



UNCLASSIFIED

April 17, 2019

ACTION MEMO FOR DEBORAH L. BIRX, AMBASSADOR-AT-LARGE; COORDINATOR OF THE UNITED STATES GOVERNMENT ACTIVITIES TO COMBAT HIV/AIDS AND U.S. SPECIAL REPRESENTATIVE FOR GLOBAL HEALTH DIPLOMACY

SUBJECT: Vietnam Country Operational Plan 2019 Approval

Recommendations

Approve the Vietnam Country Operational Plan (COP) 2019 with a total budget of \$38,250,000, including all initiatives and applied pipeline, to achieve the targets and outcomes as listed in this memo and all appendices. Total budget is reflective of the following programming:

Vietnam	New Funding (all accounts)*	Pipeline**	Total Budget FY2020 Implementation
Total Budget	28,941,763	9,308,237	38,250,000
COP 19 Bilateral	28,941,763	9,308,237	38,250,000

* New Funding may refer to FY 2019 or other FY appropriations newly allocated for implementation in FY 2020 with COP 2019; accounts indicated in detailed tables.

** Pipeline refers to funding allocated in prior years and approved for implementation in FY 2020 with COP 2019

Approve a total FY 2020 outlay for COP 2019 implementation that does not exceed the total approved COP 2019 budget of \$38,250,000. **Any prior year funds that are not included within this COP 2019 budget and documented within this memo, its appendices and official PEPFAR data systems are not to be made available for execution and outlay during FY 2020 without additional written approval.** The new FY 2019 funding and prior year funds approved within this memo as a part of the total COP 2019 budget are allocated to achieve specific results, outcomes and impacts as approved. All requested Operational Plan Updates and shifting of funds – either between mechanisms and partners, or to add additional funding to mechanisms and partners for execution in FY 2020 – must be submitted to and approved by S/GAC.

Approved funding will be made available to agency headquarters for allocation to country platform to implement COP 2019 programming and priorities as outlined below and in the appendix.

Vietnam must fully achieve approved COP 2018 (FY 2019) treatment current (TX_CURR) targets in order to execute the COP 2019 strategy, which includes the second year of surge funding. Suboptimal COP 2018 performance jeopardizes COP 2019 funding and may result in updates to this approval and a decrease to the COP 2019 funding.

Given S/GAC's concerns with performance in the NEZ and the transition to TLD, S/GAC directs agencies to hold all COP 2019 funds at headquarters until S/GAC sees the required improved performance in the NEZ and that the transition to TLD is meeting the proposed milestones.

Background

This approval is based upon: the discussions that occurred between the country team, agency headquarters, S/GAC, indigenous and international stakeholders and implementing partners in Johannesburg, South Africa during the March 18-22, 2019 in-person planning meetings; the final COP 2019 submission, including all data submitted via official PEPFAR systems or within supplemental documents; and Vietnam's virtual COP 2019 approval with Ambassador Birx on April 16, 2019.

Program Summary

Funding and targets for Vietnam's Country Operational Plan 2019 support PEPFAR Vietnam's plan for 81% of people living with HIV (PLHIV) on treatment in the Northern Economic Zone (Ha Noi, Hai Phong, Quang Ninh and Thai Nguyen) and the Ho Chi Minh City metropolitan area (Ba Ria-Vung Tau, Binh Duong, Dong Nai, Ho Chi Minh City, Long An, Tay Ninh, and Tien Giang) by the end of FY 2020. This was part of a data driven surge of resources and focus to ensure the greatest impact on the epidemic from host country and PEPFAR resources. This year's funding is the second year of the surge. Current performance of the first year investment is suboptimal in the Northern Economic Zone and needs to dramatically improve over the next 6 months or this second year of surge funding is at risk. The key technical priorities focus on case-finding and linking undiagnosed PLHIV to treatment in the critical key populations of men who have sex with men (MSM), and people who inject drugs.

A key diplomatic priority for PEPFAR Vietnam in FY 2020 is to ensure the Government of Vietnam adopts the WHO policy of TLD (tenofovir/lamivudine/dolutegravir) for first line treatment. This transition to TLD as the first line ART of choice requires the Vietnam Drug Administration to approve a “Market Authorization” for TLD. In COP 2019, PEPFAR Vietnam will continue work towards the expansion of access to same-day ART, and multi-month scripting (MMS) for all sites and all PLHIV. PEPFAR Vietnam continues to work with the Government of Vietnam to transition patients onto Vietnam’s Social Health Insurance (SHI) program. Already 90% of PLHIV on ART have SHI cards, and 88% of Outpatient Clinics can file for SHI re-imburement for HIV-related care. Transitioning the cost of antiretroviral drugs to the SHI scheme from donor support has begun, but must continue, while minimizing disruption to PLHIV on treatment. This work is also critical for the success of the key FY 2020 technical priority of expanding access to regular viral load testing for all PLHIV in Vietnam. The GoV commitment to SHI has provided the pathway for full country sustainability of treatment and the long term monitoring of clients on treatment to ensure effective viral load suppression.

