such appropriation modifications shall be certified to the County Budget Commission for approval.

The amounts reported as the original budgeted amounts on the budgetary statements reflect the amounts submitted to the County Budget Commission when the original appropriations were adopted. The amounts reported as the final budgeted amounts on the budgetary statements reflect the changes to the grant awards in effect at the time final appropriations were passed by the Board.

Cuyahoga County Board of Health
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Notes to the Basic Financial Statements
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The appropriations resolution is subject to amendment throughout the year with the restriction that appropriations cannot exceed estimated resources. The amounts reported as the original budgeted amounts reflect the first appropriation resolution for that fund that covered the entire year, including amounts automatically carried forward from prior years. The amounts reported as the final budgeted amounts represent the final appropriation amounts passed by the Board during the year.

E. Cash and Investments

As required by Ohio Revised Code, the County Treasurer is custodian for the Board's cash. The Board's assets, are held in the County's cash and investment pool, and are valued at the County Treasurer's reported carrying amount. Individual fund integrity is maintained through the Board's records. Deposits and investments disclosures for the County as a whole may be obtained from the County. Questions related to cash and investments should be directed to the Office of the Cuyahoga County Treasurer, 2079 East 9th Street, Cleveland, Ohio 44115 or (216) 443-7400.

F. Restricted Assets

Assets are reported as restricted when limitations on their use change the nature or normal understanding of the availability of the asset. Such constraints are either externally imposed by creditors, contributors, grantors, or laws of other governments, or are imposed by law through constitutional provisions or enabling legislation.

G. Inventory and Prepaid Items

The Board reports disbursements for inventories and prepaid items when paid. These items are not reflected as assets in the accompanying financial statements.

H. Capital Assets

Acquisitions of property, plant and equipment are recorded as disbursements when paid. These items are not reflected as assets in the accompanying financial statements.

I. Accumulated Leave

In certain circumstances, such as upon leaving employment or retirement, employees are entitled to cash payments for unused leave. Unpaid leave is not reflected as a liability under the Board's cash basis of accounting.

J. Employer Contributions to Cost-Sharing Pension Plans

The Board recognizes the disbursement for their employer contributions to cost-sharing pension plans when they are paid. As described in Notes 9 and 10, the employer contributions include portions for pension benefits and for other post-employment benefits (OPEB).

Cuyahoga County Board of Health
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Notes to the Basic Financial Statements
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K. Long- Term Obligations

The Board's cash basis financial statements do not report liabilities for bonds or other long-term obligations. Proceeds of debt are reported when the cash is received and principal and interest payments are reported when paid.

L. Net Position

Net position is reported as restricted when there are limitations imposed on their use either through enabling legislation or through external restrictions imposed by creditors, grantors, or laws or regulations of other governments. The government-wide statement of net position reports \$832,155 of restricted net position, none of which is restricted by enabling legislation. Net position restricted for other purposes include resources restricted for special Board programs. The Board's policy is to first apply restricted resources when an obligation is incurred for purposes for which both restricted and unrestricted net position are available.

M. Fund Balance

Fund balance is divided into five classifications based primarily on the extent to which the Board is bound to observe constraints imposed upon the use of the resources in the governmental funds. The classifications are as follows:

Non-spendable- The non-spendable fund balance category includes amounts that cannot be spent because they are not in spendable form, or are legally or contractually required to be maintained intact. The "not in spendable form" criterion includes items that are not expected to be converted to cash. The Board did not have any non-spendable fund balances.

Restricted- Fund balance is reported as restricted when constraints placed on the use of resources are either externally imposed by creditors (such as through debt covenants), grantors, contributors, or laws or regulations of other governments; or is imposed by law through constitutional provisions.

Committed- The committed fund balance classification includes amounts that can be used only for the specific purposes imposed by formal action (resolution) of the Board. Those committed amounts cannot be used for any other purpose unless the Board removes or changes the specified use by taking the same type of action (resolution) it employed to previously commit those amounts. In contrast to fund balance that is restricted by enabling legislation, the committed fund balance classification may be redeployed for other purposes with appropriate due process. Constraints imposed on the use of committed amounts are imposed by the Board, separate from the authorization to raise the underlying revenue; therefore, compliance with these constraints is not considered to be legally enforceable. Committed fund balance also incorporates contractual obligations to the extent that existing resources in the fund have been specifically committed for use in satisfying those contractual requirements. The Board did not have any committed fund balances.

Cuyahoga County Board of Health
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For the Year Ended December 31, 2020

Assigned- Amounts in the assigned fund balance classification are intended to be used by the Board for specific purposes but do not meet the criteria to be classified as restricted or committed. In governmental funds other than the general fund, assigned fund balance represents the remaining amount that is not restricted or committed. In the general fund, assigned amounts represent intended uses established by the Board or a Board official delegated that authority by resolution, or by State Statute. The Board did not have any assigned fund balances.

Unassigned- Unassigned fund balance is the residual classification for the general fund and include amounts not contained in the other classifications (restricted, committed, and or assigned). In other governmental funds, the unassigned classification is used only to report a deficit balance.

The Board applies restricted resources first when expenditures are incurred for purposes for which either restricted or unrestricted (committed, assigned, and unassigned) amount are available. Similarly, within unrestricted fund balance, committed amounts are reduced first followed by assigned, and then unassigned amounts when expenditures are incurred for purposes for which amounts in any of the unrestricted fund balance classifications could be used.

The Board fund balance is classified as restricted or unassigned based primarily on the extent to which the Board is bound to observe constraints imposed upon the use of the resources in the governmental funds.

