

## Frequently Asked Questions on the New Funding Model

This document consolidates questions about the Global Fund's new funding model often asked by Country Coordinating Mechanism (CCM) members, technical partners, civil society representatives and other stakeholders. It provides brief but precise answers to those questions, organized into the following areas:

- General information
- Counterpart financing and willingness-to-pay
- Program split
- Before applying to the Global Fund
- Country dialogue
- Concept note
- Country Coordinating Mechanisms
- Eligibility
- Regional applications
- Technical assistance

### GENERAL INFORMATION

#### 1. Why has the Global Fund adopted a new funding model?

The Global Fund needs to invest more strategically, to make the most of its resources and maximize the impact of its grants. The purpose of the Global Fund's new funding model is to invest as effectively as possible and to reach as many people affected by the diseases as possible. The new funding model ensures predictable funding for those countries with a high disease burden and low ability to pay, and it incentivizes better performing interventions.

#### 2. What are the key elements of the new funding model?

First, all eligible applicants will receive a funding amount – their *allocation* – for all eligible diseases before they develop their concept notes. They will seek funding from this allocation when it suits them best, according to their own national planning cycles.

The new funding model acknowledges the important country dialogue that happens in country. It encourages inclusiveness in order to ensure that discussions on health and development can form the basis of a funding request to the Global Fund.

The Global Fund provides a country-level program split for the total allocation amount which is discussed early on by the CCM during the country dialogue process. The CCM will agree on the split of funding between the eligible diseases and cross-cutting health system strengthening (HSS), and then submit a funding request called a concept note. A concept note can be submitted for each disease and HSS separately or together. For countries with high TB and HIV co-infection rates, one joint TB and HIV concept note should be submitted. The concept note is based on the national strategic plan or investment case.

Following the concept note review by the Technical Review Panel (TRP) and the Grant Approvals Committee (GAC), grant-making will occur. After a second Grant Approvals Committee review, the grant will then be presented to the Global Fund Board for approval.

### 3. What inputs go into the allocation formula?

The allocation formula is based on disease burden, income level, external financing and a minimum required level.

The minimum required level is a parameter of the allocation methodology that honors past Global Fund commitments and is designed to ease the transition to the new funding model. It is used in the allocation formula to calculate the allocation amount before adjustments for qualitative factors.

The Global Fund uses qualitative factors to adjust the allocation amount for each country. These qualitative factors include previous grant performance, impact, increasing rates of infection, absorptive capacity and risk. These factors lead to both upward and downward adjustments to the amount that is initially derived by the allocation methodology. A final adjustment is made during country dialogue once a country's willingness-to-pay commitments are confirmed.

For a list of country allocations for 2014-2016, please see the [Allocations page](#). That page also features a document detailing the allocation methodology and a separate document with frequently asked questions specifically related to the allocation methodology.

### 4. Where do country bands fit in?

The Global Fund first allocates funding to all eligible countries. These are then separately grouped into one of four country bands. The band composition is determined by income level and disease burden. At its March 2014 meeting, the Global Fund Board approved the composition of and the total funding for each band, as well as the amount of incentive funding to bands 1-3. These are as follows:

Band	Composition (Income level, disease burden)	Number of countries	Total funding to band (billions)	Additional incentive funding (millions)
1	Lower income, higher burden	39	11.3	825
2	Lower income, lower burden	18	0.9	42
3	Higher income, higher burden	11	1.5	83
4	Higher income, lower burden	55	1.1	n/a*

\*Band 4 countries have incentive funding calculated into their allocations.

## 5. What is the difference between a “country allocation” and “incentive funding”?

In the new funding model, there are two types of funding available; the allocation amount and above allocation funding. The country allocation is derived from an allocation formula for each country and is adjusted based on qualitative criteria. It should represent predictable funding to support countries’ prioritized interventions and activities.

Incentive funding is a separate reserve of funding that encourages ambitious requests for programs with a potential for increased, quantifiable impact. It is made available, on a competitive basis, to applicants in the same band whose requests are based on robust national strategic plans or a full expression of prioritized demand for strategic interventions, based on a program review. Applicants apply for incentive funding in the concept note by submitting a funding request above the allocation amount.

The Grant Approvals Committee determines final funding amounts and whether or not a country will be awarded additional incentive funding, based on the recommendation of the Technical Review Panel. In such cases, a country is awarded both funds at the same time. The total recommended upper ceiling then moves to grant-making.

