

Our Reference: C19RM ADDITIONAL FUNDING - Peru

Geneva, 23 March 2023

Dr. Rosa Gutierrez Palomino
Minister of Health
Ministry of Health of Peru
Av. Salaverry 801
Jesús María, Lima
Republic of Peru

Subject: COVID-19 Response Mechanism Additional Award for Peru

Dear Dr. Rosa Gutierrez Palomino,

Thank you for your commitment in the fight against the COVID-19 pandemic.

The Global Fund has reviewed your COVID-19 Response Mechanism (**C19RM**) Additional Funding Request and approved **US\$4,562,801** of additional investments for your country's COVID-19 response (**C19RM Additional Award**). The C19RM Additional Award is additional to any C19RM funding awarded to your country to date and brings your total C19RM award (including all other C19RM awards received to date) to **\$21,312,039 (C19RM Total Award)**.

The C19RM Additional Award will become part of the grant (**Grant**) listed in the table below:

Grant	Amount Awarded (US\$)	Implementation Period date
PER-C-SES	4,562,801	July 2022 – December 2025

The C19RM Additional Award has been approved to cover interventions and activities in the following strategic priority areas: Laboratory systems & Diagnostic Networks and TB Mitigation.

A breakdown of the approved interventions and activities that will be covered by the C19RM Additional Award will have to be provided by the Principal Recipient by 23 April 2023. Activities relating to the C19RM Additional Award cannot be initiated until the Principal Recipient provides the approved Additional Funding C19RM Budget (C19RM Budget) and Additional Funding C19RM Health Products Management Template (C19RM HPMT).

While the deadline for use of the C19RM Additional Award is **31 December 2025**, recipients are expected to use these funds **as soon as possible** to address urgent needs and only for the purposes for which the funding was approved and pursuant to the terms and conditions of the corresponding grant agreements for the Grant (**Grant Agreement**) and this letter. Reinvestment of currently unutilized C19RM funds is strongly encouraged to support further investment in identified priorities in key components of RSSH that underpin the COVID-19 response and strengthen pandemic preparedness. C19RM Additional Awards should complement reinvestment efforts to finance unfunded demand in these areas. Applicants will be expected to demonstrate effective utilization of existing C19RM funds and/or provide details on reinvestment of such funds.

Specifically, the Principal Recipient is expected to place necessary procurement requisitions for approved health products (whether through PPM/wambo.org or approved channels) as swiftly as possible. For your country, the Principal Recipient is expected to submit initial requisitions for PPM/wambo.org orders by no later than 23 April 2023.

The Principal Recipient is expected to incorporate the C19RM Additional Award into the Grant in July 2023 and in any event must complete the revision process by no later than 30 November 2023¹. The Principal Recipient may need to submit to the Global Fund for approval, a stand-alone performance framework setting out targets for the C19RM Additional Award that will form part of the relevant Grant agreement (**C19RM Performance Framework**). The Global Fund will provide a template for the C19RM Performance Framework and notify each Principal Recipient of the timeline for its submission, along with relevant guidance.

The Global Fund Country Team will be in touch with the Principal Recipient to discuss the process for initiating implementation of the approved C19RM activities, as well as on reinvestment of currently unutilized C19RM funds to support further investment in identified priorities in key components of RSSH that underpin the COVID-19 response and strengthen pandemic preparedness.

We stand ready to support **Peru** in responding to the COVID-19 pandemic, which threatens to destroy years of progress against HIV and TB. To defeat COVID-19, protect progress against HIV and TB, and save lives, we must unite to fight.

Yours sincerely,



Mark Eldon-Edington
Division Head
Grant Management

¹ Grants that do not have available uncommitted funds must complete the revision process immediately and before activities approved under the C19RM Additional Award can be initiated.

