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United States Department of State

Washington, D.C. 20520

March 30, 2020

MEMO FOR DENNIS HEARNE; U.S. AMBASSADOR TO MOZAMBIQUE

SUBJECT: PEPFAR Mozambique Country Operational Plan 2020 Approval

This memo represents the successful completion of the PEPFAR Mozambique Country Operational Plan (COP) 2020 planning, development and submission. PEPFAR Mozambique, together with the partner government, civil society and multilateral partners, has planned and submitted a COP 2020 in alignment with the directives from the COP 2020 planning letter, data-driven decisions made during the in-country retreat, and agreements made during the planning meeting.

This memo serves as the approval memo for the PEPFAR Mozambique Country Operational Plan (COP) 2020 with a total approved budget of \$418,863,688, 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:

| Mozambique | New Funding (all accounts) | Funding (all accounts) Pipeline | |
|--------------|----------------------------|---------------------------------|-------------|
| Total Budget | 376,708,871 | 42,154,817 | 418,863,688 |
| Bilateral | 376,708,871 | 40,654,817 | 417,363,688 |
| Central | - | 1,500,000 | 1,500,000 |

Approve a total FY 2021 outlay for COP/ROP 2020 implementation that does not exceed the total approved COP/ROP 2020 budget of \$418,863,688. Any prior year funds that are not included within this COP/ROP 2020 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 2021 without additional written approval. The new FY 2020 funding and prior year funds approved within this memo as a part of the total COP/ROP 2020 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 2021– must be submitted to and approved by S/GAC.

Approved funding will be made available to agencies for allocation to country platform to implement COP 2020 programming and priorities as outlined below and in the appendix.

Approved access for the Mozambique PEPFAR program of up to \$1,959,638 in central funding for the procurement of condoms and lubricants.

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 during the February 24-28, 2020 in-person planning meetings and participants in the virtual approval meeting; the final COP/ROP 2020 submission, including all data submitted via official PEPFAR systems or within supplemental documents.

Program Summary

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Funding and targets for PEPFAR Mozambique's Country Operational Plan (COP) 2020 will support PEPFAR Mozambique's vision in partnership with the Government and people of Mozambique to work towards epidemic control by targeted testing to efficiently identify people living with HIV (PLHIV), linking all newly diagnosed PLHIV immediately to treatment, and ensuring all PLHIV are retained on treatment and remain virally suppressed. COP 2020 will work to greatly increase the number of Mozambicans on life-saving treatment, so that 1,850,466 PLHIV are on anti-retroviral therapies (ART) by the end of FY2021. While PLHIV across all ages and sexes in Mozambique need to be identified, linked, and retained on treatment, Mozambique COP 2020 will especially focus on linking and bringing back to care the age groups with the greatest loss to follow up and need – the young men and women of Mozambique. The program for COP 2020 will enroll 477,973 new PLHIV on treatment, with nearly a quarter of new patients as young men and women, and ensure viral load suppression in 1,656,918 patients.

An inability to retain new clients on treatment has plagued Mozambique's program for the past few years. A program 'reboot' in COP 2019 was necessary to draw an immediate focus on retention and address this severe and chronic issue, while at the same time creating greater efficiencies through better partner management and greater investment in high performing approaches and populations with greatest gaps. The PEPFAR OU strategy for programming to be implemented in FY 2021 will continue the streamlined 'reboot' efforts from COP 2019, while improving retention of PLHIV on ART and continuing to prevent new HIV infections through: (1) Enhanced community-led, site-level monitoring; (2) Improving pediatric treatment and continuing to provide support for Orphans and Vulnerable Children (OVC); (3) Expanding the DREAMS program to reduce HIV risk for adolescent girls and young women (AGYW); (4) Saturation of voluntary medical male circumcision (VMMC) for men over age 15; (5) Expanding access to pre-exposure prophylaxis (PrEP) to prevent transmission; (6) Further enhanced collaboration with the Government of the Republic of Mozambique (GRM) across all levels – national, provincial, district and site, as well as with other stakeholders; and (7) Continuing to improve partner management through improved data use to sustain gains and retain patients in care in COP 2020.