While band 4 countries and regional applicants are encouraged to submit their full expression of demand by including an above allocation request in their concept note, they already have incentive funding included in their allocation. Countries that have been funded at levels higher (150 percent or more) than their formula-driven allocation are not eligible for incentive funding.

## 6. What is “unfunded quality demand”?

Any funding requested through a concept note which is considered strategically focused and technically sound by the TRP but for which there are not enough resources currently available will be placed on a register. That register is for possible financing over a three-year period by the Global Fund or other donors when and if any new resources become available. This is called the Register of Unfunded Quality Demand.

At the end of each year, the Finance and Operational Performance Committee will determine whether any additional funds are available. If there are, applicants will be selected from the register to receive additional funding that can be reprogrammed into their existing grants.

All countries and components in all bands are eligible to receive funding for unfunded quality demand that is recorded on the register. Regional and multi-country applications may also receive funding through the register.

## 7. How much incentive funding will be available in each window?

The amount of incentive funding available will be different at each window, as it depends on which countries are submitting applications in each window. The pool of incentive funding for each review window will be proportional to the share of the allocations of the disease components being reviewed.

## **8. Could a country improve its chances of securing incentive funding by applying in a certain window?**

No. The award of incentive funding is dependent on how competitive the application is versus others in the same band in the same review window. Some concept notes will be awarded zero incentive funding, while others may receive a large amount relative to their allocation.

Incentive funding should not drive application timing. The Global Fund encourages CCMs to submit their concept notes when they are ready.

## **9. Could the Global Fund run out of incentive funding?**

No, there is no possibility the Global Fund will run out of incentive funding in this replenishment period. The submission timing does not benefit those that come earlier versus later.

## **10. What happens to incentive funding that is not awarded?**

Any remaining incentive funding could be rolled forward into future review windows or could be moved into the pool of funds for the Register of Unfunded Quality Demand so applicants from all past windows may be considered.

## **11. How long are grants expected to last? When should they be expected to end?**

The standard grant duration for a new Global Fund grant is three years from the start date.

The Global Fund hopes to announce the next allocations in the fourth quarter of 2016, although this will depend on the timing of the Global Fund's replenishment conference. After the next allocation announcement, CCMs may develop concept notes and Principal Recipients can negotiate grants. This process takes 11 months on average. Given the inherent uncertainty in timelines, it may be prudent for grants to continue until the end of 2017. This way, there is little risk of grants ending before new funds can be disbursed.

## **12. Can a grant's length be shortened or lengthened?**

On a case-by-case basis, there is some flexibility to shorten or lengthen grants, with the aim to achieve greater impact and in consideration of the country-specific context. While each disease component's allocation will typically cover a period until the end of 2017, the Secretariat has the operational flexibility to structure longer or shorter grant implementation periods while applying the principles of the allocation model to guide funding levels towards the amounts derived from the allocation formula.

As a result, the Secretariat will take into consideration ambition to achieve increased impact and sustain gains, and whether a country has been funded at levels higher or lower than their formula-driven allocation, when making a decision about grant lengths.

The Global Fund will need to be responsible about managing the portfolio impact of early grant end dates. Any request to end grants mid-2017 or earlier will need to be carefully reviewed on a case-by-case basis and portfolio impact will be assessed by the Secretariat. The final decision will be taken by the head of grant management.

If you feel that your country has a good justification for a grant end date before the end of 2017, please discuss this with your Fund Portfolio Manager. This request needs to be made as soon as possible and made at minimum one month prior to concept note submission.

## **COUNTERPART FINANCING AND WILLINGNESS-TO-PAY**

### **13. Do countries still have to comply with the counterpart financing requirements?**

Yes. All applicants – except non-CCM and regional applicants – must comply with the counterpart financing requirements.

The requirements are:

- i. To meet the minimum counterpart financing threshold, as determined by income level;
- ii. To increase government contributions to the disease program and health sector; and
- iii. To improve expenditure data.

Minimum thresholds for counterpart financing are based on a country's income category:

- Low income: 5 percent
- Lower lower-middle income: 20 percent
- Upper lower-middle income: 40 percent
- Upper-middle income: 60 percent

### **14. What is the willingness-to-pay commitment?**

Countries can access the full allocation if they make additional government commitments beyond the minimum counterpart financing thresholds. Willingness-to-pay commitments are forward looking with a duration of three years. The willingness-to-pay approach encourages countries to demonstrate their financial commitment to the three diseases, thereby ensuring the sustainability of the responses.