Cc: Dr. Leonid Lecca, Executive Director, Socios en Salud Sucursal Perú

encl: C19RM Procurement Progress Reporting Template
Annex 1: Requirements and Recommendations for use of the C19RM
Additional Award for Peru

Annex 1: Requirements and Recommendations for use of the C19RM Additional Award² for Peru

Legal Requirements to form part of the Grant Agreement

1. The Program budget includes funding granted under the Global Fund COVID-19 Response Mechanism (“C19RM Funds”) programmed towards activities to respond to the COVID-19 pandemic (“C19RM Activities”). Notwithstanding anything to the contrary in the Grant Agreement, C19RM Funds must remain invested in C19RM Activities and cannot be used after 31 December 2025, unless otherwise expressly agreed in writing by the Global Fund.
2. C19RM Health Products Reporting
 - a. Each Principal Recipient shall adhere to the procurement channel arrangements approved in the enclosed C19RM HPMT for each relevant Grant Agreement and shall not make any amendments to these arrangements without the prior written approval of the Global Fund.
 - b. Each Principal Recipient shall, by the relevant procurement reporting date defined in the Global Fund C19RM Guidelines³, complete and submit to the Global Fund’s satisfaction the C19RM Procurement Progress Reporting Template setting out the: (i) purchase order issue date; (ii) vendor-promised delivery date; (iii) date of product dispatch from the manufacturer; and (iv) date of product delivery, for each:
 - (I) C19RM Strategic Health Product and Mainstream Health Product procured outside of the Global Fund’s Pooled Procurement Mechanism (“PPM”); and
 - (II) C19RM Local Sourcing Advised Products with Enhanced Reporting, (each, a “Reportable Health Product”).

For each Reportable Health Product, the final procurement reporting date shall be the relevant reporting date that falls immediately after the Reportable Health Product has been fully delivered to the Principal Recipient.

- c. Each Principal Recipient shall take all appropriate and necessary actions to ensure that any relevant Sub-recipient, supplier, contractor or agent provides the Principal Recipient with such information as may be required for the Principal Recipient to comply with its obligations set out in paragraph b above.

² The applicant and Principal Recipient will note that some of these recommendations also apply to prior C19RM awards and will have been previously communicated to the applicant and Principal Recipient.

³ As may be amended from time-to-time and notified to the Principal Recipient in writing.

Other recommendations to be addressed during implementation:

1. The Principal Recipient is requested to ensure that funding is allocated to operational research, to be implemented alongside the active case finding work, to allow for adaptation and improving intervention effectiveness.
2. Prior to the procurement of the laboratory freezer, refrigerator, x-ray equipment and biosafety cabinets, the Principal Recipient is requested to submit tender documentation in writing to the Global Fund for review and approval.

Ref.: LAC/GP/ADG/GL/PER-C-SES IL2 Addition of C19RM Funds

Geneva, 31 July 2023

Dr. Leonid Lecca Garcia
Executive Director
Socios en Salud sucursal Peru
Jirón Puno 279, Cercado de Lima
15001 Lima
Republic of Peru

Subject: Grant: PER-C-SES
Principal Recipient: Socios en Salud sucursal Peru
Implementation Letter Number: 2¹
Grant Revision

Dear Dr Lecca Garcia

Reference is made to the Grant Confirmation dated 9 June 2022 (as amended from time to time, the “**Grant Confirmation**”) between the Global Fund to Fight AIDS, Tuberculosis and Malaria (the “**Global Fund**”) and Socios en Salud sucursal Peru (the “**Principal Recipient**” on behalf of Partners in Health, a Nonprofit Corporation (the “**Grantee**”) for grant PER-C-SES (the “**Grant**”). Unless defined in this Implementation Letter or the context otherwise requires, all capitalized terms used in this letter have the meaning set out in the Grant Confirmation.

The Global Fund has approved additional funding for COVID-19 support. As a result, this letter increases the Grant Funds for the Implementation Period by US\$ 4,562,801 and also amends the Summary Budget included in Schedule I (Integrated Grant Description) of the Grant Confirmation.