The PEPFAR Vietnam strategy for FY 2020 programming is based on a thorough review of programmatic data, discussions with civil society and community organizations, and implementing partners. COP 2019 will support the second year of a rapid and intensive surge in the Northern Economic Zone (NEZ), particularly Hanoi. PEPFAR Vietnam will focus on partner management to make sure its partners intensify their effort on surging in the NEZ. Partner performance must dramatically improve to reach the goals of the two-year surge. Key implementing partners will transfer lessons learned from their own and other partner’s successes in the Ho Chi Minh City metropolitan area, particularly in case-finding, to the NEZ region. In addition, in FY 2020, the Hanoi Medical University will rapidly shift from a research study modality on MSM risk and transmission to implementing their results for case finding and linking to treatment.

In COP 2019 all partners, in both the NEZ and the Ho Chi Minh City metropolitan area, will improve index testing implementation to find and diagnose PLHIV. This includes shifting the focus of index testing to recent, acute, and newly diagnosed PLHIV, and limit index testing of those on long-term ART to individuals who are not virally suppressed. In addition, elicitation of contacts will be improved in conjunction with specific, differentiated counselling, designed for specific age, gender, and key population groups. People within these contact networks who are negative for HIV, yet at high risk for HIV will be educated about and offered PrEP (pre-exposure prophylaxis treatment).

UNCLASSIFIED

- 4 -

Finally, COP 2019 will support PEPFAR Vietnam’s work to help Vietnam build and develop a case-based surveillance system so that Vietnam can sustain epidemic control once achieved by FY 2021. COP 2019’s strategy for FY 2020 implementation targeted above site activities and the surveillance, research and evaluation activities will work toward this outcome.

Funding Summary

All COP 2019 funding summarized in the chart below is approved at the agency and account levels as indicated. Funds are to be utilized to achieve the targets and outcomes and to fund implementing partners and Management and Operations costs (U.S. Government Costs of Doing Business) as documented in all PEPFAR systems and summarized in the appendix.

Vietnam	FY 2019 New			Total New Funds	Applied Pipeline*	Total COP 19 Bilateral Budget
	GHP-State	GHP-USAID	GAP			
DOD TOTAL	1,411,487	-	-	1,411,487	-	1,411,487
HHS TOTAL	12,534,125	-	1,857,750	14,391,875	5,989,309	20,381,184
HHS/CDC	11,260,663	-	1,857,750	13,118,413	5,989,309	19,107,722
<i>of which, Surveillance and Public Health Response</i>	375,000	-	-	375,000	310,000	685,000
HHS/SAMHSA	1,273,462	-	-	1,273,462	-	1,273,462
STATE TOTAL	543,112	-	-	543,112	129,073	672,185
State	518,620	-	-	518,620	129,073	647,693
State/EAP	24,492	-	-	24,492	-	24,492
USAID TOTAL	12,595,289	-	-	12,595,289	3,189,855	15,785,144
USAID, non-WCF	11,195,289	-	-	11,195,289	3,189,855	14,385,144
<i>of which, Surveillance and Public Health Response</i>	139,401	-	-	139,401	273,000	412,401
USAID, WCF	1,400,000	-	-	1,400,000	-	1,400,000
TOTAL	27,084,013	-	1,857,750	28,941,763	9,308,237	38,250,000
<i>of which, Surveillance and Public Health Response</i>	514,401	-	-	514,401	583,000	1,097,401

* Pipeline refers to funding allocated in prior years, approved for implementation in FY 2020

GHP-State Funds: Upon the clearance of a FY 2019 PEPFAR GHP-State Congressional Notification (CN), funds will be made available for transfer to agency HQs as indicated in the above chart. Funds are made available for outlay in FY 2020 at approved COP 2019 partner budget levels to achieve FY 2020 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo’s appendix. Agency headquarters are directed to hold FY 2019 GHP-State funds until they receive specific approval to release for COP 2019 implementation. Upon approval, agencies will move the funds to the country platform via each agency’s internal process.

