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AMBASSADOR THOMAS L. VAJDA, BURMA
AMBASSADOR W. PATRICK MURPHY, CAMBODIA
CHARGÉ D'AFFAIRES DANIEL SMITH, INDIA
AMBASSADOR SUNG Y. KIM, INDONESIA
AMBASSADOR WILLIAM H. MOSER, KAZAKHSTAN
AMBASSADOR DONALD LU, KYRGYZ REPUBLIC
AMBASSADOR PETER M. HAYMOND, LAO PDR
AMBASSADOR RANDY W. BERRY, NEPAL
AMBASSADOR ERIN ELIZABETH McKEE, PAPUA NEW GUINEA
CHARGÉ D'AFFAIRES JOHN C. LAW, PHILIPPINES
AMBASSADOR JOHN MARK POMMERSHEIM, TAJIKISTAN
CHARGÉ D'AFFAIRES MICHAEL G. HEATH, THAILAND

SUBJECT: PEPFAR Asia Region Operational Plan 2021 Approval

This memo represents the successful completion of the PEPFAR Asia Regional Operational Plan (ROP) 2021 planning, development and submission. The PEPFAR Asia Region, together with the partner governments, civil society and multilateral partners, has planned and submitted a ROP 2021 in alignment with the directives from the ROP 2021 planning level letter, data-driven decisions made during the virtual pre-ROP retreat, and agreements made during the planning meeting.

This memo serves as the approval for the PEPFAR Asia Region Operational Plan 2021 with a total approved budget of $132,689,963 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:

Table 1: Overall ROP 2021 Budget Table

	New Funding (All Accounts)	Pipeline	Total Budget FY 2022 Implementation
TOTAL	91,867,042	40,831,921	132,698,963
Bilateral	91,867,042	40,831,921	132,698,963

The total FY 2022 outlay for ROP 2021 implementation shall not exceed the total approved ROP 2021 budget of $132,689,963 without additional written approval. Any prior year funds that are not included within this ROP 2021 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 2022 without additional written approval. The new FY 2021 funding and prior year funds approved within this memo as a part of the total ROP 2021 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 2022 must be submitted to and approved by S/GAC.

Approved funding will be made available to agencies for allocation to country platforms to implement ROP 2021 programming and priorities as outlined below and in the appendix.

Background

This approval is based upon: the discussions that occurred between the country teams, agency headquarters, S/GAC, local and global stakeholders and partners during the April 19-21, 2021 virtual planning meetings and participants in the virtual approval meeting; the final ROP 2021 submission, including all data submitted via official PEPFAR systems or within supplemental documents.

Program Summary

Funding and targets for Asia Regional's Operational Plan 2021 will support PEPFAR Asia Regional's vision in partnership with the 12 governments and people throughout the Asia Regional Program, to work towards epidemic control by targeting testing to efficiently identify people living with HIV (PLHIV), with targeted prevention activities to key populations (KPs) and their networks, ensuring all newly diagnosed PLHIV are immediately linked to treatment, and all PLHIV are retained on treatment and remain virally suppressed. ROP 2021 will work to maintain epidemic control by the end of FY 2022, working toward the ultimate goal that 651,410 are on life-saving treatment by the end of FY 2022. The program for ROP 2021 will focus intensely on enrolling an additional 70,568 PLHIV on treatment in FY2022 and ensuring viral load suppression in 522,565 clients across the region.

The 12 countries within the PEPFAR Asia Regional Program were categorized into three tiers in earlier ROP cycles based upon prior performance and progress toward epidemic control. The three tiers are: 1. *Sustain the Gains* (Burma, Cambodia, Kyrgyz Republic, Nepal, Tajikistan, Thailand) 2. *Accelerate and Achieve* (India, Lao PDR, Philippines), and 3. *Maintenance/Protect the Investment* (Kazakhstan, Indonesia, Papua New Guinea).

Tier 1: Sustain the Gains
Burma, Cambodia, Kyrgyz Republic, Nepal, Tajikistan, and Thailand will work aggressively to close remaining gaps, sustain epidemic control, share lessons learned, and provide leadership in the region including continuing to work with UNAIDS and the Global Fund to Fight Against

AIDS, Tuberculosis, and Malaria (GFATM) to develop a sustainability plan. Countries will scale-up recency, PrEP, and case-based surveillance (CBS) to ensure case finding. They will support and/or institutionalize civil society organizations (CSOs) to become social enterprises in order to deliver quality HIV/AIDS services, including KP-friendly services, new KP-led CSO sustainability activities, ensure efficient, effective, safe and ethical case finding approaches, and empower regional KP networks and CSO technical assistance (TA) providers. Burma will focus on continuing lifesaving assistance, maintaining advances achieved in past years, and adapting PEPFAR programming to the developing needs of PLHIV in the country. Cambodia will sustain the gains made towards epidemic control and intensify efforts to ensure program sustainability and country ownership. The PEPFAR program in Cambodia will continue with CBS expansion, utilize recency data to respond to outbreaks, refine national case-finding strategies, and scale-up of micro-targeted PrEP, Same Day Antiretroviral Treatment (SDART), 6 multi-month dispensing (6MMD), tenofovir, lamivudine, and dolutegravir (TLD), and viral load coverage (VLC).The Kyrgyz Republic will scale up case-finding strategies via mixed-methods and online approaches, accelerate PrEP activities, strengthen CBS for public health decision-making, and support innovative financing solutions for CSOs in social contracting. Nepal will focus on working with stakeholders to close the remaining gaps toward the 90-90-90 goals, address challenges related to treatment interruption and mortality, improve viral load testing coverage, and increase suppression rates. Furthermore, the program will expand TA on PrEP, testing and linkage, SDART, VL testing while working toward sustainability in alignment with Global Fund and the government of Nepal. Tajikistan will strengthen efforts to improve continuity of treatment through client-centered community services, analyze treatment continuity challenges by age, sex, geography and KP, provide support for SDART advocacy, and accelerate progression of MMD and TLD. The PEPFAR program in Tajikistan will also support national expansion of recency testing and scale up high-impact prevention interventions, including PrEP, Medication-Assisted Treatment (MAT) and 3-6 MMD. As Thailand approaches epidemic control, the PEPFAR program will continue to build upon progress of SDART, MMD, expanding index and recency testing by continuing program integration into national HIV surveillance, and TLD implementation. Additionally, PEPFAR will support further sustainability of community-based organizations (CBOs) through social contracting and social enterprise models developed in partnership with key stakeholders while building the regional platform for TA by regional KP networks and CSOs to countries in the region.