Accordingly, we propose making the following changes to the Grant Confirmation:

1. The table in Section 3 of the Grant Confirmation is hereby deleted and replaced with the revised table annexed to this letter.
2. The Summary Budget is hereby deleted and replaced with the revised Summary Budget annexed to this letter.
3. The requirement at Section 6.6 of the Grant Confirmation is hereby deleted and replaced with the following:

¹ The Grant Confirmation was modified before by Implementation Letter dated 22 June 2023.

6.6. *The Program budget includes USD 13,218,651 in funding granted under the Global Fund COVID-19 Response Mechanism (“C19RM Funds”) programmed towards C19RM eligible investments, as defined in the C19RM Guidelines available on the Global Fund’s website (“C19RM Eligible Investments”). Notwithstanding anything to the contrary in the Grant Agreement, C19RM Funds must remain invested in C19RM Eligible Investments and cannot be used after 31 December 2023, unless otherwise expressly agreed in writing by the Global Fund.*

By signing this letter, the Principal Recipient represents that: (i) it has all necessary power, is duly authorized by or has all necessary consents, approvals and authorizations to execute and deliver this letter; and (ii) the execution, delivery and performance by the Principal Recipient on behalf of the Grantee of this letter does not violate or conflict with applicable law, any provision of the Grantee’s or the Principal Recipient’s constitutional documents, any order or judgment of any court or competent authority, or contractual restriction binding on or affecting the Grantee or the Principal Recipient.

Other than as modified by this letter, all provisions of the Grant Agreement remain the same.

Please confirm your agreement to the amendments herein by signing this letter and returning a copy to the Global Fund by electronic messaging system. These amendments will be effective upon the signing of this letter by an authorized representative of Global Fund Grant Financial Management and a fully executed electronic copy of this letter will be sent to you for your records.

Thank you for your important efforts in the global fight against HIV and AIDS, and tuberculosis. We look forward to the continued successful implementation of the Program.

Yours sincerely



Giulia Perrone
Regional Manager
Latin America and the Caribbean
Grant Management Division

Agreed and signed:

Socios en Salud sucursal Peru
on behalf of Partners in Health, a Nonprofit Corporation

By: _____
Name: Dr Leonid Wilbert Lecca Garcia
Title: Executive Director

Date:

encl.: Amended Grant Confirmation table
Amended Summary Budget

cc: Dr César Henry Vásquez Sánchez, CCM Chair, Minister of Health of the Republic of Peru
Mr Juan Malagon, PricewaterhouseCoopers Asesores Gerenciales S.A.S., Local Fund Agent

Signed by the Grant Finance Manager for the recognition of this agreement by the Global Fund.

By: _____
Shevone Corbin
Grant Finance Manager
Grant Financial Management

Date:

Annex 1

3.1.	Host Country or Region:	Republic of Peru
3.2.	Disease Component:	HIV/AIDS, Tuberculosis
3.3.	Program Title:	Reduce the burden of HIV and TB in Peru by ensuring access to quality and timely comprehensive health services
3.4.	Grant Name:	PER-C-SES
3.5.	GA Number:	2973
3.6.	Grant Funds:	Up to the amount of USD 31,523,743.00 or its equivalent in other currencies
3.7.	Implementation Period:	From 1 July 2022 to 31 December 2025 (inclusive)
3.8.	Principal Recipient:	Socios en Salud sucursal Peru Jirón Puno 279, Cercado de Lima. 15001 Lima Republic of Peru Attention Dr. Leonid Lecca Garcia Executive Director Telephone: Facsimile: Email: llecca_ses@pih.org
3.9.	Fiscal Year:	1 January to 31 December
3.10.	Local Fund Agent:	PricewaterhouseCoopers Asesores Gerenciales S.A.S. Calle 100 No. 11 a 35 FL 8 110221 Bogotá Republic of Colombia Attention Mr. Juan Malagon Team Leader Telephone: +5716684999 Facsimile: +571 218 8544 Email: juan.malagon@co.pwc.com
3.11.	Global Fund contact:	The Global Fund to Fight AIDS, Tuberculosis and Malaria Global Health Campus, Chemin du Pommier 40 1218 Grand-Saconnex, Geneva, Switzerland Attention: Giulia Perrone Regional Manager