The Global Fund Board decision to include willingness-to-pay as a qualitative factor that determines the final allocation supports core Global Fund principles of country ownership, additionality and sustainability.

### **15. Does willingness-to-pay apply to the total allocation or just the additional funds?**

Willingness-to-pay affects the total allocation -- both existing and additional funds. In order to access the 15 percent of the whole allocation, the commitments would need to be met by the country.

**16. In order for a country to meet the willingness-to-pay commitments, should additional government commitments be demonstrated for all eligible diseases?**

Not necessarily. A country can meet the willingness-to-pay condition by committing additional funds to only one eligible disease.

**17. If existing funding is 85 percent or more of the allocation, does a country still need to demonstrate willingness-to-pay commitments in order to access 100 percent of its allocation?**

In instances when existing funding is 85 percent or more of the allocation (in other words, when additional funding is 15 percent or less of the allocation), then the condition to make additional government investments in order to access the full allocation will be applied flexibly. This is to recognize that 85 percent or more of the allocation may already be contractually obligated.

**PROGRAM SPLIT**

**18. What is “program split”?**

During country dialogue, the CCM should use a documented and inclusive process to determine how to apportion the total funding allocation among eligible disease components and cross-cutting health systems strengthening (HSS). This process is referred to as the “program split.” CCMs are free to propose the program split that is best for their country and deviate from the suggested split communicated by the Global Fund.

**19. Can a CCM use the program split process to move funds into an eligible component that did not receive an allocation?**

Yes, CCMs are free to propose the program split that is best for their country. However, they cannot move funds to an ineligible component. CCMs will be asked to provide a very strong justification to move funds in cases where the Global Fund has not awarded an allocation.

**20. Should countries treat the existing grants and deliverables in already-signed grants as fixed when planning use of the total allocation?**

Not necessarily. The total funding for the national program may have changed as a result of the Global Fund allocation announcement and this may prompt or even require a change to existing grant deliverables and scale. Countries are asked to critically examine how all funds contribute to the impact countries hope to achieve and, accordingly, shift funds or significantly reprogram for greater impact.

**21. Should cross-cutting health systems strengthening be included in the program split?**

Yes. All cross-cutting HSS should be reflected in the program split table regardless of whether it is part of a disease component concept note or in a stand-alone concept note, if eligible. Cross-cutting HSS interventions contribute to maximizing the impact of more than one of the eligible HIV, TB and malaria programs and may also contribute to health outcomes beyond the three diseases.

## **22. How is the proposed program split evaluated?**

The proposed split will be reviewed on a case-by-case basis against Global Fund understanding of the country context, considering the program split rationale and other supporting documentation submitted by the CCM.

## **23. How and when should the program split be sent to the Global Fund?**

The proposed program split should be communicated to the Global Fund as early as possible and no later than the day the CCM submits its first concept note. It should be submitted via the online Grant Management Platform. Where time permits, the CCM should confirm the program split before beginning concept note development. Any concept note must reflect the program split agreed by the Global Fund.

The CCM must endorse the proposed program split – according to agreed CCM rules as described in the CCM governance manual – before submission.

### **BEFORE APPLYING TO THE GLOBAL FUND**

## **24. Well before it submits a concept note, what are some the first steps a CCM can take to prepare its application?**

- Countries should continue and/or expand their national dialogue with key stakeholders, including the Global Fund Secretariat, bilateral and multilateral donors, technical partners, civil society organizations (in particular, key populations) and other partners. The dialogue should be around the goals and implementation arrangements for their national strategies and disease programs. Consider cross-disease collaboration for greater impact.
- According to their national planning cycle, countries can assess the strength of their national health strategy and their national disease-specific strategies for HIV, tuberculosis and malaria, identifying programmatic and funding gaps. If necessary, steps should be taken to strengthen these strategies, organizing joint reviews (e.g. Joint Assessment of National Strategies (JANS)), if required.
- CCMs should review the six CCM eligibility requirements to assess potential issues and make any necessary improvements. This includes the requirement to conduct inclusive and transparent country dialogue and ensure the selection process for Principal Recipients is open and transparent (requirements 1 and 2), among others. [Guidance is available](#) on the Global Fund website.
- Work with current and potential implementers to strengthen their capacity and improve program performance. Since future allocations will be influenced by grant performance, it is in the best interest of the CCM to ensure that they select implementers who are able to manage grants to achieve the greatest impact. Each organization being considered as an implementer needs to be reviewed against grant implementer minimum standards by both the CCM and the Global Fund Secretariat.