N. Internal Activity

Exchange transactions between funds are reported as receipts in the seller funds and as disbursements in the purchaser funds. Subsidies from one fund to another without a requirement for repayment are reported as interfund transfers. Interfund transfers are reported as other financing sources/uses in governmental funds. Repayments from funds responsible for particular disbursements to the funds that initially paid for them are not presented in the financial statements.

Note 3 – Change in Accounting Principle and Restatement of Fund Balance and Net Position

In 2020, the Board implemented GASB Statement No. 84, *Fiduciary Activities*. *GASB Statement No. 84, Fiduciary Activities* establish specific criteria for identifying activities that should be reported as fiduciary activities. The effect of the implementation and the required fund reclassifications are as follows:

	<u>General</u>	<u>COVID-19 Response</u>	<u>HIV Care and Prevention</u>	<u>Injury Prevention</u>	<u>Other Governmental Funds</u>	<u>Total Governmental Funds</u>
Fund Balance at December 31, 2019	\$8,624,522	\$0	(\$1,086,467)	(\$365,931)	(\$559,543)	\$6,612,581
Adjustment:						
GASB 84	0	0	0	0	526,011	526,011
Restated Fund Balance at December 31, 2019	\$8,624,522	\$0	(\$1,086,467)	(\$365,931)	(\$33,532)	\$7,138,592

As referenced in the table above, the implementation of GASB Statement No. 84 had an effect on the ending fund balance as of December 31, 2019. Therefore, the difference of \$526,011 between prior year ending fund balance of \$6,612,581 and current year beginning fund balance of \$7,138,592 is a result of reclassifying all the Board fiduciary funds as special revenue funds as part of this implementation.

Governmental activities net position was also restated from \$6,612,581 to \$7,138,592 due to GASB 84.

Cuyahoga County Board of Health
Cuyahoga County
Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Note 4- Budgetary Basis of Accounting

The budgetary basis as provided by law is based upon accounting for certain transactions on the basis of cash receipts, disbursements, and encumbrances. The Statement of Receipts, Disbursements and Changes in Fund Balance – Budget and Actual – Budget Basis presented for the General fund, COVID-19 Response, HIV Care and Prevention and Injury Prevention special revenue funds are prepared on the budgetary basis to provide a meaningful comparison of actual results with the budget.

Note 5 – Accountability

Fund balances at December 31, 2020, included the following individual fund deficits:

Major Funds:	
COVID-19 Response	\$260,031
HIV Care and Prevention	2,014,514
Injury Prevention	494,203
Non-Major Funds:	
Breast & Cervical Cancer	74,886
Family Planning Services	8,936
Healthy Homes/Lead Prevention Program	172,949
Immunization Action Plan	1
Newborn Home Visiting	83,578
Public Health Infrastructure	2,350
Teen Pregnancy Prevention	19,896
Tobacco Reduction	28,923

The fund deficits in the above funds resulted from interfund liabilities due to timing issues with the reimbursement of expenses for various grants. The general fund is liable for the deficits in these funds and will provide advances when cash is required, not when the liability occurs.

Cuyahoga County Board of Health
Cuyahoga County
Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Note 6 – Deposits and Investments

As required by Ohio Revised Code, the Cuyahoga County Treasurer is custodian for the Board's deposits. The Board's cash pool, used by all funds, is deposited with the Cuyahoga County Treasurer. The cash pool is commingled with Cuyahoga County's cash and investment pool and is not identifiable as to demand deposits or investments. All collections are remitted to the Cuyahoga County Treasurer for deposit and all disbursements are made by warrants prepared by the Cuyahoga County Office of the Fiscal Officer drawn on deposits held in the name of Cuyahoga County. Deposits and deposit risk and investments and investment risk are presented in the December 31, 2020 Cuyahoga County Annual Comprehensive Financial Report. The fund balances are expressed in cash equivalents. Cash equivalents are available for immediate expenditure or liquid investments which are immediately marketable, have negligible credit risk, and mature within three months. The carrying amount of cash on deposit with the Cuyahoga County Treasurer at December 31, 2020 was valued at the Treasurer's carrying reported amount.

Note 7 – Property Taxes

The cities, villages and townships that receive services from the Board, contribute to the operations of the Board. The County Office of the Fiscal Officer assesses each subdivision their share of the operating cost, which is calculated by the Board and received through property tax collections. When the County Office of the Fiscal Officer disburses property tax to the subdivision, the appropriate deduction is made on the subdivision settlement and transmitted to the Board.

Note 8 – Risk Management

The Board is exposed to various risks of property and casualty losses, and injuries to employees.

The Board insures against injuries to employees through the Ohio Bureau of Worker's Compensation.

The Board is a member of the Public Entities Pool of Ohio (PEP), a risk-sharing pool available to Ohio local governments. PEP provides property and casualty coverage for its members. American Risk Pooling Consultants, Inc. (ARPCO), a division of York Insurance Services Group, Inc. (YORK), functions as administrator of PEP and provides underwriting, claims loss control, risk management, and reinsurance services for PEP. PEP is a member of the American Public Entity Excess Pool (APEEP), which is also administered by ARPCO. Member governments pay annual contributions to fund PEP. PEP pays judgments, settlements and other expenses resulting from covered claims that exceed the members' deductibles.

Cuyahoga County Board of Health
Cuyahoga County
Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Notes 8 – Risk Management (continued)

Financial Position

The pool reported the following summary of assets and actuarially-measured liabilities available to pay those liabilities as of December 31, 2020:

	2020
Cash and Investments	\$40,318,971
Actuarial Liabilities	(14,111,510)
	\$26,207,461

Based on discussions with PEP, the expected rates PEP charges to compute member contributions, which are used to pay claims as they become due, are not expected to change significantly from those used to determine the historical contributions detailed below. By contract, the annual liability of each member is limited to the amount of financial contributions required to be made to PEP for each of membership. The Board contributed \$51,680 to PEP in 2020.