		<p>Grant Management Division</p> <p>Telephone: +41 58 791 1700 Facsimile: +41 44 580 6820 Email: giulia.perrone@theglobalfund.org</p>
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Country	Peru
Grant Name	PER-C-SES
Implementation Period	01-Jul-2022 - 31-Dec-2025
Principal Recipient	Socios en Salud sucursal Peru

By Module	01/07/2022 - 30/09/2022	01/10/2022 - 31/12/2022	Total Y1	01/01/2023 - 31/03/2023	01/04/2023 - 30/06/2023	01/07/2023 - 30/09/2023	01/10/2023 - 31/12/2023	Total Y2	01/01/2024 - 31/03/2024	01/04/2024 - 30/06/2024	01/07/2024 - 30/09/2024	01/10/2024 - 31/12/2024	Total Y3	01/01/2025 - 31/03/2025	01/04/2025 - 30/06/2025	01/07/2025 - 30/09/2025	01/10/2025 - 31/12/2025	Total Y4	Grand Total	% of Grand Total
COVID-19	\$945,922	\$1,811,631	\$2,757,553	\$3,729,077	\$976,066	\$1,299,438	\$1,021,997	\$7,026,578	\$1,392,079	\$1,274,954	\$297,347		\$2,964,380						\$12,748,511	38.5 %
Differentiated HIV Testing Services	\$50,276	\$83,594	\$133,869	\$341,618	\$172,937	\$174,475	\$106,495	\$795,525	\$82,120	\$58,260	\$41,651	\$35,496	\$217,528	\$34,265	\$1,976	\$1,422	\$1,129	\$38,792	\$1,185,715	3.6 %
MDR-TB	\$33,808	\$116,273	\$150,081	\$806,621	\$269,505	\$323,570	\$956,570	\$2,356,266	\$463,184	\$428,612	\$395,569	\$316,233	\$1,603,597	\$180,210	\$58,487	\$31,614	\$1,278	\$271,590	\$4,381,534	13.2 %
Prevention		\$42,161	\$42,161	\$97,677	\$178,460	\$169,106	\$204,112	\$649,354	\$204,112	\$204,112	\$157,950	\$157,950	\$724,124	\$90,631				\$90,631	\$1,506,271	4.5 %
Program management	\$218,895	\$270,249	\$489,144	\$240,536	\$234,282	\$238,973	\$266,329	\$980,119	\$161,347	\$161,347	\$166,215	\$154,215	\$643,126	\$153,348	\$153,348	\$143,553	\$123,964	\$574,212	\$2,686,602	8.1 %
Reducing human rights-related barriers to HIV/TB services	\$2,154	\$15,726	\$17,880	\$228,637	\$191,867	\$52,328	\$36,798	\$509,630	\$113,124	\$21,240	\$4,514	\$11,523	\$150,401	\$10,135	\$6,873	\$8,160		\$25,168	\$703,079	2.1 %
RSSH: Community systems strengthening	\$31,929	\$63,469	\$95,398	\$92,526	\$79,237	\$84,859	\$113,183	\$369,805	\$88,334	\$82,712	\$51,156	\$34,435	\$256,637	\$26,897	\$15,146	\$14,991		\$57,034	\$778,874	2.4 %
RSSH: Health management information systems and M&E	\$58,261	\$134,577	\$192,838	\$240,677	\$160,540	\$160,540	\$270,657	\$832,414	\$97,660	\$92,361	\$83,129	\$128,513	\$401,662	\$78,938	\$77,261	\$61,985	\$85,757	\$303,942	\$1,730,856	5.2 %
TB care and prevention	\$13,823	\$144,499	\$158,322	\$838,390	\$488,980	\$487,714	\$322,576	\$2,137,660	\$140,946	\$59,131	\$65,151	\$93,729	\$358,957	\$24,090	\$32,195	\$22,000		\$78,285	\$2,733,224	8.2 %
TB/HIV		\$21,924	\$21,924	\$1,444,975	\$139,538	\$125,507	\$122,406	\$1,832,425	\$203,640	\$98,171			\$301,810						\$2,156,159	6.5 %
Treatment, care and support	\$171,908	\$296,234	\$468,142	\$408,363	\$331,516	\$340,987	\$475,424	\$1,556,290	\$140,232	\$133,423	\$70,697	\$72,578	\$416,930	\$61,879	\$6,619	\$7,485	\$7,658	\$83,641	\$2,525,002	7.6 %
Grand Total	\$1,526,976	\$3,000,337	\$4,527,313	\$8,469,096	\$3,222,927	\$3,457,498	\$3,896,546	\$19,046,068	\$3,086,777	\$2,614,323	\$1,333,379	\$1,004,673	\$8,039,152	\$660,393	\$351,906	\$291,210	\$219,787	\$1,523,295	\$33,135,828	100.0 %