- Work with your government to increase its national financial commitments to health. National governments are expected to partner with the Global Fund in funding health care interventions. All countries will be required to contribute funding to the three diseases and their health system overall in order to access Global Fund funding. Countries need to be able to report on government expenditures to show they have fulfilled their commitments.

## **25. What if a country's application is not ready by the time its current grant runs out?**

Applicants with grants ending in 2014 can seek an extension of time to continue activities until December 2014. If funds are needed for the extension and are requested (i.e. a "costed extension"), these funds would be taken from the country's 2014-2016 funding allocation.

Applicants should contact their country team to discuss the current options available. In an effort to support the development of robust applications, assistance is available from the Global Fund and donor partners on national strategic plan strengthening, epidemiological data collection, strategic investment discussions and country dialogue.

## **26. Must a country register before submitting a concept note?**

Yes. The Technical Review Panel (TRP) that reviews concept notes will meet nine times between 2014 through 2016. CCMs may submit their concept notes for review at any TRP review meeting they choose, but will need to register for the TRP review meeting in advance.

This will allow the Secretariat and TRP to plan appropriately for the review of each concept note and to book needed translation services. Based on the number and the type of concept notes expected, the TRP will convene an appropriate group of reviewers (in terms of the number of experts and areas of expertise/experience) to evaluate the concept notes submitted.

## **27. How does a country register for a TRP window?**

- CCMs should register their submission timings for each concept note on the online Grant Management Platform by choosing a concept note submission date in a drop-down menu.
- For information on how to access the platform, visit the [Grant Management Platform launch page](#).
- CCMs should also review in which language the concept note will be submitted.
- CCMs can register up to one month before the concept note submission deadlines.
- After this point, registration for that TRP window is closed and no additional concept notes will be accepted. The submission date will no longer appear in the drop down menu.
- Upon registration, an automatic email response confirming the registration will be sent to CCMs and Global Fund country teams stating their window and explaining the review process and timelines.
- Once a CCM confirms its registration, the registration for that concept note is fixed. In the case that the registration has been made in error or a change is needed, there will be an option to send a request to change the submission date in the online system.

- If a CCM requests a change, an automatic message will be sent to the Access to Funding department and the country team to confirm the proposed date. CCMs will be asked to provide a brief justification for the change in submission dates to help inform lesson learning.

## COUNTRY DIALOGUE

### **28. What is country dialogue and when would it start?**

Country dialogue is a process that is country owned and led. It forms part of and builds upon existing coordination mechanisms in health and development that are already taking place in many countries between governments, donors, technical partners, civil society and key populations.

CCMs take a leading role in coordinating the discussions around the submission of the Global concept note. Work on national strategies and resource mobilization should be ongoing and form the basis of this country dialogue to identify a country's prioritized needs and ultimately prepare the submission of concept notes to the Global Fund.

For more information on civil society's involvement in country dialogue, refer to the publication "[Engage! Practical tips to ensure the new funding model delivers the impact communities need.](#)"

### **29. Who should be a part of country dialogue?**

All the relevant actors need to be engaged, including CCMs; governments; the private sector; the public sector; civil society; academia; key populations and networks; and bilateral, multilateral and technical partners in country. The Secretariat's role is to support, participate and provide guidance where appropriate.

Inclusive concept note development is a Global Fund eligibility requirement for funding. The Global Fund will require proof that there was a transparent and inclusive process at the time of concept note submission. Concept notes will be sent back to CCMs for further work if they have not been developed in an inclusive manner.

### **30. What activities happen during country dialogue?**

Country dialogue activities contribute to the development of a robust health sector strategy, whereby synergies between the three diseases and other health priorities are achieved. The ultimate goal is that this strategy is fully costed and has been developed through a multi-stakeholder process and can be the basis of the development of a concept note.