Tier 2: Accelerate and Achieve
India, Lao PDR, and the Philippines will strengthen their national systems and services for KP prevention, case management, SDART, 6MMD, and VLC. In ROP21, India will continue the momentum of PrEP implementation activities such as online roll-out and drafting PrEP national guidelines through integrated service delivery sites and virtual platforms. India will mitigate treatment interruption through measures such as tracking and tracing missed appointments, assessing and addressing reasons for loss to follow-up, and virtual platforms. India will continue ongoing expansion of community service delivery and MMD to adapt to the challenges of the COVID-19 pandemic and optimize viral load suppression through tracking and tracing and expand successful strategies piloted in the Northeast. Finally, above site activities in India will center around TLD, pediatric Dolutegravir (DTG), client-centric care, and Community Led Monitoring (CLM). Lao PDR will continue aggressive scale up of SDART and PrEP with a focus on Men Who Have Sex with Men (MSM) and transgender individuals (TG) through the

provision of national policy and continuous quality improvement (CQI) efforts as well as self, index, and recency testing policy and implementation. Additionally, strategy shifts for PEPFAR Laos include instituting community-led monitoring in partnership with the Global Fund and external quality assessments (EQA) to monitor the quality and performance of viral load decentralization. The Philippines will expand PrEP and enhance demand through online and agency initiatives while expanding index testing and social network strategies, providing TA to healthcare workers to increase capacity for partner notification and acceptance and site expansion for increased testing coverage. To support expansion of viral load access coverage, PEPFAR Philippines will conduct a diagnostic network optimization assessment and concentrate on lab testing enhancement and VL literacy. As the program develops, PEPFAR will increase SDART, TLD transition, quality improvement (QI) support, tuberculosis preventive therapy provision, differentiated service delivery, and MMD.

Tier 3: Maintenance/Protect the Investment

The countries will focus on the service delivery, index testing, and ensuring treatment continuity. Kazakhstan will follow the changing epidemic and expand case finding strategies to include HIV self-testing (HIVST) and Enhanced Peer Outreach Approach (EPOA) for MSM with increased focus on linkage to PrEP and harm reduction services. Kazakhstan will also focus on strengthening linkage to and retention in treatment, support key systems components including laboratory and data use, and institutionalize community-based services while maintaining focus on shifting to above-site activities. Indonesia will build on ROP 19 and ROP 20 surge activities, focusing in ROP 21 on strengthening through index testing, HIVST, PrEP, strengthening linkage particularly for MSM and TG, strategic expansion of 6 MMD, working with the Government of Indonesia (GOI) to expand TLD beyond new initiators, expanding viral load (VL) coverage and reducing turnaround time, and above site work to support strategic information, laboratory, and planning and monitoring for key commodities. Papua New Guinea (PNG) will continue activities to ensure saturation along the HIV care continuum including index testing, expanding Test and Start, addressing antiretroviral treatment (ART) continuity and interruption, and increasing VL coverage in the National Capital District (NCD). PNG will also rapidly implement solutions for MMD in coordination with country partners to address supply chain challenges and continue to support implementation of 6MMD and differentiated service delivery models.

During ROP2021, the PEPFAR Asia Regional Program will continue to invest in the geographies with the highest HIV burden among the 12 countries. A few notable changes from ROP20 to ROP21 includes:

- **Case-finding strategy (Kazakhstan):** PEPFAR Kazakhstan will expand their current case finding strategy to adjust to changes in the HIV epidemic. Focus on case-finding among People Who Inject Drugs (PWID) populations will shift to include HIVST and EPOA for MSM populations. This will include MSM-specific demand generation, community-based services, and online distribution for HIVST scale up.
- **Case-finding strategy (Nepal):** PEPFAR Nepal has continued to strengthen their case-finding approach with diverse and high-yield strategies including social network testing, index testing, Online-to-Offline (O2O), and HIVST. EPOA,

Index testing, and O2O provide the highest HIV yield while the COVID-19 restrictions necessitated increased self-testing. In ROP21, the program will focus on higher yield strategies but will also tailor testing modalities to the needs of clients. There will also continue to be a greater emphasis on the provision of TA and an intensified testing focus in the 'new comprehensive program districts' that PEPFAR added in ROP21.

- **Thailand Program Transition Strategy:** As PEPFAR Thailand approaches the 90-90-90 targets and epidemic control, the program continues to develop their transition strategy to an above-site program by refining transition and sustainability criteria in advancing eligible sites from direct service delivery to technical assistance. Additionally, the program and interagency team continue to strengthen Thailand's role as a model and regional hub for KP networks and regional CSOs to support TA resources to other Asia Region KP programs.

- **Cambodia Recency Testing:** PEPFAR Cambodia is solidifying their recency testing strategy and will implement national recency surveillance while linking recency results to index testing database to increase timely response to recent outbreaks of HIV transmission. The program plans to test >95% of newly diagnosed PLHIV for recent infection.

- **Community-Led Monitoring (Region-wide):** Throughout the Asia Region, there will be an increased emphasis on community-led monitoring in collaboration with UNAIDS and the Global Fund that closely follows ROP guidelines with a focus on targeting direct awards and leadership to local civil society organizations. Previously, Asia Region CLM programs were implemented with varying degrees of fidelity.

- **Regional activities**: To promote region-wide sharing of technical expertise, best practices, and common strategies to address common challenges throughout the region, the Asia Region has developed five activities with a regional focus:
    - 1.Establishment and implementation of a Laboratory Community of Practice (COOP) for the Asia Regional Program to support region and country specific priorities such as VL diagnostic network optimization, expansion of recency, among others.
    - 2.Building a Community of Practice for Border Programming Under the Asia Regional Program, including developing a border package of services and standard operating procedures (SOPs).
    - 3.CLM in the Asia Region, including tool development and supporting regional CSOs as TA providers.
    - 4. Enhance regional KP technical assistance and KP CSO capacity, including for community-based and community-led services, to support regional scale up of, for example, KP-led approaches, transgender health services competency, PrEP demand creation, expanded SDART, community-based ART and community-based VL monitoring, and other KP differentiated service delivery through south-to-south exchanges from regional KP networks and regional CSOs.

- 5. Support KP CSO sustainability, including through policy analysis, regional sharing to support capacity building TA for social contracting, blended finance models, and social enterprises.