After one year of membership, a member may withdraw on the anniversary of the date of joining PEP, if the member notifies PEP in writing (via certified mail) 60 days prior to the anniversary date. Upon withdrawal, members are eligible for a full or partial refund of their capital contributions, minus the subsequent year's contribution. Withdrawing members have no other future obligation to PEP. Also upon withdrawal, payments for all casualty claims and claim expenses become the sole responsibility of the withdrawing member, regardless of whether a claim occurred or was reported prior to the withdrawal.

Year	Contributions to PEP
2017	\$49,970
2018	62,704
2019	54,361
2020	51,680

Cuyahoga County Board of Health
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Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Note 9- Defined Benefit Pension Plan

Plan Description - The Board employees participate in the Ohio Public Employees Retirement System (OPERS). OPERS administers three separate pension plans. The traditional pension plan is a cost-sharing, multiple-employer defined benefit pension plan. The member-directed plan is a defined contribution plan and the combined plan is a cost-sharing, multiple-employer defined benefit pension plan with defined contribution features. While members (e.g. Board employees) may elect the member-directed plan and the combined plan, substantially all employee members are in OPERS' traditional plan; therefore, the following disclosure focuses on the traditional pension plan.

OPERS provides retirement, disability, survivor and death benefits, and annual cost of living adjustments to members of the traditional and combined plans. Authority to establish and amend benefits is provided by Chapter 145 of the Ohio Revised Code. OPERS issues a stand-alone financial report that includes financial statements, required supplementary information and detailed information about OPERS' fiduciary net position that may be obtained by visiting <https://www.opers.org/financial/reports.shtml>, by writing to Ohio Public Employees Retirement System, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling (800) 222-7377.

Senate Bill (SB) 343 was enacted into law with an effective date of January 7, 2013. In the legislation, members in the traditional and combined plans were categorized into three groups with varying provisions of the law applicable to each group. The following table provides age and service requirements for retirement and the retirement formula applied to final average salary (FAS) for the three member groups under the traditional and combined plans as per the reduced benefits adopted by SB 343 (see OPERS ACFR referenced above for additional information including requirements for reduced and unreduced benefits):

Group A Eligible to retire prior to January 7, 2013 or five years after January 7, 2013	Group B 20 years of service credit prior to January 7, 2013 or eligible to retire ten years after January 7, 2013	Group C Members not in other Groups and members hired on or after January 7, 2013
State and Local	State and Local	State and Local
Age and Service Requirements: Age 60 with 60 months of service credit or Age 55 with 25 years of service credit	Age and Service Requirements: Age 60 with 60 months of service credit or Age 55 with 25 years of service credit	Age and Service Requirements: Age 57 with 25 years of service credit or Age 62 with 5 years of service credit
Formula:	Formula:	Formula:
Traditional Plan Formula 2.2% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30	Traditional Plan Formula 2.2% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30	Traditional Plan Formula 2.2% of FAS multiplied by years of service for the first 35 years and 2.5% for service years in excess of 35
Combined Plan Formula 1% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30	Combined Plan Formula 1% of FAS multiplied by years of service for the first 30 years and 1.25% for service years in excess of 30	Combined Plan Formula 1% of FAS multiplied by years of service for the first 35 years and 1.25% for service years in excess of 35

Final average salary (FAS) represents the average of the three highest years of earnings over a member's career for Groups A and B. Group C is based on the average of the five highest years of earnings over a member's career.

Members who retire before meeting the age and years of service credit requirement for unreduced benefits receive a percentage reduction in the benefit amount. The initial amount of a member's pension benefit is vested upon receipt of the initial benefit payment for calculation of an annual cost-of-living adjustment.

Cuyahoga County Board of Health
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Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Note 9- Defined Benefit Pension Plan (continued)

When a traditional plan benefit recipient has received benefits for 12 months, current law provides for an annual cost-of-living adjustment (COLA) is provided. This COLA is calculated on the base retirement benefit at the date of retirement and is not compounded. Members retiring under the combined plan receive a cost-of-living adjustment of the defined benefit portion of their pension benefit. For those retiring prior to January 7, 2013, current law provides for a 3 percent COLA. For those retiring subsequent to January 7, 2013, beginning in calendar year 2019, current law provides that the COLA will be based on the average percentage increase in the Consumer Price Index, capped at 3 percent.

Defined contribution plan benefits are established in the plan documents, which may be amended by the Board. Member-directed plan and combined plan members who have met the retirement eligibility requirements may apply for retirement benefits. The amount available for defined contribution benefits in the combined plan consists of the member's contributions plus or minus the investment gains or losses resulting from the member's investment selections. Combined plan members wishing to receive benefits must meet the requirements for both the defined benefit and defined contribution plans. Member-directed participants must have attained the age of 55, have money on deposit in the defined contribution plan and have terminated public service to apply for retirement benefits. The amount available for defined contribution benefits in the member-directed plan consists of the members' contributions, vested employer contributions and investment gains or losses resulting from the members' investment selections. Employer contributions and associated investment earnings vest over a five-year period, at a rate of 20 percent each year. At retirement, members may select one of several distribution options for payment of the vested balance in their individual OPERS accounts. Options include the purchase of a monthly defined benefit annuity from OPERS (which includes joint and survivor options), partial lump-sum payments (subject to limitations), a rollover of the vested account balance to another financial institution, receipt of entire account balance, net of taxes withheld, or a combination of these options.

Beginning in 2022, the Combined Plan will be consolidated under the Traditional Pension Plan (defined benefit plan) and the Combined Plan option will no longer be available for new hires beginning in 2022.