PEPFAR funds will focus on retention and viral suppression through expanding patient-centered access to needed services, providing a revamped service delivery package in collaboration with the GRM, including six-month drug dispensation, one-stop shops for new ART initiates, expanded clinic hours, promotion of integrated family-based consultations, and convenient methods of ART delivery through community organizations and private-public pharmacies. Mozambique will also improve ART regimens, expanding more tolerable Dolutegravir-based regimens across all populations by the end of COP 2019 and optimizing pediatric regimens by May 2020. In collaboration with GRM, civil society, and multilateral organizations, PEPFAR Mozambique will focus on treatment literacy and stigma reduction, including engagement with faith-based organizations in Mozambique to promote positive messages of hope. To help overcome any mental health barriers to PLHIV staying on treatment, PEPFAR Mozambique will be expanding a successful model of psycho-social and literacy support nationwide to those who need it. To ensure better monitoring of treatment outcomes, PEPFAR Mozambique will use the results of a lab optimization analysis to identify the most efficient use of laboratory and diagnostic capabilities, coupled with better electronic data systems, for improved data management of patient viral test results. Additionally, community-led monitoring by community-based organizations will hold facilities and clinical partners accountable for the highest, most client-centered quality of care. All interventions will be aligned with the UNAIDS 90-90-90 goals, WHO guidelines and global best practices, and with the PEPFAR Strategy for Accelerating HIV/AIDS Epidemic Control (2017-2020) and in close collaboration with GRM, civil society, and other stakeholders.

During COP 2020, PEPFAR Mozambique will continue to invest resources and funds most heavily in the 628 focused sites from the COP 2019 reboot, which accounts for 90% of PLHIV on ART in Mozambique, while also supporting the 902 sustainability sites operated by the GRM. A few notable changes from COP 2019 to COP 2020 include the large expansion of the DREAMS program from 9 to 32 districts, PrEP scale-up to all provinces and accessibility to those at-risk, expansion of community key population sites and PrEP

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provision, and limitation of VMMC to only those above 15 years of age. Additionally, PEPFAR Mozambique will be increasing their support of advanced disease, providing access to mental health resources, engaging and retaining youth through intensified case management and peer mentorship, and building upon GRM's male engagement strategy and strategic marketing to decrease stigma and discrimination to bring PLHIV back into care, especially men who were previously lost to follow-up. PEPFAR Mozambique continues to be fully committed to active partner management and accountability, engagement at all spheres of government, and mobilization of all stakeholders to achieve these goals. To ensure high-quality, client-centered HIV/AIDS services, PEPFAR Mozambique, in collaboration with GRM, civil society, and UNAIDS, will be expanding a multi-pronged approach to community-led monitoring of clinics and services in COP 2020.