Before concept note development, the Global Fund communicates to CCMs the allocation amount for which they may expect financing from the Global Fund during the three-year allocation period. Through country dialogue, a broad range of stakeholders discuss how to split and best use the funding allocation from the Global Fund across the eligible diseases and cross-cutting HSS interventions.

From this inclusive and transparent dialogue process, the CCM should:

- i. Decide on the funding amount to be designated for each eligible disease program or HSS within the current three-year allocation period;
- ii. Identify program gaps and rank the interventions by priority need, ideally based on the national strategies;
- iii. Develop the program based on prioritized gaps and begin to consider implementation arrangements (including the selection of Principal Recipients) to deliver this program;
- iv. Make preliminary assessments of potential implementers and systems to identify capacity and operational risk;
- v. Estimate the full expression of demand that the country has for the eligible diseases and HSS; and
- vi. Secure agreement on the government's financial commitment to provide funding for the three diseases and the health system overall.

### **31. Can applicants use current grant funds to fund activities during/for country dialogue?**

The CCM may agree to a non-material reprogramming of up to US\$ 150,000 of existing grant funds to support epidemiological and financial data gathering; program review and updating the national strategic plan; discussion of priorities and negotiation of objectives and targets; and similar activities during the preparatory stage of the application to the Global Fund.

However, the option for the CCM to use these funds should be taken after other sources of support have been considered or exhausted (e.g. other technical assistance funding from the French (FEI 5%), GIZ (BackUp) and USG (5%)). Note that the grant funds must not be used to write the Global Fund concept note.

### **32. How will the role of the Global Fund's country team be different?**

The Global Fund country team will play more of an active role to ensure that country dialogue and concept note development is inclusive and that key actors – including technical partners and key populations – are involved in discussions. The country team can share guidance material and best practices on country dialogue and provide guidance during the concept note development process. However, the concept note is owned by the country and the country team will not determine what to include in the concept note.

### **33. What can participants do if they do not feel they are being heard during country dialogue?**

If participants in country dialogue do not feel that their concerns are being adequately considered, their concerns should be discussed within the CCM. They may also escalate their concerns to the relevant Fund Portfolio Manager at the Global Fund Secretariat. The Fund Portfolio Manager may then choose to escalate further within the Secretariat as needed.

## **CONCEPT NOTE**

### **34. Do countries that received no new funds but have existing grants need to submit a concept note?**

There is a differentiated approach for countries that have received a small amount of additional funding or no new funding. Please contact your Fund Portfolio Manager for more details.

### **35. What should be included in the concept note?**

The concept note is the application to request new funds from the Global Fund for any one of the three diseases or cross-cutting support for HSS. It replaces the previous rounds-based proposal form, and it incorporates the modular template. The template replaces the performance framework, work plan and detailed budget.

In the concept note the applicant will be expected to justify why they need Global Fund funds and how they will effectively and efficiently use this investment for greatest impact in the fight against AIDS, tuberculosis and malaria.

Concept notes include information, such as:

- A description of the country's epidemiological situation, including health systems and barriers to access as well as the national response;
- Information on the national funding landscape and sustainability;
- The request to the Global Fund, which will consist of priority interventions to be funded from the allocation amount and interventions or program elements to be included in the above allocation request. The above allocation amount may be funded through available incentive funding (if eligible) or through additional resources should they become available.
- Implementation arrangements and risk assessment.

### **36. How will the Technical Review Panel review be different in the new funding model?**

The Technical Review Panel (TRP) continues to review new funding requests and material reprogrammings in an independent and transparent way. The TRP begins its review by assessing whether what is proposed is positioned for highest impact. This means that the concept note should be strategically focused and technically sound and that investments should have maximum impact with the available resources in a given context. The TRP makes its funding recommendation on the allocation amount and the above allocation amount, prioritizing interventions.

### **37. Why must applicants prioritize spending?**

Applicants must present a clear and prioritized concept note. Applicants need to show the strategic choices they made, given limited resources, to maximize the impact of Global Fund investments against the three diseases and to further health systems strengthening.

In the past rounds-based system, applicants had no funding limit to their requests. Under the new funding model with country allocations, applicants must provide a well-prioritized

request within their allocation amounts. Even if applicants are eligible for incentive funding, they should write their funding request as if they will not receive any additional funds.

