

The New Funding Model of the Global Fund

September 2012

Introduction

The Global Fund is developing a **new funding model** as part of its transformation

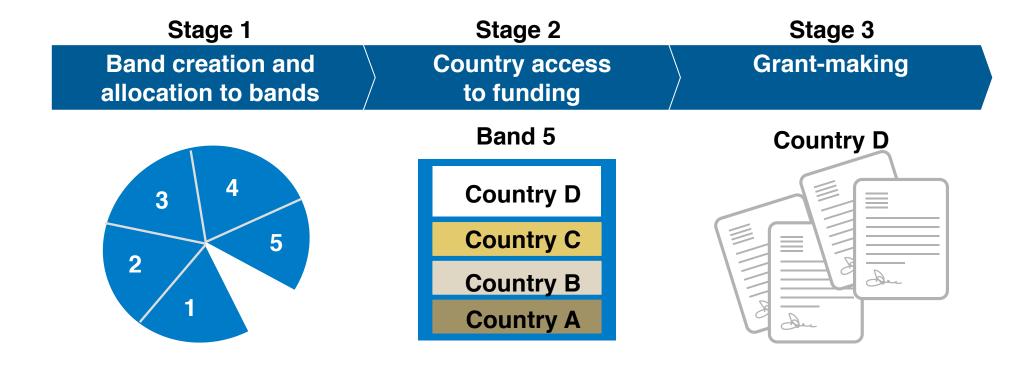
The aim of this presentation is to:

- Introduce the key principles agreed at the 27th Board meeting
- Explain the agreed elements of the new funding model
- Describe the next steps and areas of work to finalize by the 28th Board meeting in November

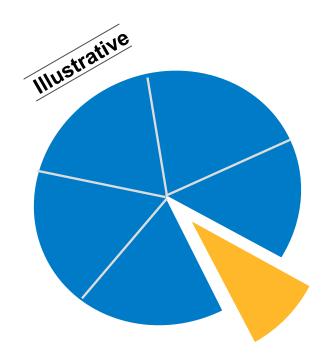
Principles for the new funding model

- 1 Consistency with the Strategy Investing for impact
- 2 Greater alignment with country-level schedules, context, and priorities
- 3 Focus on countries with the highest disease burden and lowest ability to pay, while keeping the portfolio global
- 4 Simplicity for both implementers and the Global Fund
- 5 Predictability of process and financing levels, consistent with global accords in Paris, Accra, and Busan
- 6 Ability to elicit full expressions of demand and reward ambition

Key stages of the new funding model



Stage 1: Bands of countries

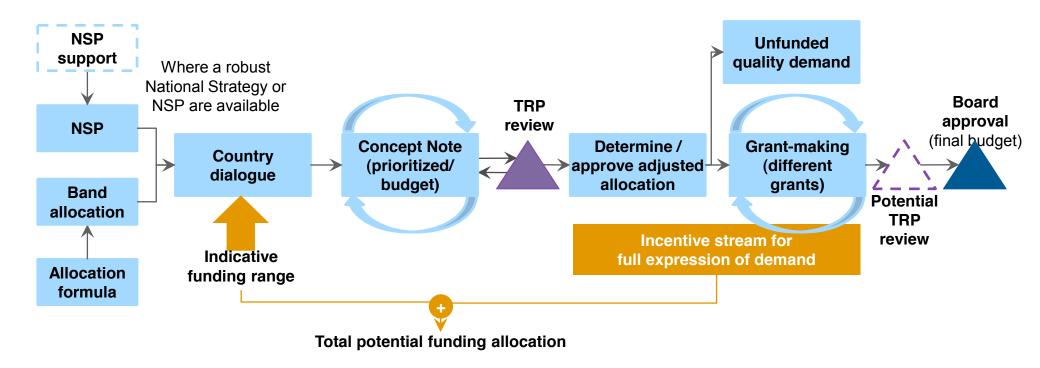


Board approves the composition of Bands and allocation of money to them

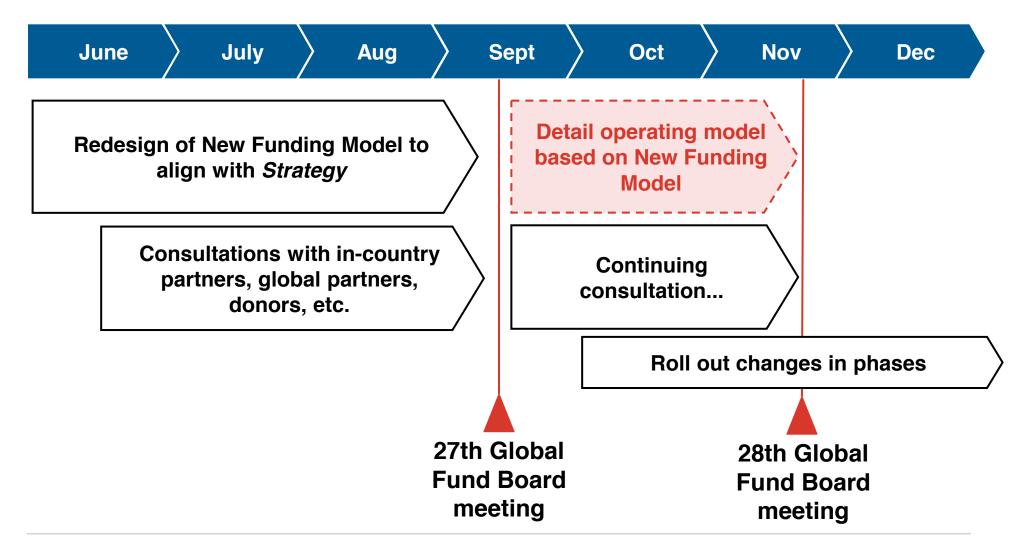
Composition of and allocation to each Country Band to be determined

Provision for special strategic investments (Amount capped at 10% of total available funds)

Stage 2 and 3: Key process elements



Next phase builds on New Funding Model



High-level questions for consultation

Bands of countries

Indicative funding range and incentive stream

Access to Funding

What criteria should be used to group countries into Bands?

- Quantitative criteria such as income (e.g. GNI per capita) and disease burden?
- Qualitative criteria such as Most-at-risk populations or small countries?
- A mix of the above?

How broad or narrow should the indicative funding range be?

How long should this funding range be valid?

How do you see the rough split of resources within a Band between resource apportioned to a country vs to an incentive stream?

Should this split be the same in all Bands?

What factors should be considered in granting funding from the incentive stream?

Should a Concept Note be disease specific or cover all diseases and HSS/CSS?

What is the best way for applicants to present their prioritized expression of full demand in the Concept Note?

What should be the possible outcomes of the TRP review with respect to prioritization?

What other topics would you like to raise?