CDC GAP Funds: CDC is directed to hold GAP funding until they receive specific approval to release funding for COP 2019 implementation. Once approved, CDC GAP funds are to be allocated as indicated in the above funding chart. Funds are to be made available for outlay in FY 2020 at approved COP

UNCLASSIFIED

2019 partner budget levels to achieve FY 2020 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Upon approval, CDC GAP funding may be made available to country teams per CDC internal processes and following agency requirements.

Applied Pipeline Funds: All agencies are directed to hold pipeline intended for implementation in FY 2020 until they receive specific approval to release COP 2019 funds, at which point applied pipeline funds are to be allocated as indicated in the above funding chart. Funds are to be made available for outlay in FY 2020 at approved COP 2019 partner budget levels to achieve FY 2020 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Additional or remaining pipeline from previous year's activities that are not currently captured in the COP 2019 total budget level and documented within COP 2019 partner budgets are not to be executed or outlaid without written approval from the Global AIDS Coordinator.

FY 2020 Target Summary

FY 2019 funds are released and COP 2019 applied pipeline is approved to achieve the following results in FY 2020.

UNCLASSIFIED

- 6 -

Vietnam		SNU Prioritizations					Total *
		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	
HTS_INDEX	<15			4,323			4,323
	15+			21,697			21,917
	Total	-	-	26,020	-	-	26,240
HTS_TST	<15			4,323			4,323
	15+			196,010			225,230
	Total	-	-	200,333	-	-	229,553
HTS_TST_POS	<15			53			53
	15+			12,380			12,449
	Total	-	-	12,433	-	-	12,502
TX_NEW	<15			90			90
	15+			13,475			13,531
	Total	-	-	13,565	-	-	13,621
TX_CURR	<15			1,871			1,871
	15+			83,559			83,919
	Total	-	-	85,430	-	-	85,790
TX_PVLS	<15			1,907			1,907
	15+			84,522			84,888
	Total	-	-	86,429	-	-	86,795
CXCA_SCRN	Total (15+)			-			-
OVC_SERV	<18			-			-
	18+			-			-
	Total	-	-	-	-	-	-
OVC_HIVSTAT	Total (<18)			-			-
PMTCT_STAT	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
PMTCT_STAT_POS	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
PMTCT_ART	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
PMTCT_EID	Total			-			-
PP_PREV	<15			41			41
	15+			66,350			116,350
	Total	-	-	66,391	-	-	116,391
KP_PREV	Total			133,963			133,963
KP_MAT	Total			-			-
VMMC_CIRC	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
HTS_SELF	Total	-	-	100,982	-	-	100,982
PrEP_NEW	Total			4,641			4,641
PrEP_CURR	Total			7,308			7,308
TB_STAT (N)	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
TB_ART (N)	<15			-			-
	15+			-			-
	Total	-	-	-	-	-	-
TB_PREV (N)	<15			97			97
	15+			12,823			12,878
	Total	-	-	12,920	-	-	12,975
TX_TB (N)	<15			117			117
	15+			15,497			15,563
	Total	-	-	15,614	-	-	15,680
GEND_GBV	Total			-			-

* Totals may be greater than the sum of categories due to activities outside of the SNU prioritization areas outlined above

Budgetary Requirements

UNCLASSIFIED

Vietnam has programmed FY 2019 funding in support of required earmarks as follows:

Earmarks	FY 2019 COP19 Funding Level*
Care & Treatment	8,871,483
* Does not include central funds	

Partner Management and Stakeholder Engagement

Agreements made during COP discussions, including those regarding geographic focus, targets, budgets, SIMS, use of pipeline, partner implementation and partner management will be monitored and evaluated on a regular basis via both ad hoc check-ins and discussions as well as the joint HQ and country team POART discussions. It is expected that teams closely monitor partner performance and engage with each implementing partner on a regular basis to ensure achievement of targets, outcomes and impact in a manner consistent with the this memo, approved SDS, and budgets and targets as finalized in PEPFAR systems. Any partner found not to be on track to achieve 80% of its approved targets or outcomes by the end of the second quarter must be placed on an improvement plan with clear benchmarks to measure improvement. Specifically partner performance within the NEZ must meet the 80% requirement by the end of the second quarter. The country team should notify the S/GAC Chair and PPM immediately of the improvement plan.

Continued engagement with all stakeholders, including civil society and community members, multilateral partners and bilateral partners, is to continue throughout COP implementation. Core to this critical engagement is the sharing of and discussion surrounding quarterly results and achievement. This continued engagement will ensure all parties' understanding of Vietnam's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.