Funding Summary

All COP/ROP 2020 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. Rendine

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For FY

| | | Bilateral | | | Central | | | | |
|--|------------------|-------------|------------------|------------------|-----------------------|-------------------------|-----------------------|---------------------|-------------|
| | New Funding FY20 | | Applied Pipeline | Applied Pipeline | Total Central Applied | Total Bilateral Applied | Total Bilateral - New | Total COP 20 Budget | |
| | | | Unspecified | Unspecified | Pipeline | Pipeline | Funding | | |
| Mozambique | Total | GHP-State | GAP | Total | Total | | | | |
| DOD TOTAL . | 7,801,584 | 7,801,584 | - | 84,151 | - | - | 84,151 | 7,801,584 | 7,885,735 |
| HHS TOTAL | 161,277,777 | 158,202,777 | 3,075,000 | 31,222,132 | - | - | 31,222,132 | 161,277,777 | 192,499,909 |
| HHS/CDC | 157,003,521 | 153,928,521 | 3,075,000 | 31,222,132 | - | - | 31,222,132 | 157,003,521 | 188,225,653 |
| HHS/HRSA | 4,274,256 | 4,274,256 | - | - | - | - | - | 4,274,256 | 4,274,256 |
| PEACE CORPS TOTAL | 2,542,955 | 2,542,955 | - | 549,266 | - | - | 549,266 | 2,542,955 | 3,092,221 |
| STATE TOTAL | 7,921,716 | 7,921,716 | - | - | - | - | - | 7,921,716 | 7,921,716 |
| State (State, S/EUR, S/EAP, and S/WHA) | 2,313,716 | 2,313,716 | - | - | - | - | - | 2,313,716 | 2,313,716 |
| State/AF | 608,000 | 608,000 | - | - | - | - | - | 608,000 | 608,000 |
| State/SGAC | 5,000,000 | 5,000,000 | - | - | - | - | - | 5,000,000 | 5,000,000 |
| USAID TOTAL | 197,164,839 | 197,164,839 | - | 8,799,268 | 1,500,000 | 1,500,000 | 8,799,268 | 197,164,839 | 207,464,107 |
| USAID, non-WCF | 112,573,397 | 112,573,397 | - | 8,799,268 | 1,500,000 | 1,500,000 | 8,799,268 | 112,573,397 | 122,872,665 |
| USAID, WCF | 84,591,442 | 84,591,442 | - | - | - | - | - | 84,591,442 | 84,591,442 |
| TOTAL | 376,708,871 | 373,633,871 | 3,075,000 | 40,654,817 | 1,500,000 | 1,500,000 | 40,654,817 | 376,708,871 | 418,863,688 |
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| Marantina | Total Central Applied Pipeline | Total Bilateral Applied Pipeline | Total Bilateral - New Funding | Total COP 20 Budget |
|---|--------------------------------|----------------------------------|-------------------------------|------------------------|
| Mozambique TOTAL | 1,500,000 | 40,654,817 | 376,708,871 | 418,863,68 |
| of which, Cervical Cancer | 1,300,000 | 40,034,817 | 5,500,000 | 5,500,00 |
| of which, COP19 Performance | | | 48,000,000 | 48,000,00 |
| of which, Core Program | - | 37,194,983 | 258,505,017 | 295,700,00 |
| of which, DREAMS | - | - | 35,000,000 | 35,000,00 |
| of which, FBO Surge | - | - | 163,688 | 163,68 |
| of which, HKID Requirement | - | - | 13,500,000 | 13,500,00 |
| of which, KPIF | 1,500,000 | - | | 1,500,00 |
| of which, One-time Conditional Funding | - | - | 5,000,000 | 5,000,00 |
| of which, VMMC | - | 3,459,834 | 11,040,166 | 14,500,00 |
| DOD TOTAL | | 84,151 | 7,801,584 | 7,885,73 |
| | | 34,131 | 38,923 | 38,92 |
| of which, Cervical Cancer of which, COP19 Performance | - | | 441,178 | 441,1 |
| of which, Core Program | - | 84,151 | 5,165,142 | 5,249,2 |
| of which, VMMC | - | | 2,156,341 | 2,156,3 |
| HHS TOTAL | | 31,222,132 | 161,277,777 | 192,499,9 |
| HHS/CDC | - | 31,222,132 | 157,003,521 | 188,225,6 |
| of which, Cervical Cancer | - | A 0 | 3,721,754 | 3,721,7 |
| of which, COP19 Performance | _ | | 25,751,427 | 25,751,4 |
| of which, Core Program | | 31,222,132 | 109,114,405 | 140,336,5 |
| of which, DREAMS | • | | 13,262,924 | 13,262,9 |
| of which, VMMC | | - | 5,153,011 | 5,153,0 |
| HHS/HRSA | | - | 4,274,256 | 4,274,2 |
| of which, Cervical Cancer | 6). | - | 750,000 | 750,0 |
| of which, COP19 Performance | | - | 592,833 | 592,8 |
| of which, Core Program | | - | 2,731,423 | 2,731,4 |
| of which, VMMC | | | 200,000 | 200,0 |
| PEACE CORPS TOTAL | | 549,266 | 2,542,955 | 3,092,2 |
| of which, Core Program | | 549,266 | 2,542,955 | 3,092,2 |
| STATE TOTAL | | • | 7,921,716 | 7,921,7 |
| State (State, S/EUR, S/EAP, and S/WHA) | • | - | 2,313,716 | 2,313,7 |
| of which, Core Program | - | - | 1,997,760 315,956 | 1,997,7 315,9 |
| of which, DREAMS State/AF | - | - | 608,000 | 608,0 |
| of which, Core Program | | - | 608,000 | 608,0 |
| State/SGAC | | | 5,000,000 | 5,000,0 |
| of which, One-time Conditional Funding | - | - | 5,000,000 | 5,000,0 |
| USAID TOTAL | 1,500,000 | 8,799,268 | 197,164,839 | 207,464,1 |
| USAID, non-WCF | 1,500,000 | 8,799,268 | 112,573,397 | 122,872,6 |
| of which, Cervical Cancer | = | - | 989,323 | 989,3 |
| of which, COP19 Performance | - | - | 12,498,853 | 12,498,8 |
| of which, Core Program | - | 5,339,434 | 62,138,979 | 67,478,4 |
| of which, DREAMS | - | - | 21,421,120 | 21,421,1 |
| of which, FBO Surge | - | - | 163,688 | 163,6 |
| of which, HKID Requirement | - | - | 13,500,000 | 13,500,0 |
| of which, KPIF | 1,500,000 | - | - | 1,500,0 |
| of which, VMMC | - | 3,459,834 | 1,861,434 | 5,321,2 |
| USAID, WCF | - | - | 84,591,442 | 84,591,4 |
| of which, COP19 Performance | - | - | 8,715,709 | 8,715,7 |
| of which, Core Program | - | - | 74,206,353 | 74,206,3 |
| of which, VMMC | - | - | 1,669,380 | 1,669,3 |
| TOTAL | 1,500,000 | 40,654,817 | 376,708,871 | 418,863,6 |