By Cost Grouping	01/07/2022 - 30/09/2022	01/10/2022 - 31/12/2022	Total Y1	01/01/2023 - 31/03/2023	01/04/2023 - 30/06/2023	01/07/2023 - 30/09/2023	01/10/2023 - 31/12/2023	Total Y2	01/01/2024 - 31/03/2024	01/04/2024 - 30/06/2024	01/07/2024 - 30/09/2024	01/10/2024 - 31/12/2024	Total Y3	01/01/2025 - 31/03/2025	01/04/2025 - 30/06/2025	01/07/2025 - 30/09/2025	01/10/2025 - 31/12/2025	Total Y4	Grand Total	% of Grand Total
Human Resources (HR)	\$879,597	\$1,003,170	\$1,882,767	\$1,239,727	\$1,201,194	\$896,281	\$901,083	\$4,238,286	\$677,686	\$671,743	\$477,137	\$433,428	\$2,259,994	\$338,118	\$168,953	\$147,411	\$127,822	\$782,303	\$9,163,350	27.7 %
Travel related costs (TRC)	\$183,921	\$341,267	\$525,188	\$541,390	\$384,598	\$605,004	\$668,167	\$2,199,158	\$826,364	\$753,063	\$234,623	\$80,372	\$1,894,422	\$72,136	\$53,211	\$42,903	\$9,252	\$177,503	\$4,796,271	14.5 %
External Professional services (EPS)	\$372,373	\$795,020	\$1,167,393	\$1,489,403	\$1,179,178	\$1,212,592	\$1,052,847	\$4,934,021	\$996,418	\$896,196	\$551,029	\$388,827	\$2,832,470	\$194,203	\$98,416	\$78,146	\$60,112	\$430,877	\$9,364,761	28.3 %
Health Products - Pharmaceutical Products (HPPP)				\$299,950			\$247,814	\$547,765											\$547,765	1.7 %
Health Products - Non-Pharmaceuticals (HPNP)		\$7,849	\$7,849	\$1,798,636	\$31,583	\$60,086	\$172,341	\$2,062,645	\$101,414				\$101,414						\$2,171,908	6.6 %
Health Products - Equipment (HPE)	\$5,963	\$97,427	\$103,389	\$712,228		\$223,156	\$49,509	\$984,893	\$89,136	\$154,848	\$14,072	\$35,437	\$293,493		\$8,171			\$8,171	\$1,389,946	4.2 %
Procurement and Supply-Chain Management costs (PSM)		\$3,980	\$3,980	\$1,055,712	\$10,393	\$34,705	\$240,844	\$1,341,653	\$49,752				\$49,752						\$1,395,385	4.2 %
Infrastructure (INF)		\$456,809	\$456,809	\$593,400	\$140,841	\$151,247	\$148,352	\$1,033,840											\$1,490,649	4.5 %
Non-health equipment (NHP)	\$6,767	\$134,987	\$141,754	\$510,959	\$61,088	\$122,849	\$167,756	\$862,651	\$123,009	\$36,313	\$2,202	\$12,294	\$173,818	\$1,620	\$1,129	\$1,279	\$1,129	\$5,158	\$1,183,381	3.6 %
Communication Material and Publications (CMP)		\$57,815	\$57,815	\$78,435	\$64,795	\$2,321	\$32,571	\$178,121	\$106,066				\$106,066						\$342,003	1.0 %
Indirect and Overhead Costs	\$28,528	\$28,528	\$57,057	\$27,374	\$27,374	\$27,374	\$117,245	\$199,368	\$18,915	\$18,915	\$18,915	\$18,915	\$75,659	\$18,915	\$18,915	\$18,915	\$18,915	\$75,659	\$407,743	1.2 %
Living support to client/ target population (LSCPT)		\$2,557	\$2,557	\$2,557	\$2,557	\$2,557	\$2,557	\$10,227	\$2,557	\$2,557	\$2,557	\$2,557	\$10,227	\$2,557	\$2,557	\$2,557	\$2,557	\$10,227	\$33,236	0.1 %
Payment for Results	\$49,827	\$70,927	\$120,754	\$119,326	\$119,326	\$119,326	\$95,461	\$453,440	\$95,461	\$80,689	\$32,844	\$32,844	\$241,837	\$32,844	\$554			\$33,398	\$849,429	2.6 %
GrandTotal	\$1,526,976	\$3,000,337	\$4,527,313	\$8,469,096	\$3,222,927	\$3,457,498	\$3,896,546	\$19,046,068	\$3,086,777	\$2,614,323	\$1,333,379	\$1,004,673	\$8,039,152	\$660,393	\$351,906	\$291,210	\$219,787	\$1,523,295	\$33,135,828	100.0 %