Funding Policy – The Ohio Revised Code (ORC) provides statutory authority for member and employer contributions as follows:

	State and Local
2020 Statutory Maximum Contribution Rates	
Employer	14.0 %
Employee	10.0 %
 2020 Actual Contribution Rates	
Employer:	
Pension	14.0 %
Post-employment Health Care Benefits	0.0 %
Total Employer	14.0 %
 Employee	 10.0 %

Cuyahoga County Board of Health
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Notes to the Basic Financial Statements
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Note 9- Defined Benefit Pension Plan (continued)

Employer contribution rates are actuarially determined and are expressed as a percentage of covered payroll. The Board's contractually required contribution was \$1,417,831 for year 2020.

Note 10- Postemployment Benefits

Plan Description – The Ohio Public Employees Retirement System (OPERS) administers three separate pension plans: the traditional pension plan, a cost-sharing, multiple-employer defined benefit pension plan; the member-directed plan, a defined contribution plan; and the combined plan, a cost-sharing, multiple-employer defined benefit pension plan that has elements of both a defined benefit and defined contribution plan.

OPERS maintains a cost-sharing multiple-employer defined benefit post-employment health care trust, which funds multiple health care plans including medical coverage, prescription drug coverage and deposits to a Health Reimbursement Arrangement to qualifying benefit recipients of both the Traditional Pension and the Combined plans. This trust is also used to fund health care for Member-Directed Plan participants, in the form of a Retiree Medical Account (RMA). At retirement or refund, Member-Directed Plan participants may be eligible for reimbursement of qualified medical expenses from their vested RMA balance.

In order to qualify for post-employment health care coverage, age and service retirees under the Traditional Pension and Combined Plans must have twenty or more years of qualifying Ohio service credit with a minimum age of 60, or generally 30 years of qualifying service at any age. Health care coverage for disability benefit recipients and qualified survivor benefit recipients is available. The health care coverage provided by OPERS meets the definition of an Other Post-Employment Benefit (OPEB) as described in GASB Statement No. 75. See OPERS' ACFR referenced below for additional information.

The Ohio Revised Code permits, but does not require, OPERS to provide health care to its eligible benefit recipients. Authority to establish and amend health care coverage is provided in Chapter 145 of the Ohio Revised Code.

Disclosures for the health care plan are presented separately in the OPERS financial report. Interested parties may obtain a copy by visiting <https://www.opers.org/financial/reports.shtml>, by writing to OPERS, 277 East Town Street, Columbus, OH 43215-4642, or by calling (614) 222-5601 or (800) 222-7377.

Funding Policy – The Ohio Revised Code provides the statutory authority requiring public employers to fund postemployment health care through their contributions to OPERS. When funding is approved by the OPERS Board of Trustees, a portion of each employer's contribution to OPERS is set aside to fund OPERS health care plans.

Employer contribution rates are expressed as a percentage of the earnable salary of active members. In 2020, State and Local employers contributed at a rate of 14.00 percent of earnable salary and Public Safety and Law Enforcement employers contributed at 18.10 percent. These are the maximum employer contribution rates permitted by the Ohio Revised Code. Active member contributions do not fund health care.

Each year, the OPERS Board determines the portion of the employer contribution rate that will be set aside to fund health care plans. For 2020, OPERS did not allocate any employer contribution to health care for members in the Traditional Pension Plan and Combined Plan. The OPERS Board is also authorized to establish rules for the retiree or their surviving beneficiaries to pay a portion of the health care benefits provided.

Cuyahoga County Board of Health
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Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Note 10- Postemployment Benefits (continued)

Payment amounts vary depending on the number of covered dependents and the coverage selected. The employer contribution as a percentage of covered payroll deposited into the RMA for participants in the Member-Directed Plan for 2020 was 4.0 percent.

Employer contribution rates are actuarially determined and are expressed as a percentage of covered payroll. For the year ended December 31, 2020, OPERS did not allocate any employer contributions to post-employment health care.

Note 11 – Operating Lease

The Board entered into an operating lease with Quadient Leasing (formerly known as MailFinance, Inc.) in July 2019, for the purpose of leasing a mailing system for 60 months. This is a non-cancelable lease that is paid annually. The Board paid total rental cost of \$4,325 in 2020.

Note 12 – Interfund Transfers

Interfund transfers for the year ended December 31, 2020, consisted of the following:

Transfers From	Transfers To General Fund
<i>Non-major Governmental Funds:</i>	
Breast & Cervical Cancer	\$145,164
Creating Healthy Communities	6,661
Healthy Homes/Lead Prevention Program	20,582
Public Health Infrastructure	158
<i>Non-major Governmental Funds Subtotal</i>	\$172,565

The transfers from the non-major special revenue funds to the general funds for \$172,565 were made to support programs and projects in those funds.

In addition, \$3,162 was transferred from the General Fund into the Dental Sealant Fund. Transfers in and out for 2020 were posted incorrectly in error. They will be adjusted in future years.