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GHP-State Funds: Upon the clearance of a FY 2020 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 2021 at approved COP/ROP 2020 partner budget levels to achieve FY 2021 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Upon receipt from S/GAC, agency headquarters will move the funds to the country platform via each agency's internal process.

CDC GAP Funds: With the receipt of this signed memo, CDC is approved to use CDC GAP funds, as indicated in the above funding chart. Funds are to be made available for outlay in FY 2021 at approved COP/ROP 2020 partner budget levels to achieve FY 2021 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. With this approval, CDC GAP funding may be made available to country teams per CDC internal processes and following agency requirements.

Applied Pipeline Funds: With the receipt of this signed memo, respective agencies are approved to use applied pipeline funds as indicated in the above funding chart. Funds are to be made available for outlay in FY 2021 at approved COP/ROP 2020 partner budget levels to achieve FY 2021 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/ROP 2020 total budget level and documented within COP/ROP 2020 partner budgets are not to be executed or outlayed without written approval from S/GAC.

Earmarks: The OU has planned for programming for FY2020, FY2019 and/or FY2017 funding that it considered to meet a number of earmarks, as indicated in the table below. The amounts programmed during COP may exceed the original controls assigned to the OU. Upon approval of this memo, the amounts below will become the new earmark controls for the OU/Agency. Any changes to the amount of funding programmed for earmark-eligible activities must be approved via an OPU.

| Earmarks | COP20 Funding Level | | |
|--|---------------------|-------------|--|
| | FY20 | Total | |
| Care & Treatment | 273,082,310 | 273,082,310 | |
| Orphans and Vulnerable Children | 43,250,000 | 43,250,000 | |
| Preventing and Responding to Gender-based Violence | 3,437,967 | 3,437,967 | |
| Water | 866,320 | 866,320 | |

FY 2021 Target Summary

FY 2020 funds are released and COP/ROP 2020 applied pipeline is approved to achieve the following results in FY 2021. Pending Congressional AS