In addition, across the region, there are a number of key priorities and areas of particular emphasis for ROP 21:

- **Ensuring a do no harm approach** is of paramount importance in all aspects of PEPFAR's programming. For HIV testing in particular, PEPFAR programs in the Asia Region will maintain a focus on HIV testing services that ensure adherence to the World Health Organization (WHO) guidance focused on (consent, confidentiality, counseling, correct results, and connection (5Cs), including safe and ethical index testing. Importantly, where it is not safe to implement testing activities due to COVID or other circumstances, these activities should not be conducted until it becomes safe to do so, and partner expenditures should be reduced accordingly.
- **MMD**: Increased MMD will be a key focus, especially in low-coverage countries (e.g., Indonesia, Laos, Nepal), ultimately aiming for high coverage of 6MMD throughout the region. PEPFAR programs will work to accelerate 3 and 6MMD coverage by transitioning clients from 3 to 6MMD in countries with high 3MMD coverage that permit 6MMD, advocating and coordinating with partners to ensure sufficient stock of antiretroviral medications (ARVs) at national and site level, conducting routine monitoring to prevent stockout, training providers on MMD guidelines, establishing MMD focal person at the facility to review patient files and identify clients not yet on 3 or 6MMD, and improving treatment literacy among clients/create demand for MMD. In countries where policy does not currently permit 6 or even 3MMD (Indonesia), countries in the Asia Region will continue to engage MOHs to adopt MMD policy in national treatment (TX) guidelines.
- **HIV Treatment:** The region experiences challenges with poor treatment growth and challenges with continuity of treatment in some countries. Although site additions in FY20 may mask certain patterns, monitoring continuity of treatment by age, sex, geography, site, and KP sub-group to determine those groups at greatest risk of treatment interruption will be practiced across the region. Routine root cause and loss analysis should be conducted for all countries in Asia to improve outcomes.
- **SDART:** Given the loss in clients diagnosed but not yet started on ART, each country will document and address the key barriers to rapid/same day initiation of ART. All countries should track time to initiation of ART data for all clients and develop interventions to improve uptake of same day/rapid ART.
- **Staffing:** In ROP21, the Asia Region will fill two existing positions to support the coordination and regional TA needs of 12 countries.
  - In order to operate effectively as one Operating Unit and balance the requests of country teams and headquarters, PARCU proposed the addition of a Deputy PEPFAR Coordinator position. This position will fill

> critical higher-level administrative gaps, including supporting reprogramming (OPUs), POART calls, and Technical Exchange Groups.
> - To build the strategic information (SI) capacity of the Central Asia countries, a vacant SI technical officer will be filled in Kazakhstan. This position will support the Central Asian countries as well as regional SI needs across Asia.

American Rescue Plan Act of 2021 Summary Description

This memo approves $5,461,345 in American Rescue Plan Act (ARPA) funds in the Economic Support Fund (ESF) account to be implemented for activities during ROP20 and ROP21. Of the total $5,461,345 in ARPA funds, $3,995,807 is expected to be implemented in ROP2021; these funds are included in the other tables found in this memo. The remaining $1,465,538 is expected to be implemented in ROP 2020. The table below shows the estimated breakout of outlays in ROP 2021 versus ROP 2020 by implementing agency and operational division.

Table 2: American Rescue Plan Act of 2021 Funding by Agency and ROP Year

Agency/OPDIV	ARPA Funds Programmed in ROP21 FAST for ROP21 Outlay	ARPA Funds To be Added to ROP20 for ROP20 Outlay	Total ARPA Funds
TOTAL	$3,995,807	$1,465,538	$5,461,345
DOD	$0	$0	$0
HHS/CDC	$1,084,757	$122,036	$1,206,793
HHS/HRSA	$0	$284,752	$284,752
PC	$0	$0	$0
USAID	$2,911,050	$1,058,750	$3,969,800
USAID/WCF	$0	$0	$0

Any ARPA funds not outlayed in ROP 20 will be allowed to outlay in ROP 21 and this will be accounted for in the End of Fiscal Year exercise in the Fall of 2021. The entire ARPA amount must be obligated by September 30, 2022 and should, except in extraordinary circumstances, be outlayed during ROP 21.

These ARPA funds are being provided specifically to address the intersection of HIV and COVID to prevent, prepare for, and respond to coronavirus (including prevention of COVID-19 infection, illness, and death among PEPFAR beneficiaries and staff and mitigate COVID-19 impact on PEPFAR programs and beneficiaries and support PEPFAR program recovery from the impacts of coronavirus). Over the course of ROP 20 and ROP 21, the ARPA funds will support:

> **Region-wide:**
> - Supply personal protective equipment (PPE) for health care providers at ART sites and CSO outreach workers to ensure continuation of essential HIV services and minimize impact.

- Strengthen infection, prevention and control (IPC) practices at HIV healthcare facilities through activities such as IPC needs assessment, development of facility level COVID IPC procedures, airborne infection control units (AICU), and COVID-19 testing for staff.
- Promote vaccines access, generate demand, and address vaccine hesitancy among health care workers (HCW), staff, clients, and key populations.
- Support decentralized drug distribution activities and home delivery of ART to PLHIV who cannot access medication due to lockdowns and mobility restrictions.

Burma:
- Capacity building and support for case finding, prevention, treatment, and public health education on COVID-19.

Cambodia
- Strengthen IPC practices, including COVID specific measures, at HIV healthcare facilities through activities such as IPC needs assessment, development of facility level COVID IPC procedures, and AICU.

India
- Support purchase of buprenorphine in hard-hit geographies to cover the gap in critical MAT services and subsequent access to broader HIV prevention, testing and linkage services.
- Deploy innovative mechanisms to support multi-month dispensing of ART through strategies such as courier services, buddy systems, and home delivery.

Indonesia
- Support COVID-19 testing for community- and facility-based implementing partners in HIV service delivery settings
- Ensure treatment continuation amidst facility closures and travel restrictions through home delivery of ARVs for HIV treatment.
- Enhance laboratory capacity for conducting and processing HIV, tuberculosis (TB) and COVID-19 diagnostic services.

Kazakhstan
- Continue case-finding among partners of PLHIV through self-test kits distribution, online risk assessment, and counseling on prevention strategies.
- Supply critical medical devices for AIDS Centers to support diagnosis and treatment of COVID-19 in the PLHIV community.
- Update electronic HIV Case Management System to include new module for COVID-19 case surveillance.

Kyrgyz Republic
- Strengthen clinical management to improve distance learning/mentorship platforms and processes on COVID-19 diagnostic.
- Fund logistic and commodity costs to meet increased demand for services such as self-testing and PrEP.

- Provide high quality of COVID-19 laboratory diagnostic testing across the country on systematic bases and ensuring quality of all diagnostic assays for COVID-19 diagnostics.

Lao PDR
- Quality Improvement activities to increase coverage of COVID-19 vaccine and monitor side effects among PLHIV in PEPFAR-supported sites.
- Develop manual on management of PLHIV during COVID-19 as a guidance for hospitals and health care workers on how to set up a mitigation system for COVID-19 and how to monitor PLHIV to ensure continuity of treatment.