Cuyahoga County Board of Health
Cuyahoga County
Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Note 13 – Fund Balances

Fund balance is classified as non-spendable, restricted, committed, assigned and/or unassigned based primarily on the extent to which the Board is bound to observe constraints imposed upon the use of the resources in the government funds. The constraints placed on fund balance for the major governmental funds and all other governmental funds are presented below:

<u>Fund Balances</u>	<u>General Fund</u>	<u>COVID-19 Response</u>	<u>HIV Care and Prevention</u>	<u>Injury Prevention</u>
Restricted for:				
Bathing Beaches	\$0	\$0	\$0	\$0
Board of Health Hospitalization	0	0	0	0
Child & Family Health Services	0	0	0	0
Creating Healthy Communities	0	0	0	0
Dental Sealant	0	0	0	0
Lead Case Mgmt/Blood Testing	0	0	0	0
Options Regional Referral	0	0	0	0
Preventive Health Block Grant	0	0	0	0
Silver Oak Landfill	0	0	0	0
Watershed Program	0	0	0	0
Total Restricted	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Unassigned (Deficit)	<u>7,159,168</u>	<u>(260,031)</u>	<u>(2,014,514)</u>	<u>(494,203)</u>
Total Fund Balances	<u>\$7,159,168</u>	<u>(\$260,031)</u>	<u>(\$2,014,514)</u>	<u>(\$494,203)</u>

<u>Fund Balances- Continued</u>	<u>Other Governmental Funds</u>	<u>Total Governmental Funds</u>
Restricted for:		
Bathing Beaches	\$30,115	\$30,115
Board of Health Hospitalization	89,269	89,269
Child & Family Health Services	12,718	12,718
Creating Healthy Communities	205,286	205,286
Dental Sealant	6,323	6,323
Lead Case Mgmt/Blood Testing	21,711	21,711
Options Regional Referral Grant	2,329	2,329
Preventive Health Block Grant	45,434	45,434
Silver Oak Landfill	397,794	397,794
Watershed Program	21,176	21,176
Total Restricted	<u>832,155</u>	<u>832,155</u>
Unassigned (Deficit)	<u>(391,519)</u>	<u>3,998,901</u>
Total Fund Balances	<u>\$440,636</u>	<u>\$4,831,056</u>

Cuyahoga County Board of Health
Cuyahoga County
Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Note 14 – Lease Purchase Agreement

On March 9, 2018, the Board entered into a lease purchase agreement in the amount of \$4,800,000, with a financial institution to assist in financing to pay costs of constructing, renovating, furnishing and equipping improvements to its building facilities (located at 5550 Venture Drive, Parma, Ohio 44130). In 2020, the Board paid \$175,000 and \$191,250 in principal and interest, respectively for the lease purchase agreement entered into on March 9, 2018.

On December 27, 2018, the Board entered into an additional lease purchase agreement, in the amount of \$1,350,000, with a financial institution to assist in financing to pay costs of constructing, renovating, furnishing and equipping improvements to its building facilities (located at 5550 Venture Drive, Parma, Ohio 44130). In 2020, the Board paid \$49,000 and \$57,156 in principal and interest, respectively for the lease purchase agreement entered on December 27, 2018.

The Board’s long-term loan activity for the year ended December 31, 2020, was as follows:

<u>Governmental Activities</u>	<u>Interest Rate</u>	<u>Outstanding 12/31/2019</u>	<u>Issued</u>	<u>Retired</u>	<u>Outstanding 12/31/2020</u>	<u>Due Within One Year</u>
Loans Payable						
Building Facilities Issue (March 9, 2018)	4.25%	\$4,500,000	\$0	\$175,000	\$4,325,000	\$180,000
Building Facilities Issue (December 27, 2018)	4.40%	1,299,000	0	49,000	1,250,000	51,000
Total Governmental Activities		\$5,799,000	\$0	\$224,000	\$5,575,000	\$231,000

The following is a summary of the Board’s future annual debt service requirements for the lease purchase agreements stated above.

<u>Year</u>	<u>Loans</u>	
	<u>Principal</u>	<u>Interest</u>
2021	\$231,000	\$238,813
2022	243,000	228,918
2023	251,000	218,512
2024	263,000	207,760
2025	276,000	196,495
2026-2030	1,545,000	796,580
2031-2035	1,893,000	436,709
2036-2037	873,000	56,506
Total	<u>\$5,575,000</u>	<u>\$2,380,293</u>

Cuyahoga County Board of Health
Cuyahoga County
Notes to the Basic Financial Statements
For the Year Ended December 31, 2020

Note 15 – COVID-19

The United States and the State of Ohio declared a state of emergency in March of 2020 due to the COVID-19 pandemic. The financial impact of COVID-19 and the continuing emergency measures will impact subsequent periods of the Board. The impact on the Board's future operating costs, revenues, and additional recovery from emergency funding, either federal and state cannot be estimated.

During 2020, the Board received \$3,387,878 in CARES Act funding from various funders. These amounts are recorded in the COVID-19 Response Special Revenue Fund. There were no monies returned in CARES Act funding.

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CUYAHOGA COUNTY BOARD OF HEALTH
CUYAHOGA COUNTY
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2020