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| Mozambique | | | | | SNU Prioritiza | ations | | |
|--|----------------|-------------|----------|------------|----------------|-----------|-----------|-----------|
| HTS_INDEX | Mozambique | | | Scale-Up: | | | Centrally | |
| HTS_INDEX | | | Attained | Saturation | Aggressive | Sustained | Supported | Total * |
| Total 992 775,201 54,212 837,361 | | <15 | 239 | | · | | 31,644 | 348,682 |
| HTS_TST | HTS_INDEX | | | | | | | |
| HTS_TST 15+ | | | | - | <u>'</u> | - | | |
| Total | | | | | • | | | |
| Color Colo | HTS_TST | | | | | | | |
| HTS_TST_POS | | | | - | | - | | |
| Total | | | | | | | | |
| TX_NEW | HTS_TST_POS | | | | | | | |
| TX_NEW | | | | - | | - | | |
| Total 627 | | | | | • | | , , | |
| TX_CURR | TX_NEW | | | | | | | |
| TX_CURR | | | | • | | - | | |
| Total 30,629 1,726,643 69,146 1,850,466 | | | | | • | | | |
| TX_PVLS | TX_CURR | | | | | | | |
| TX_PVLS 15+ Total 28,477 Total 1,444,322 29,519 543,883 1,656,918 CXCA_SCRN Total (15+) 7,364 264,221 273,712 OVC_SERV 18+ Total 482,290 482,290 OVC_HIVSTAT 18+ Total 18 18 OVC_HIVSTAT 482,283 482,283 PMTCT_STAT 15+ 5,365 1,169 1,736 13,454 PMTCT_STAT 15+ 5,365 1,401,724 142,314 1,550,478 PMTCT_STAT_POS 15+ 991 115,187 20,314 136,611 PMTCT_STAT_POS 15+ 991 115,187 20,314 136,611 PMTCT_ART 15+ 992 116,590 20,38 138,023 PMTCT_ART 15+ 980 113,188 20,233 134,527 PMTCT_EID Total 981 114,590 20,237 135,938 PMTCT_EID Total 942 112,472 113,531 FP_PREV Total 942 112,472 133,734 FP_PREV Total | | | | - | | - | | |
| Total 29,519 1,545,873 60,345 1,656,918 | | | · · | | | | | |
| CXCA_SCRN Total (15+) 7,364 264,221 273,712 OVC_SERV 48 482,290 482,290 OVC_HIVSTAT 18 18 18 OVC_HIVSTAT Total (-18) 482,283 482,283 PMTCT_STAT 215 9 11,669 1,736 13,454 PMTCT_STAT 15+ 5,365 1,401,724 142,314 1,550,478 PMTCT_STAT_POS 15+ 5,365 1,401,724 142,314 1,550,478 PMTCT_STAT_POS 15+ 991 115,187 20,314 136,611 PMTCT_ART 15+ 991 115,187 20,318 138,023 415 1 1,403 4 1,411 PMTCT_ART 15+ 980 113,188 20,233 134,527 Total 981 114,590 20,237 135,432 PMTCT_BID Total 942 112,472 113,531 PP_PREV Total 1,224 32,744 34,462 | TX_PVLS | | | | | | | |
| OVC_SERV 18+ | | | | • | | | 60,345 | 1,656,918 |
| OVC_SERV 18+ Total 1.8 482,308 482,308 OVC_HINSTAT Total (cl.8) 482,283 1,736 13,454 PMTCT_STAT 15+ 5,365 1,401,724 142,314 1,550,478 PMTCT_STAT 15+ 5,365 1,401,724 142,314 1,550,478 PMTCT_STAT_POS 15+ 991 115,187 20,314 136,611 PMTCT_STAT_POS 15+ 991 115,187 20,314 136,611 PMTCT_STAT_POS 15+ 991 116,590 20,318 138,023 15+ 15 1 1,402 4 1,411 PMTCT_ART 15+ 980 113,188 20,233 134,527 Total 981 112,472 20,237 135,938 PMTCT_EID Total 942 112,472 20,237 135,938 PPP_PREV 15+ 10,850 133,734 169 15- 15 110,850 133,734 169 YMMC_CIRC | CXCA_SCRN | Total (15+) | 7,364 | | • | | | |
| Total - 482,308 - 482,238 OVC_HIVSTAT Total (<15) | | <18 | | | 482,290 | | | 482,290 |
| OVC_HIVSTAT Total (<18) 482,283 482,283 PMTCT_STAT 155 9 11,669 1,736 13,454 PMTCT_STAT 155 5,374 1,413,393 144,050 1,563,932 PMTCT_STAT_POS 155 1 1,403 4 1,411 PMTCT_STAT_POS 155 1 1,403 4 1,411 PMTCT_STAT_POS 155 1 1,6590 20,318 138,023 <15 | OVC_SERV | 18+ | | | | V | | |
| Color | | Total | - | - | 482,308 | - | - | 482,308 |
| PMTCT_STAT | OVC_HIVSTAT | Total (<18) | | | 482,283 | | | 482,283 |
| Total 5,374 1,413,393 144,050 1,563,932 | | <15 | 9 | | 11,669 | | 1,736 | 13,454 |
| PMTCT_STAT_POS | PMTCT_STAT | | 5,365 | | 1,401,724 | | 142,314 | 1,550,478 |
| PMTCT_STAT_POS | | Total | 5,374 | - | 1,413,393 | - | 144,050 | 1,563,932 |
