Stop TB Partnership’s work with Global Fund
An update
Stop TB work with Global Fund since last Board meeting (March 2023)

• Country support
  • Grant Cycle 7 (GC7) funding request (20 countries)
  • NSP development (6 countries)
  • Program reviews (11 countries)
  • CRG support
    • Support for other specific thematic areas
• TB Situation Room
• Grant Approval Committee (several country grants for TB and C19RM, 16 meetings of GAC)
• GC6 Strategic Initiative concluding work
• Global Fund Board
Global Fund Grant Cycle 7 (GC7)

- More ambitious country funding requests than ever before
- Large unfunded quality demand (UQD)
  - US$1.2 billion
- Opportunities
  - C19RM
  - Savings / portfolio optimization
  - Increased domestic budgets
  - Innovative financing
Gap in country national TB responses is bigger than UQD

At least UQD can be prioritized for funding, but funding gap is much bigger
Loan Buy Downs

Successful World Bank Loan Buy Downs by Global Fund for TB

- India 400 million World Bank loan
  - 2019 to 2024
- Indonesia 300 million World Bank Loan
  - 2023 to 2027

Can be done in more countries
Universal access to Rapid Molecular Tests

WHO Standard Benchmarks and Global Fund ‘Program Essentials’ have recommended universal access to rapid molecular diagnostics

- **Global Fund TB Program Essentials**
  - “1.2 Multiyear plan to achieve universal use of rapid molecular assays as the initial test to diagnose TB for all people with presumptive”

- **WHO standard**: Universal access to rapid TB diagnostics. Benchmarks:
  - “3. In all facilities in all districts, the TB diagnostic algorithm requires the use of a WRD as the initial diagnostic test for all individuals with presumed TB, ...”
  - “4. All primary health-care facilities have access to WRDs (on site or through sample referral).”
  - “5. All individuals with TB have access to a WRD as the initial diagnostic test.”
  - “6. WRD testing capacity meets expected needs, including surge capacity, according to the latest data.”
Universal access to Rapid Molecular Tests

Problem:
In 2022 only 47% of people diagnosed with TB received a rapid molecular test

Reason:
• Insufficient TB budget allocations limiting the deployment of molecular diagnostic instruments and forcing programs to adopt restrictive algorithms
• Unfunded demand for GeneXpert products of approximately 111 million USD and 213 million USD in Global Fund Grant Cycles 6 and 7, respectively

Opportunity:
• 20% price drop in Xpert and Truenat test prices
  • Xpert MTB/RIF Ultra from $9.98 to $7.97; Truenat from $9.00 to $7.90
• Better maintenance agreements as a result of the Global Fund/Stop TB/USAID negotiations in 2023
• More ambitious country plans
• C19RM funding
Global Fund Investment Case for 8th Replenishment (allocation period 2026-2028)

- Investment case needs to be aligned with the UNHLM targets and commitments and Global Plan to End TB 2023-2028
- Resource needs for TB will be higher than previous investment case
Global Fund allocations to 3 diseases: methodology is under review

- Global Fund allocation to TB is low (18-19%)
- Equitable and fair allocation needed considering
  - TB kills more people than HIV and Malaria put together
- There is opportunity now
  - Independent assessment of Allocation Methodology and Process underway
    - By Ernest & Young (EY)
    - Change (if any) will apply to next allocation period
- Secretariat requests the support of Stop TB Board constituencies
Thank you