Nepal
- Conduct technical sessions on COVID-19 case management and HIV in selected ART centers (20 sites/quarterly) to share latest advancements and updates on COVID-19.
- Psychosocial counselling sessions series for implementing partner (IP) staff, service providers and selected beneficiaries, provided by psychosocial experts to better equip service providers to counsel beneficiaries, including those subjected to gender-based violence (GBV), and to maintain and improve staff resiliency and prevent burnout.
- Mitigation activities such as providing back-up human resource support to viral load testing labs continuing to conduct COVID-19 testing but that are also experiencing a shortage of human resources to provide HIV services.

Papua New Guinea
- Strengthen dual testing for VL and COVID using GeneXpert platform.
- Operationalize virtual platforms to support clinic level mentoring.

Philippines
- Provision of telemedicine processes/workflows and logistics (stable internet connection and computers) to allow KPs to access teleconsultations at their facilities.

Tajikistan
- Online trainings for HIV services providers and patients on COVID-19 vaccination.
- Support for planning and implementation of vaccination for PLHIV and their families.

Thailand
- Development of telehealth for HIV care during COVID-19 manual

Recency

The implementation of the recency activities has also been significantly delayed by COVID. Accordingly, any remaining recency funds at the end of ROP20 will be allowed to carry over into ROP21. After exact amounts of carryover are determined during the End of Fiscal Year process in fall of 2021, ROP 21 envelopes will be updated to account for this carryover.

Funding Summary

All ROP 2021 funding summarized in the charts below is approved at the agency and account levels as indicated. <u>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.</u>

Table 3: ROP 2021 Budget Table by Agency - Bilateral

	Total	of which, Bilateral								Applied Pipeline	Total COP21 Budget (Bilateral + Central)
		Total	New Funding					FY 2020	FY 2019		
			FY 2021					GHP-State	GHP-State		
			Total	GHP-State	GHP-USAID	GAP	ESF				
TOTAL	132,698,963	91,867,042	91,867,042	82,470,927	-	5,400,308	3,995,807	-	-	40,831,921	132,698,963
DOD Total	1,088,045	1,000,000	1,000,000	1,000,000	-	-	-	-	-	88,045	1,088,045
DOD	1,088,045	1,000,000	1,000,000	1,000,000	-	-	-	-	-	88,045	1,088,045
HHS Total	44,589,380	33,407,257	33,407,257	26,922,192	-	5,400,308	1,084,757	-	-	11,182,123	44,589,380
HHS/CDC	41,840,743	31,607,257	31,607,257	25,122,192	-	5,400,308	1,084,757	-	-	10,233,486	41,840,743
HHS/HRSA	2,748,637	1,800,000	1,800,000	1,800,000	-	-	-	-	-	948,637	2,748,637
STATE Total	722,734	722,734	722,734	722,734	-	-	-	-	-	-	722,734
State	83,486	83,486	83,486	83,486	-	-	-	-	-	-	83,486
State/EAP	639,248	639,248	639,248	639,248	-	-	-	-	-	-	639,248
USAID Total	86,298,804	56,737,051	56,737,051	53,826,001	-	-	2,911,050	-	-	29,561,753	86,298,804
USAID, non-WCF	83,385,223	55,448,695	55,448,695	52,537,645	-	-	2,911,050	-	-	27,936,528	83,385,223
USAID/WCF	2,913,581	1,288,356	1,288,356	1,288,356	-	-	-	-	-	1,625,225	2,913,581

1/Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2022.
2/Economic Support Fund (ESF) funding is authorized in the American Rescue Plan Act of 2021 and must be used for a combined HIV and COVID purpose.

Table 4: ROP 2021 Budget Table by Agency - Central

	Total	of which, Central								Applied Pipeline	Total COP21 Budget (Bilateral + Central)
		Total	New Funding					FY 2020	FY 2019		
			FY 2021					GHP-State	GHP-State		
			Total	GHP-State	GHP-USAID	GAP	ESF				
TOTAL	-	-	-	-	-	-	-	-	-	-	132,698,963
DOD Total	-	-	-	-	-	-	-	-	-	-	1,088,045
DOD	-	-	-	-	-	-	-	-	-	-	1,088,045
HHS Total	-	-	-	-	-	-	-	-	-	-	44,589,380
HHS/CDC	-	-	-	-	-	-	-	-	-	-	41,840,743
HHS/HRSA	-	-	-	-	-	-	-	-	-	-	2,748,637
STATE Total	-	-	-	-	-	-	-	-	-	-	722,734
State	-	-	-	-	-	-	-	-	-	-	83,486
State/EAP	-	-	-	-	-	-	-	-	-	-	639,248
USAID Total	-	-	-	-	-	-	-	-	-	-	86,298,804
USAID, non-WCF	-	-	-	-	-	-	-	-	-	-	83,385,223
USAID/WCF	-	-	-	-	-	-	-	-	-	-	2,913,581

1/Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2022.
2/Economic Support Fund (ESF) funding is authorized in the American Rescue Plan Act of 2021 and must be used for a combined HIV and COVID purpose.

GHP-State Funds: Upon the clearance of a FY 2021 PEPFAR GHP-State Congressional Notification (CN), funds will be made available for transfer to agency HQs as indicated in the above chart. <u>Funds are made available for outlay in FY 2022 at approved ROP 2021 partner budget levels to achieve FY 2022 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix.</u> 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 2022 at approved COP/ROP 2021 partner budget levels to achieve FY 2022 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.

GHP-USAID Funds: With the receipt of this signed memo, USAID is approved to use GHP-USAID funds, as indicated in the above funding chart. <u>Funds are to be made available for outlay in FY 2022 at approved ROP 2021 partner budget levels to achieve FY 2022 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix.</u> With this approval, GHP-USAID funding may be made available to country teams per USAID internal processes and following agency requirements.

ARP ESF Funds: ESF funds must have both an HIV and COVID related purpose as laid out in relevant S/GAC guidance. Upon the clearance of a FY 2021 PEPFAR ESF Congressional Notification (CN), funds will be made available for transfer to agency HQs as indicated in the above chart. <u>Funds are made available for outlay in FY 2022 at approved ROP 2021 partner budget levels to achieve FY 2022 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix</u>. Upon receipt, agency headquarters will move the funds to the country platform via each agency's internal process.