**38. Must countries make the prioritization within and distinction between allocation and above allocation clear in the modular template alone or also in the narrative section?**

The allocation and above allocation priorities should be clear in both the narrative and the modular template. The funding package requested for above allocation interventions should also be included in the modular budget, but there is no need to describe various budget scenarios in detail.

**39. What happens if the Technical Review Panel asks for another iteration of a concept note?**

The TRP review is designed to work toward identifying the highest impact programs and is now oriented to reach to an outcome of “yes.” However, the TRP may deem that a concept note is not yet ready to advance to grant-making and request the applicant submit a revised concept note for another iteration. This is a radical change from what was previously required of the TRP. Following its review, the TRP is delegating more clarifications and/or adjustments to the Secretariat during grant-making and implementation.

TRP reviews are more frequent in the new funding model – up to four times a year. A CCM may represent a concept note for another iteration at any future review.

**40. How is grant-making different from the previous grant negotiations process?**

The Global Fund will begin the grant-making processes following the review of concept notes by the Technical Review Panel and Grant Approvals Committee before requesting Board approval. It is the Grant Approvals Committee that determines the upper ceiling for grant-making.

The Secretariat will work with applicants to transform technically sound concept notes into grants. By starting to think about implementation arrangements at the concept note stage, the new funding model will help ensure that issues and capacity gaps are resolved early on – with direct support from technical assistance partners. This process will help to avoid the imposition of numerous conditions precedent in grant agreements that can delay program implementation.

One additional difference is the potential for early release of funds for procurement and capacity building after the first Grant Approvals Committee review – even before Board approval of the grant.

**41. To what extent does the new funding model reduce timing between concept note and implementation?**

The focus on implementation planning before the concept note is submitted will reduce the time spent on grant-making between concept note approval and grant signing.

The estimated time between the submission of the concept note and the Board's approval (and grant signing) is eight months but can be longer if the TRP or GAC seek complex clarifications and/or amendments.

The process is country led, and timing will depend on a number of factors in country (e.g. whether or not the country has an updated and costed national strategic plan, the strength of the CCM, Principal Recipient performance, etc.). Based on this, the country will determine the target date for signature and the release of funding and will plan a timeline to achieve this.

#### **42. What is the role of technical partners?**

The new funding model relies on a close partnership with technical partners at country level. Partners, with their country presence, can play important, context-relevant and differentiated, mutually reinforcing roles in supporting countries through the country dialogue and concept note processes. Their support continues during grant-making.

Their role includes:

- i. Discussing the disease/health sector landscape with in-country stakeholder, mapping donor commitments and ensuring alignment;
- ii. Supporting the development of an accessible knowledge base of country studies, available data, etc.;
- iii. Assisting in the identification and prioritization of strategic investments for robust national strategic plans and concept notes;
- iv. Providing input in discussions around the program split;
- v. Reviewing program performance and impact data, as well as current trends of epidemiological context; and
- vi. Providing technical support in country as needed.

#### **43. What is a national strategic plan and who evaluates it?**

A national strategic plan (NSP) is either a disease specific or health sector national strategy that provides the overall strategic direction for a country over a period of time. That is often for five years.

NSPs should be reviewed by the appropriate technical partners. As part of this technical review and support process, NSPs should preferably be jointly assessed through a credible, independent, multi-stakeholder process that uses internationally agreed frameworks, such as a Joint Assessment of National Strategies (JANS). This is a shared approach in which country stakeholders and development partners carry out an independent assessment of an NSP against an internationally agreed set of criteria. The purpose of a JANS is to indicate the soundness of an NSP and its operational plan and indicate its potential as the basis for technical and financial support.

#### **44. What happens if my country does not have a national strategic plan?**

There are countries that do not have an NSP; have an NSP that is not up to date; or have an NSP that is not sufficiently robust, fully costed and/or cannot be used for the basis of a funding request to the Global Fund. In such cases, applicants should develop a full expression of prioritized demand for strategic interventions, developed in a manner that

complements existing national processes. For more information, please refer to the [Resource Book for Applicants](#).

#### **45. What happens if the timing of a concept note does not match the timing of the national strategic plan?**

While a concept note should be based on the national strategy, the Global Fund does not require that the timing of the concept note match the timing of the national strategic plan.