| Total 992 116,590 20,318 138,023 | | | | | | | | |
| MITCT_ART 15+ 980 113,188 20,233 134,527 | PMTCT_STAT_POS | | | | | | | |
| PMTCT_ART 15+ 980 113,188 20,233 134,527 Total 981 114,590 20,237 135,938 PMTCT_EID Total 942 112,472 113,531 PP_REV 15+ 10,850 133,734 Lose of total 1,724 32,744 34,468 KP_PREV Total 1,724 32,744 34,468 KP_MAT Total 1 - - VMMC_CIRC Total 114,021 131,547 HTS_SELF 15+ - - - HTS_SELF 15+ - - - - PrEP_NEW Total 1,812 48,020 54,834 - | | | | - | | - | - | |
| Total 981 | | | | | | | | - |
| PMTCT_EID | PMTCT_ART | | | | | | | |
| PP_PREV | | | | | | - | 20,237 | |
| PP_PREV | PMTCT_EID | | 942 | 6 | 112,472 | | | • |
| Total - 110,850 - 133,903 | 22 225/ | | | | 440.050 | | | |
| KP_PREV Total 1,724 32,744 34,468 KP_MAT Total - | PP_PREV | | | | | | | |
| KP_MAT Total - VMMC_CIRC Total 114,021 131,547 - <15 | I/D DDEL/ | | 1 724 | - | | - | - | |
| VMMC_CIRC Total 114,021 131,547 HTS_SELF 15+ - - Total - - - - PrEP_NEW Total 1,812 48,020 54,834 PrEP_CURR Total 1,812 49,693 56,507 TB_STAT (N) 15+ 42 6,944 7,016 TB_STAT (N) 15+ 762 88,144 90,375 Total 804 - 95,088 - - 97,391 TB_ART (N) 15+ 384 42,879 43,959 43,959 TB_ART (N) 15+ 384 42,879 43,959 43,959 TB_PREV (N) 15+ 22,131 1,176,391 1,215,750 1,215,750 TB_PREV (N) 15+ 22,131 1,176,391 1,215,750 1,28,973 TX_TB (D) 15+ 30,153 1,645,234 1,699,219 TX_TB (D) 15+ 30,153 1,645,234 1,699,219 Tot | | | 1,724 | | 32,744 | | | 34,468 |
| HTS_SELF | | | | | 114 021 | | | 121 547 |
| HTS_SELF 15+ - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - <th< td=""><td>VIVIIVIC_CIRC</td><td></td><td></td><td></td><td>114,021</td><td></td><td></td><td>131,347</td></th<> | VIVIIVIC_CIRC | | | | 114,021 | | | 131,347 |
| PrEP_NEW Total 1,812 48,020 54,834 PrEP_CURR Total 1,812 49,693 56,507 C15 42 6,944 7,016 TB_STAT (N) 15+ 762 88,144 90,375 Total 804 - 95,088 - - 97,391 TB_ART (N) 15+ 384 42,879 43,959 Total 405 - 46,004 - - 47,117 TB_PREV (N) 15+ 22,131 1,176,391 1,215,750 1,215,750 Total 22,904 - 1,258,370 - 1,298,973 TX_TB (D) 15+ 30,153 1,645,234 1,699,219 Total 31,256 - 1,761,899 - - 1,817,693 GEND_GBV Total 127 58,232 58,359 | HTC CELE | | | | | | | - |
| PrEP_NEW Total 1,812 48,020 54,834 PrEP_CURR Total 1,812 49,693 56,507 C15 42 6,944 7,016 TB_STAT (N) 15+ 762 88,144 90,375 Total 804 - 95,088 - - 97,391 TB_ART (N) 15+ 384 42,879 43,959 Total 405 - 46,004 - - 47,117 TB_PREV (N) 15+ 22,131 1,176,391 1,215,750 33,223 TD Total 22,904 - 1,258,370 - - 1,298,973 TX_TB (D) 15+ 30,153 1,645,234 1,699,219 1,699,219 Total 31,256 - 1,761,899 - - 1,817,693 GEND_GBV Total 127 58,232 58,359 | 1113_3LLF | | | _ | _ | _ | | |
| PrEP_CURR Total 1,812 49,693 56,507 TB_STAT (N) 15+ 42 6,944 7,016 TB_STAT (N) 15+ 762 88,144 90,375 Total 804 - 95,088 - - 97,391 TB_ART (N) 15+ 384 42,879 43,959 Total 405 - 46,004 - - 47,117 STB_PREV (N) 15+ 22,131 1,176,391 1,215,750 1,215,750 Total 22,904 - 1,258,370 - - 1,298,973 TX_TB (D) 15+ 30,153 1,645,234 1,699,219 1,699,219 Total 31,256 - 1,761,899 - - 1,817,693 GEND_GBV Total 127 58,232 58,359 | PrED NEW | | 1 812 | | | | _ | 54 834 |
| TB_STAT (N) 15+ 762 88,144 90,375 Total 804 - 95,088 - 97,391 3,125 3,158 TB_ART (N) 15+ 384 42,879 43,959 Total 405 - 46,004 - 47,117 <15 773 81,979 83,223 TB_PREV (N) 15+ 22,131 1,176,391 15+ 22,904 - 1,258,370 - 101 116,665 118,474 TX_TB (D) 15+ 30,153 1,645,234 1,699,219 Total 31,256 - 1,761,899 - 1,817,693 GEND_GBV Total 127 58,232 58,359 | _ | | | | • | | | |
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| | | Total | 31,256 | - | | | - | 1,817,693 |
| | | | | | | | | 58,359 |