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 2022 at approved ROP 2021 partner budget levels to achieve FY 2022 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. <u>Additional or remaining pipeline from previous year's activities that are not currently captured in the ROP 2021 total budget level and documented within ROP 2021 partner budgets are not to be executed or outlayed without written approval from S/GAC.</u>

Earmarks: The Asia Region as planned for programming for FY 2021, FY 2020, and/or FY 2019 GHP-State funding that is considered to meet a number of earmarks, as indicated in the table below. The amounts programmed during ROP may exceed the original controls assigned to the Asia Region. 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.

Table 5: Earmark Budget Table

Earmarks	COP21 Funding Level			
	TOTAL	FY 2021	FY 2020	FY 2019
Care & Treatment	33,687,367	33,687,367	-	-
Orphans and Vulnerable Children	-	-	-	-
Preventing and Responding to Gender-based Violence	-	-	-	-
Water	-	-	-	-

* Only GHP-State and GHP-USAID will count towards the Care and Treatment and OVC earmarks
** Only GHP-State will count towards the GBV and Water earmarks

Initiatives by Agency

Table 6: ROP 2021 Budget Table by Agency and Initiative

	Total Central Applied Pipeline	Total Bilateral Applied Pipeline	Total Central - New Funding	Total Bilateral - New Funding	Total COP21 Budget
TOTAL	-	**40,831,921**	-	**91,867,042**	**132,698,963**
of which, Community-Led Monitoring	-	-	-	*1,625,000*	*1,625,000*
of which, Core Program	-	*40,831,921*	-	*90,242,042*	*131,073,963*
DOD Total	-	**88,045**	-	**1,000,000**	**1,088,045**
of which, Core Program	-	*88,045*	-	*1,000,000*	*1,088,045*
HHS Total	-	**11,182,123**	-	**33,407,257**	**44,589,380**
of which, Core Program	-	*11,182,123*	-	*33,407,257*	*44,589,380*
STATE Total	-	-	-	**722,734**	**722,734**
of which, Core Program	-	-	-	*722,734*	*722,734*
USAID Total	-	**29,561,753**	-	**56,737,051**	**86,298,804**
of which, Community-Led Monitoring	-	-	-	*1,625,000*	*1,625,000*
of which, Core Program	-	*29,561,753*	-	*55,112,051*	*84,673,804*

Asia Region FY 2022 Target Summary

FY 2021 funds are released and ROP 2021 applied pipeline is approved to achieve the following results in FY 2022.

1. Burma FY 2022 Target Summary:

Burma		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	Total
HTS_INDEX	<15	-	-	-	-	-	-	-
	15+	-	-	2,207	-	-	-	2,207
	Total	**-**	**-**	**2,207**	**-**	**-**	**-**	**2,207**
HTS_TST	<15	-	-	-	-	-	-	-
	15+	-	-	9,632	-	-	-	9,632
	Total	**-**	**-**	**9,632**	**-**	**-**	**-**	**9,632**
HTS_TST_POS	<15	-	-	-	-	-	-	-
	15+	-	-	969	-	-	-	969
	Total	**-**	**-**	**969**	**-**	**-**	**-**	**969**
TX_NEW	<15	-	-	-	-	-	-	-
	15+	-	-	900	-	-	-	900
	Total	**-**	**-**	**900**	**-**	**-**	**-**	**900**
TX_CURR	<15	-	-	-	-	-	-	-
	15+	-	-	11,682	-	-	-	11,682
	Total	**-**	**-**	**11,682**	**-**	**-**	**-**	**11,682**
TX_PVLS	<15	-	-	-	-	-	-	-
	15+	-	-	5,585	-	-	-	5,585
	Total	**-**	**-**	**5,585**	**-**	**-**	**-**	**5,585**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	-	-	-	-	-	-
	18+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_HIVSTAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_PREV	**Total**	**-**	**-**	**6,840**	**-**	**-**	**-**	**6,840**
KP_MAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PrEP_NEW	**Total**	**-**	**-**	**612**	**-**	**-**	**-**	**612**
PrEP_CURR	**Total**	**-**	**-**	**856**	**-**	**-**	**-**	**856**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TX_TB	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
GEND_GBV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

2. India FY 2022 Target Summary:

India		Attained	SNU Prioritizations					Total
			Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	
HTS_INDEX	<15	-	320	1,545	-	-	-	1,865
	15+	-	3,825	55,785	-	-	-	59,610
	Total	**-**	**4,145**	**57,330**	**-**	**-**	**-**	**61,475**
HTS_TST	<15	-	340	1,640	-	-	-	1,980
	15+	-	4,095	65,140	-	-	-	69,235
	Total	**-**	**4,435**	**66,780**	**-**	**-**	**-**	**71,215**
HTS_TST_POS	<15	-	61	301	-	-	-	362
	15+	-	726	12,412	-	-	-	13,138
	Total	**-**	**787**	**12,713**	**-**	**-**	**-**	**13,500**
TX_NEW	<15	-	251	990	-	-	-	1,241
	15+	-	3,138	43,469	-	-	-	46,607
	Total	**-**	**3,389**	**44,459**	**-**	**-**	**-**	**47,848**
TX_CURR	<15	-	1,012	12,243	-	-	-	13,255
	15+	-	28,902	438,638	-	-	-	467,540
	Total	**-**	**29,914**	**450,881**	**-**	**-**	**-**	**480,795**
TX_PVLS	<15	-	886	9,840	-	-	-	10,726
	15+	-	24,837	347,923	-	-	-	372,760
	Total	**-**	**25,723**	**357,763**	**-**	**-**	**-**	**383,486**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	4,797	34,658	-	-	-	39,455
	18+	-	942	9,603	-	-	-	10,545
	Total	**-**	**5,739**	**44,261**	**-**	**-**	**-**	**50,000**
OVC_HIVSTAT	**Total**	**-**	**4,797**	**34,658**	**-**	**-**	**-**	**39,455**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_PREV	**Total**	**-**	**6,400**	**47,201**	**-**	**-**	**-**	**53,601**
KP_MAT	**Total**	**-**	**1,200**	**7,568**	**-**	**-**	**-**	**8,768**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	-	-	-	-	-
	15+	-	8	356	-	-	-	364
	Total	**-**	**8**	**356**	**-**	**-**	**-**	**364**
PrEP_NEW	**Total**	**-**	**200**	**750**	**-**	**-**	**-**	**950**
PrEP_CURR	**Total**	**-**	**200**	**750**	**-**	**-**	**-**	**950**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	474	1,137	-	-	-	1,611
	15+	-	9,784	45,100	-	-	-	54,884
	Total	**-**	**10,258**	**46,237**	**-**	**-**	**-**	**56,495**
TX_TB	<15	-	1,049	10,982	-	-	-	12,031
	15+	-	24,448	409,571	-	-	-	434,019
	Total	**-**	**25,497**	**420,553**	**-**	**-**	**-**	**446,050**
GEND_GBV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