FEDERAL GRANTOR/ PASS-THROUGH GRANTOR/PROGRAM TITLE	FEDERAL AL NUMBER	PASS-THROUGH/ ENTITY NUMBER	PASSED THROUGH TO SUBRECIPIENTS	EXPENDITURES
U.S. Department of Health and Human Services				
<i>Direct</i>				
HIV Emergency Relief Project Grants				
19/20 HIV Emergency Relief Project Grants	93.914	H89HA23812	\$1,637,467	\$1,826,470
20/21 HIV Emergency Relief Project Grants	93.914	H89HA23812-10-01	2,388,266	2,734,352
COVID-19 20/21 Ryan White HIV/AIDS Program Part A COVID-19 Response	93.914	H9AHA36945-01-00	0	13,685
Total HIV Emergency Relief Project Grants			4,025,733	4,574,507
Racial and Ethnic Approaches to Community Health				
2019/2020 Racial and Ethnic Approaches to Community Health	93.738	NU58DP006586-02-00	541,620	571,284
2020/2021 Racial and Ethnic Approaches to Community Health	93.738	NU58DP006586-03-00	113,632	113,826
Total Racial and Ethnic Approaches to Community Health			655,252	685,110
Teenage Pregnancy Prevention Program				
19/20 Teenage Pregnancy Prevention Program	93.297	TP1AH000093-05-00	346,937	499,304
Total Teenage Pregnancy Prevention Program			346,937	499,304
Injury Prevention and Control Research and State and Community Based Programs				
19/20 Overdose Data To Action (OD2A) Initiative	93.136	1 NU17CE925005-01-00	2,195,128	2,721,473
Total Injury Prevention and Control Research and State and Community Based Programs			2,195,128	2,721,473
Ending the HIV Epidemic: A Plan for America				
20/21 Ending the HIV Epidemic: A Plan for America	93.686	1 UT8HA33929-01-00	0	73,208
Total Ending the HIV Epidemic: A Plan for America			0	73,208
<i>Passed Through the State Department of Health:</i>				
Children's Health Insurance Program				
19/20 Breast & Cervical Cancer Project	93.767	01810014BC1320	0	381
Total Children's Health Insurance Program			0	381
Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations				
19/20 Breast & Cervical Cancer Project	93.898	01810014BC1320	0	1,623
Total Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations			0	1,623
HIV Prevention				
2020 HIV Prevention	93.940	01810012HP0120	327,101	379,836
Total HIV Prevention			327,101	379,836
Maternal and Child Health Services Block Grant				
19/20 Maternal & Child Health Program	93.994	01810011MP0420	0	62,404
20/21 Maternal & Child Health Program	93.994	01810011MP0521	0	3,979
19/20 Ohio Equity Institute	93.994	01810011OE0220	195,922	235,474
20/21 Ohio Equity Institute	93.994	01810011OE0321	0	38,347
2020/2021 Cribs for Kids and Safe Sleep	93.994	01810011CK0321	0	13,441
Total Maternal and Child Health Services Block Grant			195,922	353,645
State Physical Activity and Nutrition				
2019/2020 Cribs for Kids and Safe Sleep	93.439	01810011CK0220	0	7,355
Total State Physical Activity and Nutrition			0	7,355
Preventive Health and Health Services Block Grants				
2020 Creating Healthy Communities	93.991	01810014CC1120	0	98,969
Total Preventive Health and Health Services Block Grants			0	98,969
Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP)				
Aligned Cooperative Agreements				
19/20 Public Health Emergency Preparedness	93.074	01810012PH1120	26,777	510,260
Total Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements			26,777	510,260
Public Health Emergency Preparedness				
20/21 Public Health Emergency Preparedness	93.069	01810012PH1221	25,217	355,974
Total Public Health Emergency Preparedness			25,217	355,974
Public Health Crisis Response				
COVID-19 2020 Coronavirus Response	93.354	01810012CO0120	0	105,714
Total Public Health Crisis Response			0	105,714
<i>Passed Through the State Department of Administrative Services</i>				
Personal Responsibility Education Program				
19/20 Personal Responsibility Education Program	93.092	CSP902718-7	4,714	4,722
20/21 Personal Responsibility Education Program	93.092	CSP904320	116,444	168,950
Total Personal Responsibility Education Program			121,158	173,672

CUYAHOGA COUNTY BOARD OF HEALTH
 CUYAHOGA COUNTY
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
 FOR THE YEAR ENDED DECEMBER 31, 2020

FEDERAL GRANTOR/ PASS-THROUGH GRANTOR/PROGRAM TITLE	FEDERAL AL NUMBER	PASS-THROUGH/ ENTITY NUMBER	PASSED THROUGH TO SUBRECIPIENTS	EXPENDITURES
<i>Passed Through the Cleveland Department of Public Health</i>				
Family Planning Services				
19/20 Reproductive Health and Wellness	93.217	01820011RH0620	0	51,583
Total Family Planning Services			<u>0</u>	<u>51,583</u>
<i>Passed Through the Summit County Public Health</i>				
Maternal and Child Health Services Block Grant				
2018 Dental Sealant	93.994	07710011DS1118	0	0
2019 Dental Sealant	93.994	07710011DS1219	0	(3,162)
Total Maternal and Child Health Services Block Grant			<u>0</u>	<u>(3,162)</u>
<i>Passed Through the National Network of Public Health Institutes</i>				
Activities to Support State, Tribal, Local and Territorial (STLT) Health Dept Response to Public Health or Healthcare Crises 2018/2019 ACE's	93.391	N/A	(8,653)	(8,571)
Total (STLT) Health Dept Response to Public Health or Healthcare Crises			<u>(8,653)</u>	<u>(8,571)</u>
Total U.S. Department of Health and Human Services			7,910,572	10,580,882
U.S. Department of Housing and Urban Development				
<i>Direct</i>				
Lead-Based Paint Hazard Control in Privately-Owned Housing 18/21 Lead-Based Paint Hazard Control In Housing	14.900	N/A	124,598	761,128
Total Lead-Based Paint Hazard Control in Privately-Owned Housing			<u>124,598</u>	<u>761,128</u>
Total U.S. Department of Housing and Urban Development			124,598	761,128
U.S. Department of Agriculture				
<i>Direct</i>				
Farm to School 19/21 Farm to School	10.575	CN-F2S-IMP-19-OH-2	0	72,534
Total Farm to School			<u>0</u>	<u>72,534</u>
Total U.S. Department of Agriculture			0	72,534
U.S. Environmental Protection Agency				
<i>Direct</i>				
Surveys, Studies, Research, Investigations, Demonstrations, and Special Purpose Activities Relating to the Clean Air Act 2018/2020 Asthma Trigger Assessment	66.034	00E02396	0	31,682
Total Surveys, Studies, Research, Investigations, Demonstrations, and Special Purpose Activities Relating to the Clean Air Act			<u>0</u>	<u>31,682</u>
<i>Passed Through the State Department of Health</i>				
Beach Monitoring and Notification Program Implementation 19/22 Bathing Beaches Monitoring	66.472	CU00E52610-0	0	4,961
Total Beach Monitoring and Notification Program Implementation			<u>0</u>	<u>4,961</u>
Total U.S. Environmental Protection Agency			0	36,643
U.S. Department of Transportation				
<i>Passed through the State Department of Transportation</i>				
Highway Planning and Construction 19/20 Safe Routes to School (Maple Heights)	20.205	33480	0	6,187
Total Highway Planning and Construction			<u>0</u>	<u>6,187</u>
Total U.S. Department of Transportation			0	6,187