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

COP 2019 Performance Funds:

All partners must be managed throughout the implementation year as indicated in the COP guidance. Overall performance including activities tied to COP19 performance will be reviewed at Q3FY20 to determine if the programs are on track to access all funds at the start of COP20. This communication will come through the S/GAC Chair and POART process.

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Faith and Communities Imitative (FCI) / Faith Based Organization (FBO) Surge Programming (applicable to Malawi, Eswatini, Lesotho, Haiti, Botswana, Zimbabwe, Zambia, Uganda, Tanzania, Kenya):

In light of the delays in FCI programming associated with delayed arrival of funds for FCI and/or new subs for FCI funding received in COP19, FCI funds from COP19 will be protected and can be outlayed in COP20, in excess of the new COP20 total budget amount indicated in this memo, without being considered an over-outlay. Activities related to FCI/FBO surge activities must be fully implemented in COP20/FY21.

Partner Management and Stakeholder Engagement:

Agreements made during COP/ROP 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 this memo, approved SDS, and budgets and targets as finalized in PEPFAR systems. Any partner with EITHER (1) < 15% of target achievement at 3 months or (2) less than 40% of target achievement at 6 months must have a complete review of performance data (including trends in performance) and expenditures to date by program area, implement remediation, and conduct intensive follow-up. In the HIV treatment program, most clients are continuing on treatment year after year and current on treatment (TX_CURR) performance should between 98% and 100% of the target. This can be adjusted in country context where HIV treatment services are still scaling up and the treatment new target is greater than 10% of treatment current. OVC programs are also similar in that there are clients continuing services from the previous year; if the IP is less than 80% of their target at Q2 performance review should be triggered. These elements (i.e. review, remediation, and follow-up) should be incorporated into the existing IP work plans. A second quarter of consistently poor performance by the IP should also result in implementation of a documented Performance Improvement Plan (PIP) or Correction Action Plan (CAP), in accordance with implementing agency policy. PIP indicators should reflect the core issue. If the issue is linkage of test positive to treatment the indicator measured should be test positive to new in treatment of greater than 85%. If the issue is retention it should be net new on treatment equal to 90% of new on treatment. After two quarters of intensive oversight and remediation for underperformance, partners should be close to full achievement of targets expected at quarter three. With a third quarter of consistently poor performance by the IP, implementing agencies should notify S/GAC the options the agency is implementing to address partner nonperformance, including options for a shift to new partners. 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/ROP implementation. Core to this critical engagement is the sharing of and discussion surrounding quarterly results and achievement and findings from community-led monitoring. This continued engagement will ensure all parties' understanding of Mozambique's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.