3. Indonesia FY 2022 Target Summary:

Indonesia		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	Total
				SNU Prioritizations				
HTS_INDEX	<15	-	-	-	127	-	-	127
	15+	-	-	2,090	8,069	-	-	10,159
	Total	**-**	**-**	**2,090**	**8,196**	**-**	**-**	**10,286**
HTS_TST	<15	-	-	840	2,536	-	-	3,376
	15+	-	-	38,837	140,655	-	-	179,492
	Total	**-**	**-**	**39,677**	**143,191**	**-**	**-**	**182,868**
HTS_TST_POS	<15	-	-	20	81	-	-	101
	15+	-	-	1,262	4,464	-	-	5,726
	Total	**-**	**-**	**1,282**	**4,545**	**-**	**-**	**5,827**
TX_NEW	<15	-	-	28	106	-	-	134
	15+	-	-	1,214	4,240	-	-	5,454
	Total	**-**	**-**	**1,242**	**4,346**	**-**	**-**	**5,588**
TX_CURR	<15	-	-	220	667	-	-	887
	15+	-	-	8,481	31,237	-	-	39,718
	Total	**-**	**-**	**8,701**	**31,904**	**-**	**-**	**40,605**
TX_PVLS	<15	-	-	192	559	-	-	751
	15+	-	-	7,235	26,853	-	-	34,088
	Total	**-**	**-**	**7,427**	**27,412**	**-**	**-**	**34,839**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	-	-	-	-	-	-
	18+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_HIVSTAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_PREV	**Total**	**-**	**-**	**8,530**	**18,428**	**-**	**-**	**26,958**
KP_MAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PrEP_NEW	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PrEP_CURR	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TX_TB	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
GEND_GBV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

4. Kazakhstan FY 2022 Target Summary:

Kazakhstan		Attained	SNU Prioritizations					Total
			Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	
HTS_INDEX	<15	-	-	-	-	-	-	-
	15+	2,208	-	-	-	-	-	2,208
	Total	**2,208**	**-**	**-**	**-**	**-**	**-**	**2,208**
HTS_TST	<15	-	-	-	-	-	-	-
	15+	2,738	-	-	-	-	-	2,738
	Total	**2,738**	**-**	**-**	**-**	**-**	**-**	**2,738**
HTS_TST_POS	<15	-	-	-	-	-	-	-
	15+	503	-	-	-	-	-	503
	Total	**503**	**-**	**-**	**-**	**-**	**-**	**503**
TX_NEW	<15	-	-	-	-	-	-	-
	15+	1,177	-	-	-	-	-	1,177
	Total	**1,177**	**-**	**-**	**-**	**-**	**-**	**1,177**
TX_CURR	<15	-	-	-	-	-	-	-
	15+	5,380	-	-	-	-	-	5,380
	Total	**5,380**	**-**	**-**	**-**	**-**	**-**	**5,380**
TX_PVLS	<15	-	-	-	-	-	-	-
	15+	4,826	-	-	-	-	-	4,826
	Total	**4,826**	**-**	**-**	**-**	**-**	**-**	**4,826**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	-	-	-	-	-	-
	18+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_HIVSTAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_MAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	-	-	-	-	-
	15+	1,000	-	-	-	-	-	1,000
	Total	**1,000**	**-**	**-**	**-**	**-**	**-**	**1,000**
PrEP_NEW	**Total**	**10**	**-**	**-**	**-**	**-**	**-**	**10**
PrEP_CURR	**Total**	**25**	**-**	**-**	**-**	**-**	**-**	**25**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TX_TB	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
GEND_GBV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

5. Kyrgyzstan FY 2022 Target Summary:

Kyrgyzstan		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	Total
				SNU Prioritizations				
HTS_INDEX	<15	-	-	-	-	-	-	-
	15+	-	-	1,797	-	-	-	1,797
	Total	**-**	**-**	**1,797**	**-**	**-**	**-**	**1,797**
HTS_TST	<15	-	-	-	-	-	-	-
	15+	-	-	8,510	-	-	-	8,510
	Total	**-**	**-**	**8,510**	**-**	**-**	**-**	**8,510**
HTS_TST_POS	<15	-	-	-	-	-	-	-
	15+	-	-	1,011	-	-	-	1,011
	Total	**-**	**-**	**1,011**	**-**	**-**	**-**	**1,011**
TX_NEW	<15	-	-	-	-	-	-	-
	15+	-	-	1,596	-	-	-	1,596
	Total	**-**	**-**	**1,596**	**-**	**-**	**-**	**1,596**
TX_CURR	<15	-	-	-	-	-	-	-
	15+	-	-	5,206	-	-	-	5,206
	Total	**-**	**-**	**5,206**	**-**	**-**	**-**	**5,206**
TX_PVLS	<15	-	-	-	-	-	-	-
	15+	-	-	4,423	-	-	-	4,423
	Total	**-**	**-**	**4,423**	**-**	**-**	**-**	**4,423**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	-	-	-	-	-	-
	18+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_HIVSTAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_MAT	**Total**	**-**	**-**	**739**	**-**	**-**	**-**	**739**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	-	-	-	-	-
	15+	-	-	2,300	-	-	-	2,300
	Total	**-**	**-**	**2,300**	**-**	**-**	**-**	**2,300**
PrEP_NEW	**Total**	**-**	**-**	**240**	**-**	**-**	**-**	**240**
PrEP_CURR	**Total**	**-**	**-**	**257**	**-**	**-**	**-**	**257**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TX_TB	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
GEND_GBV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