CUYAHOGA COUNTY BOARD OF HEALTH
 CUYAHOGA COUNTY
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
 FOR THE YEAR ENDED DECEMBER 31, 2020

<u>FEDERAL GRANTOR/ PASS-THROUGH GRANTOR/PROGRAM TITLE</u>	<u>FEDERAL AL NUMBER</u>	<u>PASS-THROUGH/ ENTITY NUMBER</u>	<u>PASSED THROUGH TO SUBRECIPIENTS</u>	<u>EXPENDITURES</u>
U.S. Department of the Treasury				
<i>Passed through the County of Cuyahoga</i>				
COVID-19 Coronavirus Relief Fund				
COVID-19 2020 COVID-19 Response Testing	21.019	N/A	0	2,060,332
<i>Passed Through the State Department of Health:</i>				
COVID-19 20/21 COVID-19 Contract Tracing	21.019	01810012CT0120	0	663,723
COVID-19 20/21 COVID-19 Care Resource Coordination Support	21.019	01810011RC0121	480,121	527,413
COVID-19 20/21 Coronavirus Response Supplemental	21.019	01810012CO0121	0	290,727
Total COVID-19 Coronavirus Relief Fund			<u>480,121</u>	<u>3,542,195</u>
Total U.S. Department of the Treasury			480,121	3,542,195
TOTAL FEDERAL AWARDS EXPENDITURE			<u>\$8,515,291</u>	<u>\$14,999,568</u>

The accompanying notes are an integral part of this schedule.

Cuyahoga County Board of Health
Cuyahoga County
Notes to the Schedule of Expenditures of Federal Awards
2 CFR 200.510(b)(6)
For the Year Ended December 31, 2020

Note 1 – Basis of Presentation

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of the Cuyahoga County Board of Health (the Board) under programs of the federal government for the year ended December 31, 2020. The information on this Schedule is prepared in accordance with the 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). Because the Schedule presents only a selected portion of the operations of the Board, it is not intended to and does not present the financial position or changes in net position of the Board.

Note 2 – Summary of Significant Accounting Policies

Expenditures reported on the Schedule are reported on the cash basis of accounting. Such expenditures are recognized following the cost principles contained in Uniform Guidance wherein certain types of expenditures may or may not be allowable or may be limited as to reimbursement.

Note 3 – Indirect Cost Rate

The Board has elected to use the 10-percent de minimis indirect cost rate as allowed under the Uniform Guidance.

Note 4 – Subrecipients

The Board passes certain federal awards received from the U.S. Department of Health and Human Services, the State Department of Health, the State Department of Administrative Services, the National Network of Public Health Institutes, the U.S. Department of Housing and Urban Development, and U.S. Department of Treasury to other governments or not-for-profits agencies (subrecipients). As Note 2 describes, the Board reports expenditures of Federal awards to subrecipients when paid in cash.

As a subrecipient, the Board has certain compliance responsibilities, such as monitoring its subrecipients to help assure they use these subawards as authorized by laws, regulations, and the provisions of contracts or grant agreements, and that subrecipients achieve the award's performance goals.

Note 5 – Matching Requirements

Certain Federal programs require the Board to contribute non-Federal funds (matching funds) to support the Federally-funded programs. The Board has met its matching requirements. The Schedule does not include the expenditure of non-Federal matching funds.

OHIO AUDITOR OF STATE KEITH FABER



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INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS REQUIRED BY GOVERNMENT AUDITING STANDARDS

Cuyahoga County Board of Health
Cuyahoga County
5550 Venture Drive
Parma, Ohio 44130

To the Board Members:

We have audited, in accordance with auditing standards generally accepted in the United States and the Comptroller General of the United States' *Government Auditing Standards*, the cash-basis financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of the Cuyahoga County Board of Health, Cuyahoga County, (the Board) as of and for the year ended December 31, 2020, and the related notes to the financial statements, which collectively comprise the Board's basic financial statements and have issued our report thereon dated March 29, 2023, wherein we noted the Board uses a special purpose framework other than generally accepted accounting principles. We noted the Board implemented Governmental Accounting Standards Board Statement No. 84, *Fiduciary Activities*. We also noted the financial impact of COVID-19 and the ensuing emergency measures will impact subsequent periods of the Board.

Internal Control Over Financial Reporting

As part of our financial statement audit, we considered the Board's internal control over financial reporting (internal control) as a basis for designing audit procedures appropriate in the circumstances to the extent necessary to support our opinions on the financial statements, but not to the extent necessary to opine on the effectiveness of the Board's internal control. Accordingly, we have not opined on it.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, when performing their assigned functions, to prevent, or detect and timely correct misstatements. A *material weakness* is a deficiency, or combination of internal control deficiencies resulting in a reasonable possibility that internal control will not prevent or detect and timely correct a material misstatement of the Board's financial statements. 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.

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 internal control deficiencies that might be material weaknesses or significant deficiencies. Given these limitations, we did not identify any deficiencies in internal control that we consider material weaknesses. However, unidentified material weaknesses may exist.