Various scenarios are envisioned:

- If the national strategic plan is complete and has been recently reviewed, the applicant should use existing documents when writing its concept note and no further reviews are needed.
- If the national strategic plan is still under development, or is being revised (for example, it is undergoing a mid-term review), applicants should consider delaying the concept note submission until the national strategic plan is developed. Preparation of the concept note can commence once a draft national strategic plan is in place. In some cases, grant approval may be subject to finalization of the national strategic plan development process.
- In situations where the national strategic plan runs out one or two years into the grant, applicants are asked to extrapolate in the concept note beyond the end of the national strategic plan and to explain the rationale for the requested funding. If the new national strategic plan incorporates substantive changes, grants can be reprogrammed to reflect updated strategies.
- In exceptional cases (for example, if there is no national strategic plan), countries may have to submit a project-type concept note, and include clear plans to strengthen their national strategic plan for the next allocation period.

Overall, decisions about submission dates for concept notes should take into account the status of the current national strategic plan, and if needed, the amount of time required to conduct national strategic plan review processes and/or the development of the relevant investment cases.

#### **46. Is there guidance available on how to apply for funds?**

The standard concept note and instructions are [available on the Global Fund website](#).

CCMs will complete their concept note (including the narrative, core tables, CCM eligibility and endorsement) using a new online Grant Management Platform. The Global Fund Secretariat will access the final application directly through this platform.

In exceptional cases only, and only with the advance approval of the Global Fund Secretariat, CCMs unable to submit concept notes online can submit their completed concept note, tables and templates to [accesstofunding@theglobalfund.org](mailto:accesstofunding@theglobalfund.org), copying their Fund Portfolio Manager.

More information on the [Grant Management Platform](#) is available on the Global Fund website.

## **COUNTRY COORDINATING MECHANISMS (CCMs)**

### **47. What will the role of CCMs be in the new funding model? Has it changed?**

CCMs will continue to be the primary entity responsible for submitting requests for new funding and overseeing grants. CCMs will need to align the timing of application requests to national cycles and ensure an appropriate distribution of funding across the three diseases and investments in health and community systems strengthening.

The CCM role has not changed. However, given the important role of country dialogue in the new funding model and the possibility for the CCM to take a leading role in coordinating these discussions and processes, the scope and involvement of the CCMs with other key stakeholders in discussions on health and development in the country is likely to increase.

### **48. How does CCM eligibility requirement 2 apply to countries in which the additional safeguard policy is in place?**

CCM eligibility requirement 2 relates to the nomination of new and continuing Principal Recipients, transparent process for such nominations and management of potential conflicts of interest that may affect the nomination process. The eligibility requirement that CCMs nominate Principal Recipients does not apply to those countries in which the Global Fund may directly nominate the Principal Recipient under the additional safeguard policy.

In these scenarios, the CCM should continue to document the nominations process and management of potential conflicts of interests.

### **49. How can civil society best work with the CCM?**

The best way civil society can work with the CCM is to be actively engaged in country dialogue to influence the content of the concept note, including the prioritized interventions.

In order for the concept note to be submitted, it must be endorsed and signed by CCM members who need to represent a wide range of constituents across the country. Country dialogue is critical to make sure the proposal is inclusive. CCMs are required to be comprised of a minimum of 40 percent of representation from national civil society sectors.

If the CCM is consistently unwilling to include civil society in country dialogue, then the group should escalate their concerns to the Fund Portfolio Manager. If the CCM does not include a required component of the application (e.g. an affected community), then a non-CCM funding application could be submitted. However, that is an exceptional situation.

For more information, refer to the publication "[Engage! Practical tips to ensure the new funding model delivers the impact communities need.](#)"

### **50. Are there going to be structural changes to encourage more civil society involvement?**

CCM eligibility requirements have been adjusted to encourage more engagement with civil society, such as increasing the mandatory number of key populations within the CCM. In its

concept note a CCM will need to explain how it engaged a broad range of stakeholders in the concept note development process and specifically how it engaged key populations.

Additionally, the Global Fund is piloting a way to increase funds for civil society engagement within the CCMs. Funds would be made available to support civil society to travel to CCM meetings and to have better access to communication materials.

## **ELIGIBILITY**

### **51. Has the eligibility policy changed?**

The eligibility policy was revised in November 2013 to align with the new funding model. However, the general principles have not changed. The eligibility determinations are based on the World Bank income classifications and disease burden estimates from WHO and UNAIDS. The [eligibility list for 2014](#) is available on the Global Fund website.