6. Laos FY 2022 Target Summary:

Laos		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	Total
				SNU Prioritizations				
HTS_INDEX	<15	-	-	-	-	-	-	-
	15+	-	-	1,227	-	-	-	1,227
	Total	**-**	**-**	**1,227**	**-**	**-**	**-**	**1,227**
HTS_TST	<15	-	-	-	-	-	-	-
	15+	-	-	4,481	-	-	-	4,481
	Total	**-**	**-**	**4,481**	**-**	**-**	**-**	**4,481**
HTS_TST_POS	<15	-	-	-	-	-	-	-
	15+	-	-	556	-	-	-	556
	Total	**-**	**-**	**556**	**-**	**-**	**-**	**556**
TX_NEW	<15	-	-	-	-	-	-	-
	15+	-	-	1,045	-	-	-	1,045
	Total	**-**	**-**	**1,045**	**-**	**-**	**-**	**1,045**
TX_CURR	<15	-	-	-	-	-	-	-
	15+	-	-	7,375	-	-	-	7,375
	Total	**-**	**-**	**7,375**	**-**	**-**	**-**	**7,375**
TX_PVLS	<15	-	-	-	-	-	-	-
	15+	-	-	6,624	-	-	-	6,624
	Total	**-**	**-**	**6,624**	**-**	**-**	**-**	**6,624**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	-	-	-	-	-	-
	18+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_HIVSTAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_PREV	**Total**	**-**	**-**	**3,980**	**-**	**-**	**-**	**3,980**
KP_MAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	6	-	-	-	6
	15+	-	-	3,144	-	-	-	3,144
	Total	**-**	**-**	**3,150**	**-**	**-**	**-**	**3,150**
PrEP_NEW	**Total**	**-**	**-**	**272**	**-**	**-**	**-**	**272**
PrEP_CURR	**Total**	**-**	**-**	**292**	**-**	**-**	**-**	**292**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TX_TB	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
GEND_GBV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

7. Nepal FY 2022 Target Summary:

Nepal		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	Total
				SNU Prioritizations				
HTS_INDEX	<15	-	-	254	-	-	-	254
	15+	-	-	4,789	-	-	-	4,789
	Total	**-**	**-**	**5,043**	**-**	**-**	**-**	**5,043**
HTS_TST	<15	-	-	348	-	-	-	348
	15+	-	-	13,958	-	-	-	13,958
	Total	**-**	**-**	**14,306**	**-**	**-**	**-**	**14,306**
HTS_TST_POS	<15	-	-	44	-	-	-	44
	15+	-	-	1,106	-	-	-	1,106
	Total	**-**	**-**	**1,150**	**-**	**-**	**-**	**1,150**
TX_NEW	<15	-	-	134	-	-	-	134
	15+	-	-	2,666	-	-	-	2,666
	Total	**-**	**-**	**2,800**	**-**	**-**	**-**	**2,800**
TX_CURR	<15	-	-	1,138	-	-	-	1,138
	15+	-	-	17,492	-	-	-	17,492
	Total	**-**	**-**	**18,630**	**-**	**-**	**-**	**18,630**
TX_PVLS	<15	-	-	1,024	-	-	-	1,024
	15+	-	-	15,803	-	-	-	15,803
	Total	**-**	**-**	**16,827**	**-**	**-**	**-**	**16,827**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	-	-	-	-	-	-
	18+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_HIVSTAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	114	-	-	-	114
	15+	-	-	8,955	-	-	-	8,955
	Total	**-**	**-**	**9,069**	**-**	**-**	**-**	**9,069**
KP_PREV	**Total**	**-**	**-**	**11,431**	**-**	**-**	**-**	**11,431**
KP_MAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	180	-	-	-	180
	15+	-	-	11,820	-	-	-	11,820
	Total	**-**	**-**	**12,000**	**-**	**-**	**-**	**12,000**
PrEP_NEW	**Total**	**-**	**-**	**3,450**	**-**	**-**	**-**	**3,450**
PrEP_CURR	**Total**	**-**	**-**	**4,750**	**-**	**-**	**-**	**4,750**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	-	166	-	-	-	166
	15+	-	-	2,156	-	-	-	2,156
	Total	**-**	**-**	**2,322**	**-**	**-**	**-**	**2,322**
TX_TB	<15	-	-	1,272	-	-	-	1,272
	15+	-	-	20,158	-	-	-	20,158
	Total	**-**	**-**	**21,430**	**-**	**-**	**-**	**21,430**
GEND_GBV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

8. Papua New Guinea FY 2022 Target Summary:

Papua New Guinea		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	Total
				SNU Prioritizations				
HTS_INDEX	<15	-	-	-	-	-	-	-
	15+	-	439	-	-	-	-	439
	Total	**-**	**439**	**-**	**-**	**-**	**-**	**439**
HTS_TST	<15	-	-	-	-	-	-	-
	15+	-	6,616	-	-	-	-	6,616
	Total	**-**	**6,616**	**-**	**-**	**-**	**-**	**6,616**
HTS_TST_POS	<15	-	-	-	-	-	-	-
	15+	-	441	-	-	-	-	441
	Total	**-**	**441**	**-**	**-**	**-**	**-**	**441**
TX_NEW	<15	-	-	-	-	-	-	-
	15+	-	419	-	-	-	-	419
	Total	**-**	**419**	**-**	**-**	**-**	**-**	**419**
TX_CURR	<15	-	15	-	-	-	-	15
	15+	-	6,082	-	-	-	-	6,082
	Total	**-**	**6,097**	**-**	**-**	**-**	**-**	**6,097**
TX_PVLS	<15	-	14	-	-	-	-	14
	15+	-	5,579	-	-	-	-	5,579
	Total	**-**	**5,593**	**-**	**-**	**-**	**-**	**5,593**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	-	-	-	-	-	-
	18+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_HIVSTAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_MAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PrEP_NEW	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PrEP_CURR	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TX_TB	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
GEND_GBV	**Total**	**-**	**1,500**	**-**	**-**	**-**	**-**	**1,500**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

9. Philippines FY 2022 Target Summary:

Philippines		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	Total
				SNU Prioritizations				
HTS_INDEX	<15	-	-	-	-	-	-	-
	15+	-	-	8,291	-	-	-	8,291
	Total	**-**	**-**	**8,291**	**-**	**-**	**-**	**8,291**
HTS_TST	<15	-	-	-	-	-	-	-
	15+	-	-	43,800	-	-	-	43,800
	Total	**-**	**-**	**43,800**	**-**	**-**	**-**	**43,800**
HTS_TST_POS	<15	-	-	-	-	-	-	-
	15+	-	-	3,654	-	-	-	3,654
	Total	**-**	**-**	**3,654**	**-**	**-**	**-**	**3,654**
TX_NEW	<15	-	-	-	-	-	-	-
	15+	-	-	3,438	-	-	-	3,438
	Total	**-**	**-**	**3,438**	**-**	**-**	**-**	**3,438**
TX_CURR	<15	-	-	-	-	-	-	-
	15+	-	-	20,654	-	-	-	20,654
	Total	**-**	**-**	**20,654**	**-**	**-**	**-**	**20,654**
TX_PVLS	<15	-	-	-	-	-	-	-
	15+	-	-	10,152	-	-	-	10,152
	Total	**-**	**-**	**10,152**	**-**	**-**	**-**	**10,152**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	-	-	-	-	-	-
	18+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_HIVSTAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_PREV	**Total**	**-**	**-**	**14,535**	**-**	**-**	**-**	**14,535**
KP_MAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	-	-	-	-	-
	15+	-	-	329	-	-	-	329
	Total	**-**	**-**	**329**	**-**	**-**	**-**	**329**
PrEP_NEW	**Total**	**-**	**-**	**2,199**	**-**	**-**	**-**	**2,199**
PrEP_CURR	**Total**	**-**	**-**	**3,100**	**-**	**-**	**-**	**3,100**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TX_TB	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
GEND_GBV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