Compliance and Other Matters

As part of reasonably assuring whether the Board's financial statements are free of material misstatement, we tested its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could directly and materially affect the financial statements. However, opining on compliance with those provisions was not an objective of our audit and accordingly, we do not express an opinion. The results of our tests disclosed no instances of noncompliance or other matters we must report under *Government Auditing Standards*.

Purpose of this Report

This report only describes the scope of our internal control and compliance testing and our testing results, and does not opine on the effectiveness of the Board's internal control or on compliance. This report is an integral part of an audit performed under *Government Auditing Standards* in considering the Board's internal control and compliance. Accordingly, this report is not suitable for any other purpose.



Keith Faber
Auditor of State
Columbus, Ohio

March 29, 2023

OHIO AUDITOR OF STATE KEITH FABER



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INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH REQUIREMENTS APPLICABLE TO EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

Cuyahoga County Board of Health
Cuyahoga County
5550 Venture Drive
Parma, Ohio 44130

To the Board Members:

Report on Compliance for Each Major Federal Program

We have audited Cuyahoga County Board of Health's (the Board) compliance with the applicable requirements described in the U.S. Office of Management and Budget (OMB) *Compliance Supplement* that could directly and materially affect Cuyahoga County Board of Health's major federal programs for the year ended December 31, 2020. The *Summary of Auditor's Results* in the accompanying schedule of findings identifies the Board's major federal programs.

Management's Responsibility

The Board's Management is responsible for complying with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditor's Responsibility

Our responsibility is to opine on the Board's compliance for the Board's major federal programs based on our audit of the applicable compliance requirements referred to above. Our compliance audit followed auditing standards generally accepted in the United States of America; the standards for financial audits included in the Comptroller General of the United States' *Government Auditing Standards*; and 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). These standards and the Uniform Guidance require us to plan and perform the audit to reasonably assure whether noncompliance with the applicable compliance requirements referred to above that could directly and materially affect a major federal program occurred. An audit includes examining, on a test basis, evidence about the Board's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe our audit provides a reasonable basis for our compliance opinion on the Board's major programs. However, our audit does not provide a legal determination of the Board's compliance.

Opinion on the Major Federal Programs

In our opinion, the Cuyahoga County Board of Health complied, in all material respects with the compliance requirements referred to above that could directly and materially affect its major federal programs for the year ended December 31, 2020.

Report on Internal Control Over Compliance

The Board's management is responsible for establishing and maintaining effective internal control over compliance with the applicable compliance requirements referred to above. In planning and performing our compliance audit, we considered the Board's internal control over compliance with the applicable requirements that could directly and materially affect a major federal program, to determine our auditing procedures appropriate for opining on the major federal program's compliance and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not to the extent needed to opine on the effectiveness of internal control over compliance. Accordingly, we have not opined on the effectiveness of the Board's 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, when performing their assigned functions, to prevent, or to timely detect and correct, noncompliance with a federal program's applicable compliance requirement. A *material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a federal program compliance requirement will not be prevented, or timely detected and corrected. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with federal program's applicable compliance requirement 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 first paragraph of this section and would not necessarily identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

This report only describes the scope of our internal control over compliance tests and the results of this testing based on Uniform Guidance requirements. Accordingly, this report is not suitable for any other purpose.



Keith Faber
Auditor of State
Columbus, Ohio

March 29, 2023

**CUYAHOGA COUNTY BOARD OF HEALTH
CUYAHOGA COUNTY**

**SCHEDULE OF FINDINGS
2 CFR § 200.515
DECEMBER 31, 2020**

1. SUMMARY OF AUDITOR'S RESULTS

<i>(d)(1)(i)</i>	Type of Financial Statement Opinion	Unmodified
<i>(d)(1)(ii)</i>	Were there any material weaknesses in internal control reported at the financial statement level (GAGAS)?	No
<i>(d)(1)(ii)</i>	Were there any significant deficiencies in internal control reported at the financial statement level (GAGAS)?	No
<i>(d)(1)(iii)</i>	Was there any reported material noncompliance at the financial statement level (GAGAS)?	No
<i>(d)(1)(iv)</i>	Were there any material weaknesses in internal control reported for major federal programs?	No
<i>(d)(1)(iv)</i>	Were there any significant deficiencies in internal control reported for major federal programs?	No
<i>(d)(1)(v)</i>	Type of Major Programs' Compliance Opinion	Unmodified
<i>(d)(1)(vi)</i>	Are there any reportable findings under 2 CFR § 200.516(a)?	No
<i>(d)(1)(vii)</i>	Major Programs (list):	Injury Prevention and Control Research and State and Community Based Programs, CFDA #93.136 Lead-Based Paint Hazard Control in Privately-Owned Housing, CFDA #14.900 COVID-19 Coronavirus Relief Fund, CFDA #21.019
<i>(d)(1)(viii)</i>	Dollar Threshold: Type A/B Programs	Type A: > \$ 750,000 Type B: all others
<i>(d)(1)(ix)</i>	Low Risk Auditee under 2 CFR §200.520?	No

**2. FINDINGS RELATED TO THE FINANCIAL STATEMENTS
REQUIRED TO BE REPORTED IN ACCORDANCE WITH GAGAS**

None.

3. FINDINGS FOR FEDERAL AWARDS

None.

OHIO AUDITOR OF STATE KEITH FABER



CUYAHOGA COUNTY BOARD OF HEALTH

CUYAHOGA COUNTY

AUDITOR OF STATE OF OHIO CERTIFICATION

This is a true and correct copy of the report, which is required to be filed pursuant to Section 117.26, Revised Code, and which is filed in the Office of the Ohio Auditor of State in Columbus, Ohio.



Certified for Release 4/11/2023

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This report is a matter of public record and is available online at
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