Frequently Asked Questions: The Register of Unfunded Quality Demand

July 2020

1. Selection Process and Eligibility for the Register

What is the Register of Unfunded Quality Demand?
Countries are encouraged to include with their funding application a ‘Prioritized Above Allocation Request’ to fund priority programs that should, but cannot yet, be fully funded. The request is reviewed by the Technical Review Panel so that strategically focused and technically sound interventions can be added to the Register of Unfunded Quality Demand.

Why are countries encouraged to summit a Prioritized Above Allocation Request?
Applicants are encouraged to prepare a prioritized above allocation request that can be assessed for unfunded quality demand, as this ensures countries have pre-approved interventions to integrate into grants when savings or efficiencies are found during grant-making, or to include through reprogramming during implementation if additional funding becomes available.

How are items added to the Register of Unfunded Quality Demand?
All submitted Prioritized Above Allocation Requests will be reviewed by the Technical Review Panel and technically strong interventions will be placed on the Registered of Unfunded Quality Demand.

How much should go into a Prioritized Above Allocation Request?
The general guidance is the Prioritized Above Allocation Request should represent at least 30-50 percent more than the allocation amount (unless otherwise advised by a Global Fund country team).

How are interventions on the Register of Unfunded Quality Demand funded? The interventions on the Register of Unfunded Quality Demand can be funded from several sources throughout the grant life cycle: Global Fund portfolio optimization, private sector investments, or Debt2Health agreements.

Will all interventions on the Register of Unfunded Quality Demand be funded?
No. An intervention’s inclusion on the register does not mean it will necessarily be funded.

Are all disease component interventions eligible to be included on the Register of Unfunded Quality Demand?
Yes. The quality demand from HIV, TB, malaria, joint TB/HIV and investments in resilient and sustainable systems for health are eligible to be placed on the register.
What should go into the PAAR versus the allocation amount?

Applicants should prioritize highest-impact interventions for the allocation amount, to ensure that critical activities for program success are not delayed in the event that above-allocation funding does not materialize or is obtained later in the funding cycle.

Interventions requested in the PAAR should logically complement and maximize the impact of the activities included in the allocation request but activities that are linked should be either both in the allocation or both in the PAAR.

What should NOT go into the PAAR?

Essential interventions should be well prioritized and should not be in the PAAR.

Inputs for essential interventions should be prioritized in the allocation request along with the intervention. For example, if an essential service is in the allocation request, the commodities and program management costs for that service should also be in the allocation request.

Are multicountry applications eligible to have interventions on the Register of Unfunded Quality Demand?

All applicants, including multicountry applicants, are encouraged to submit a Prioritized Above Allocation Request to be assessed for unfunded quality demand.

How are the interventions in the Register of Unfunded Quality Demand listed?

The interventions are listed alphabetically within each disease component with filters that allow the user to sort by region, country, disease component, module and intervention.

How long does an item stay on the register of Unfunded Quality Demand?

An intervention can remain on the register for up to three years from the date on which the entry is confirmed on the register.

How frequently is the register updated?

The register is updated when new items are added, and published quarterly if there are new entries.

2. Financing Interventions from the Register

Who can finance interventions from the register?

Interventions on the Register of Unfunded Quality Demand can be financed through the Global Fund if resources become available (e.g. savings or efficiencies found during grant-making). Each year, the Global Fund Board’s Audit and Finance Committee will carry out an assessment of additional Global Fund resources that may be available to finance interventions on the Register of Unfunded Quality Demand. Funding is then awarded to interventions on the register based on the Prioritization Framework.

Additionally, resources can be channeled from eligible donors to specific country interventions (through the Global Fund). These donors can include private donors (such as corporations, foundations and individuals) and approved public mechanisms (e.g. UNITAID and Debt2Health).

Donors may also select interventions from the Register of Unfunded Quality Demand and work directly with the country to fund these programs.

What is the Global Fund process for financing interventions on the register?
The Audit and Finance Committee approves the amount of additional funding available to finance items on the register based on the assessment presented by the Global Fund. The identification of specific interventions for financing from the Register of Unfunded Quality Demand will be guided by the Prioritization Framework.

**How much of the register is expected to be funded?**

It is not possible for the Global Fund to determine the amount of additional funding that will become available during each funding cycle. However, during the 2017-2019 cycle more than US$1.2 billion in interventions from the Register of Unfunded Quality Demand have been funded to date. These interventions have primarily been funded through efficiencies identified during grant making, as well as additional Portfolio Optimization funds and some private sector and Debt2Health contributions.

**Can donors select the intervention they fund?**

Donors can search the register by region, country, disease component and intervention to identify quality demand in an area of interest. Private sector donors may select the country and disease component they would like to fund, however, the precise intervention cannot be selected. See the Amended and Restated Global Fund Policy for Restricted Financial Contributions for more details.

**Can donors select items from the register to finance independently or must the interventions be financed through the Global Fund?**

Eligible donors can fund items on the register through the Global Fund or by independently coinvesting in items on the register through their own funding systems.