10. Tajikistan FY 2022 Target Summary:

Tajikistan		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	Total
				SNU Prioritizations				
HTS_INDEX	<15	-	-	-	-	-	-	-
	15+	-	-	2,814	-	-	-	2,814
	Total	**-**	**-**	**2,814**	**-**	**-**	**-**	**2,814**
HTS_TST	<15	-	-	-	-	-	-	-
	15+	-	-	13,401	-	-	-	13,401
	Total	**-**	**-**	**13,401**	**-**	**-**	**-**	**13,401**
HTS_TST_POS	<15	-	-	-	-	-	-	-
	15+	-	-	1,589	-	-	-	1,589
	Total	**-**	**-**	**1,589**	**-**	**-**	**-**	**1,589**
TX_NEW	<15	-	-	-	-	-	-	-
	15+	-	-	1,895	-	-	-	1,895
	Total	**-**	**-**	**1,895**	**-**	**-**	**-**	**1,895**
TX_CURR	<15	-	-	-	-	-	-	-
	15+	-	-	7,287	-	-	-	7,287
	Total	**-**	**-**	**7,287**	**-**	**-**	**-**	**7,287**
TX_PVLS	<15	-	-	-	-	-	-	-
	15+	-	-	6,327	-	-	-	6,327
	Total	**-**	**-**	**6,327**	**-**	**-**	**-**	**6,327**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	-	-	-	-	-	-
	18+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_HIVSTAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_MAT	**Total**	**-**	**-**	**170**	**-**	**-**	**-**	**170**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	-	-	-	-	-
	15+	-	-	3,000	-	-	-	3,000
	Total	**-**	**-**	**3,000**	**-**	**-**	**-**	**3,000**
PrEP_NEW	**Total**	**-**	**-**	**200**	**-**	**-**	**-**	**200**
PrEP_CURR	**Total**	**-**	**-**	**238**	**-**	**-**	**-**	**238**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TX_TB	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
GEND_GBV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

11. Thailand FY 2022 Target Summary:

Thailand		Attained	Scale-Up: Saturation	Scale-Up: Aggressive	Sustained	Centrally Supported	No Prioritization	Total
					SNU Prioritizations			
HTS_INDEX	<15	-	-	-	-	-	-	-
	15+	-	1,658	1,754	-	-	-	3,412
	Total	**-**	**1,658**	**1,754**	**-**	**-**	**-**	**3,412**
HTS_TST	<15	-	-	-	-	-	-	-
	15+	-	22,200	13,305	-	-	-	35,505
	Total	**-**	**22,200**	**13,305**	**-**	**-**	**-**	**35,505**
HTS_TST_POS	<15	-	-	-	-	-	-	-
	15+	-	1,422	1,072	-	-	-	2,494
	Total	**-**	**1,422**	**1,072**	**-**	**-**	**-**	**2,494**
TX_NEW	<15	-	-	-	-	-	-	-
	15+	-	1,865	1,997	-	-	-	3,862
	Total	**-**	**1,865**	**1,997**	**-**	**-**	**-**	**3,862**
TX_CURR	<15	-	-	-	-	-	-	-
	15+	-	26,830	20,869	-	-	-	47,699
	Total	**-**	**26,830**	**20,869**	**-**	**-**	**-**	**47,699**
TX_PVLS	<15	-	-	-	-	-	-	-
	15+	-	24,890	18,993	-	-	-	43,883
	Total	**-**	**24,890**	**18,993**	**-**	**-**	**-**	**43,883**
CXCA_SCRN	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_SERV	<18	-	-	-	-	-	-	-
	18+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
OVC_HIVSTAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_STAT_ POS	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PMTCT_EID	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
PP_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
KP_PREV	**Total**	**-**	**6,131**	**14,360**		**-**	**-**	**20,491**
KP_MAT	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
VMMC_CIRC	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
HTS_SELF	<15	-	-	-	-	-	-	-
	15+	-	407	659	-	-	-	1,066
	Total	**-**	**407**	**659**	**-**	**-**	**-**	**1,066**
PrEP_NEW	**Total**	**-**	**3,429**	**2,639**	**-**	**-**	**-**	**6,068**
PrEP_CURR	**Total**	**-**	**3,645**	**4,452**	**-**	**-**	**-**	**8,097**
TB_STAT	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_ART	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TB_PREV	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
TX_TB	<15	-	-	-	-	-	-	-
	15+	-	-	-	-	-	-	-
	Total	**-**	**-**	**-**	**-**	**-**	**-**	**-**
GEND_GBV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**
AGYW_PREV	**Total**	**-**	**-**	**-**	**-**	**-**	**-**	**-**

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

Partner Management and Stakeholder Engagement:

Agreements made during ROP 2021 discussions, including those regarding geographic focus, targets, budgets, Site Improvement through Monitoring System (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 headquarters (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 memo, approved Strategic Direction Summary (SDS), and budgets and targets as finalized in PEPFAR systems. Any partner with EITHER (1) <15 percent of target achievement at 3 months or (2) less than 40 percent 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 be between 98 percent and 100 percent 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 percent of treatment current. Orphans and Vulnerable Children (OVC) programs are also similar in that there are clients continuing services from the previous year; if the IP is less than 80 percent of their target at Q2 performance review should be triggered. For key populations programming, per Monitoring, Evaluation, and Reporting (MER) Guidance and program requirements, HIV testing is a required element of the KP_PREV indicator. HIV testing services (HTS) or referring an individual to HTS is required to be offered (at least once during the reporting period and/or in accordance with WHO/national guidance) unless the individual had previously been tested positive for HIV. HIV prevention services must be tailored to individual risks. If the individual is self-identified as HIV positive, then HTS provision or referral to HTS will not be a required element of this indicator. Workplans for IPs should reflect these HTS requirements for key populations programming. Additionally, where referral to HTS is made, IP workplans and program design should incorporate measures to follow through on HTS with KP clients to ensure referral completion. These elements (e.g. 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 percent. If the issue is retention, it should be net new on treatment equal to 90 percent 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 non-performance. including options for a shift to new partners. The country team should notify the S/GAC Chair and PEPFAR Program Manager (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 ROP 2021 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 the Asia Region's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.