### **52. Which countries are eligible to request funding for cross-cutting health systems strengthening?**

Applicants can apply for cross-cutting health systems strengthening (HSS) interventions through a disease-specific concept note or separately through a stand-alone HSS concept note. However, upper-middle income countries which have a “high” disease burden are not eligible to apply separately for cross-cutting HSS funding. Upper-middle income countries are eligible to apply separately for cross-cutting HSS funding only if they have “severe” or “extreme” disease burdens.

### **53. What is the future of the “NGO rule”?**

The “NGO rule” remains unchanged. However, the revised policy provides for HIV grants funded under the NGO rule to receive a grace period of one allocation period after becoming ineligible due to changes in their income level classifications (including countries in the “high income” classification).

### **54. What is the fate of newly ineligible countries?**

Newly ineligible countries/components funded under an existing grant can remain eligible for funding for up to one allocation period. The Secretariat, based on country context and existing portfolio considerations, will determine the appropriate period and amount of funding. These transition measures do not include countries that have graduated to the “high income” classification (unless funded under the NGO rule).

## **REGIONAL APPLICATIONS**

### **55. What are the eligibility rules for regional and multi-country applicants?**

Eligibility rules for regional and multi-country applicants have not changed:

- The majority (at least 51 percent) of countries included in the application must be eligible in their own right for the disease being requested.
- Regional and multi-country applicants need not comply with the counterpart financing requirements.
- Regional and multi-country applicants must comply with the “focus of application” requirements and clearly demonstrate the value-added of a regional approach.
- Eligibility requirements for Regional Coordinating Mechanisms and regional organizations still apply.

## **56. What is the process for applying for regional grants?**

The Global Fund will continue to support strategically focused regional applications that are designed to achieve impact and clearly demonstrate the value-added of a regional approach

A two-step process is in place for regional applications:

- First, applicants will submit an expression of interest to the Global Fund. Through this first step, the Global Fund will assess whether the applicant meets eligibility criteria and regional requirements and competitively assess whether the “concept” is strong enough for further development as a regional concept note.
- If an applicant meets the eligibility requirements and is positively assessed for strategic impact, the applicant will be invited to develop a concept note to be submitted to the Global Fund.

For more information and application materials, please refer to the [Multi-Country and Regional Applicants](#) pages of the Global Fund website.

## **57. What are the deadlines to submit an expression of interest?**

The first date for the Global Fund to receive an expression of interest was 1 May 2014. Outcomes of this review will be communicated in sufficient time for regional applicants to prepare concept notes for submission in January 2015, for review by the Technical Review Panel at the February 2015 TRP window.

A second opportunity to submit expressions of interest will be 1 April 2015.

## **58. How much funding is available for regional grants?**

The Global Fund Board has set aside US\$ 200 million for new regional programs over the 2014-2016 allocation period. Approximately half of the available resources will be set aside for each call for expressions of interest.

### **TECHNICAL ASSISTANCE**

## **59. What technical assistance is available to ensure compliance with the CCM eligibility requirements?**

CCMs are required to carry out an annual CCM eligibility and performance assessment and produce a complete diagnostic. That diagnostic includes facilitating a self-assessment and

evaluating CCM compliance levels with eligibility requirements and minimum standards to determine the level of functionality of the CCM.

CCMs should request technical assistance in order to facilitate this self-assessment. [A list of technical assistance providers](#) who can help with the self-assessment is available on the Global Fund website.

## **60. What technical assistance is available for concept note development?**

There are a variety of bilateral partners (including the U.S. Government and French 5%) and multilateral partners available to help countries with various technical topics before, during and after concept note development.

The Global Fund has developed partnership agreements with WHO and UNAIDS to provide technical assistance to Global Fund applicants under the new funding model ahead of the submission of their concept notes. CCMs and civil society organizations can apply for this assistance. WHO will provide assistance through its country or regional offices and with the Roll Back Malaria and STOP TB partnerships, while UNAIDS will work through country offices and regional support teams. Contact your country team for more information.

The Global Fund Community, Rights and Gender department maintains a technical assistance program to which eligible domestic organizations can apply. Contact [CRGTA@theglobalfund.org](mailto:CRGTA@theglobalfund.org) for more information.

The Global Fund offers written guidance on disease programs and health systems strengthening. Please refer to the [Strategic Investment Guidance and Information Notes](#) page.