

174th Session of the Executive Committee

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PROGRAMMING OF THE REVENUE SURPLUS

Background

- 1. Financial Regulation 4.8 of the Pan American Health Organization (PAHO) stipulates that any excess of revenue over the Budgeted Miscellaneous Revenue at the end of a budgetary period shall be considered a revenue surplus and shall be available for use in subsequent periods to cover any unfunded portion(s) of the Strategic Plan, as determined by the Director and with the concurrence of the Subcommittee on Program, Budget, and Administration.
- 2. The amount available for programming in 2024–2025 from the revenue surplus of the 2022–2023 biennium is US\$ 30 803 437. When estimating the miscellaneous revenue, the Pan American Sanitary Bureau made a cautious forecast due to the significant degree of economic uncertainty at the time. Furthermore, the higher-than-expected interest rates and the observed fluctuations in exchange rates resulted in a significant revenue surplus.
- 3. The revenue surplus offers a unique opportunity to invest in long-term, strategic, and corporate initiatives that are otherwise difficult to fund within the constraints of typical biennial budgetary exercises. These funds constitute an opportunity to complement funding of high programmatic priorities identified by Member States as part of the PAHO Program Budget 2024–2025, including those thematic areas that have shown increased demand for technical cooperation from countries across the Region of the Americas and chronic funding gaps.²

Proposed Allocation

4. The Director is proposing the allocation of the 2022–2023 revenue surplus balance as presented below:

Fund/Program	Purpose	Amount (US\$)
Master Capital Investment Fund – Real Estate Maintenance and Improvements Subfund	To complete PAHO Modernization – HQ Building Renovation Phase II	14 300 000
Programmatic priorities of the PAHO Program Budget 2024–2025	To complement funding of thematic areas with increased demand for technical cooperation in 2024–2025 from countries across the Region of the Americas and chronic funding gaps	16 503 437
Total Proposed Allocation		30 803 437

¹ Unless otherwise indicated, all monetary figures in this report are expressed in United States dollars.

² These include: Digital health and information systems, health systems with a primary health care approach, medicines and technology, emergency preparedness and risk reduction, NCDs' risk factors and mental health, health workforce, and disease elimination.

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Action by the Executive Committee

5. The Executive Committee is invited to take note of this report and provide any comments it deems pertinent.