By Recipients	01/07/2022 - 30/09/2022	01/10/2022 - 31/12/2022	Total Y1	01/01/2023 - 31/03/2023	01/04/2023 - 30/06/2023	01/07/2023 - 30/09/2023	01/10/2023 - 31/12/2023	Total Y2	01/01/2024 - 31/03/2024	01/04/2024 - 30/06/2024	01/07/2024 - 30/09/2024	01/10/2024 - 31/12/2024	Total Y3	01/01/2025 - 31/03/2025	01/04/2025 - 30/06/2025	01/07/2025 - 30/09/2025	01/10/2025 - 31/12/2025	Total Y4	Grand Total	% of Grand Total
PR	\$1,526,976	\$3,000,337	\$4,527,313	\$8,469,096	\$3,222,927	\$3,457,498	\$3,896,546	\$19,046,068	\$3,086,777	\$2,614,323	\$1,333,379	\$1,004,673	\$8,039,152	\$660,393	\$351,906	\$291,210	\$219,787	\$1,523,295	\$33,135,828	100.0 %
Socios en Salud sucursal Peru	\$1,526,976	\$3,000,337	\$4,527,313	\$8,469,096	\$3,222,927	\$3,457,498	\$3,896,546	\$19,046,068	\$3,086,777	\$2,614,323	\$1,333,379	\$1,004,673	\$8,039,152	\$660,393	\$351,906	\$291,210	\$219,787	\$1,523,295	\$33,135,828	100.0 %
Grand Total	\$1,526,976	\$3,000,337	\$4,527,313	\$8,469,096	\$3,222,927	\$3,457,498	\$3,896,546	\$19,046,068	\$3,086,777	\$2,614,323	\$1,333,379	\$1,004,673	\$8,039,152	\$660,393	\$351,906	\$291,210	\$219,787	\$1,523,295	\$33,135,828	100.0 %