



Country Coordinating Mechanism (BCCM)

Health Services Division
Ministry of Health and Family Welfare
BCCM Secretariat

Subject: Minutes of the 116th Meeting of BCCM

Date (dd.mm.yy)	02 nd March 2023
Venue of the meeting	Conference Room, Ministry of Health and Family Welfare
Meeting started	12:30 pm
Meeting adjourned	02:00 pm
Meeting Chaired By	Dr. Md. Anwar Hossain Howlader Secretary, HSD, MOHFW & Vice Chair, BCCM
Meeting Steered by	Kazi Zebunnessa Begum, Additional Secretary (WH), HSD, MOHFW
Meeting facilitated by	Manaj Kumar Biswas BCCM Coordinator, BCCM Secretariat, HSD, MOHFW
Total number of participants	39
Meeting attendance	<ul style="list-style-type: none">• BCCM Members and Alternate Members: 21• Non-CCM OC Member: 01• Observer: 04 (WHO-03 and LFA-01)• PR Representative(s): 10• BCCM Secretariat: 03
Attendance list	Yes
Others supporting document	Yes

Agenda Items:

Agenda Item	Title of Agenda Item
<i>Agenda Item: 1</i>	Approval of 115 th BCCM meeting minutes
<i>Agenda Item: 2</i>	Endorsement of Funding Request for TB and, Malaria for 2024-2026
<i>Agenda Item: 3</i>	Endorsement of Funding Request for C19RM WAVE-2
<i>Agenda Item: 4</i>	Update on Funding Request for HIV for 2024-2026
<i>Agenda Item: 5</i>	Update on BCCM Reconstitution
<i>Agenda Item: 6</i>	AOB:Co-Financing Commitment for the GF Allocation 2024-2026 Grant cycle

At the onset of the meeting **Respected Secretary, HSD, MOHFW & Vice Chair, BCCM Dr. Md. Anwar Hossain Howlader** welcomed all the participants. He directed the Global Fund Bangladesh CCM Coordinator to facilitate the meeting in accordance with the predetermined agenda. The Global Fund Bangladesh CCM Coordinator facilitated the 116th BCCM meeting accordingly.

Minutes of each agenda items:

Agenda Item #1: Approval of 115th BCCM meeting minutes

Conflict of Interest: No conflict of Interest declared.

Discussions by the constituencies:

BCCM Secretariat: With permission of the respected Chair of the meeting, Mr. Manaj Kumar Biswas, The Global Fund Bangladesh CCM Coordinator presented the agenda items, decision points and implementation status of the 115th meeting minutes of BCCM which was held on 05th February 2023. He informed that the draft minute of the 115th Meeting of BCCM was shared with all members, alternate members, PRs and other stakeholders for their comment & feedback. All the available feedback and comment were incorporated in final draft minutes and a signed copy was also shared with all electronically.

The BCCM OC Chair: Respected Kazi Zebunnessa Begum, Additional Secretary (WH), HSD, MOHFW proposed to endorse the 115th BCCM Meeting minutes with minor correction on the Co-financing for the next grant cycle. She mentioned that there was a mistake on the 115th BCCM meeting minutes (held on 05 February 2023) regarding the Government Co-financing commitment, which was as below:

“Bangladesh needs to agree on the commitment of 50% domestic financing of the Global Fund total allocation according to the GF funding strategy as Bangladesh in the row of Low-Middle income country now.”

According to the allocation letter of The Global Fund, the co-financing requirement is 20% of the Global Fund, instead of 50%, total allocation. Hence, she suggested to include this correction on the 115th BCCM meeting minutes.

The Chairperson of the meeting requested all participants to make their comment, if any. Since there were no further comment, the Chair of the BCCM OC endorsed the 44th BCCM Oversight Committee meeting minutes.

Decision (s): *The 116th meeting of the BCCM confirmed and approved the minutes of the 115th meeting of BCCM with correction of Co-financing statement in the meeting minutes.*

The 116th meeting of the BCCM decided that 20% of total GF allocation would be co-financing amount and 50% of the total amount of co-financing need to be direct investment by the Government for the TB, Malaria and HIV program.

Agenda Item #2: Endorsement of Funding Request for TB and Malaria for 2024-2026
Conflict of Interest: No conflict of Interest declared.

Discussions by the constituencies:

BCCM Secretariat: The Global Fund Bangladesh CCM Coordinator discussed the process of Funding Request for TB, Malaria, HIV and C19RM development. He thanked the BCCM Oversight Committee, the FR Development Committee; TB, Malaria and HIV Core Committee and stakeholders for their efforts and contribution in every step of FR development. He said that it was at the final stage of the FR submission. He said that the FR Development Committee meeting on 28th February 2023, the BCCM Oversight Committee meeting on 1st March 2023, the TB and Malaria Technical Committee finalized the TB, Malaria and C19RM Wave2 FR which are to be submitted by 20th March 2023 to catch up the 1st window of submission.

He requested Prof. Dr. Nazmul Islam, Director, Disease Control & LD, CDC, DGHS to present the Malaria Funding Request as well as C19RM FR for the malaria part together in this meeting.

Malaria Funding Request (FR) 2024-2026 and C19RM Wave-2 for Malaria

PRs Malaria: Prof. Dr. Nazmul Islam, Director, Disease Control & LD, CDC presented the Malaria FR for 2024-2026 grant cycle in this meeting. He mentioned that malaria FR incorporated the comments and feedback by the FR Development Committee meeting on 28th February 2023, the BCCM Oversight Committee meeting on 1st March 2023 and was finalized this Malaria FR and C19RM Wave-2 proposal.

He presented the modular proposal and budget allocated for every module in the Malaria FR. He then presented the activities and total allocated budget for the Malaria programme that is \$20,091,193 (PR1 NMEP- USD 10,245,360 + PR2 BRAC 10,246,311) and Prioritized Above Allocation Request (PAAR) Amount is \$16,260,870 (PR1 NMEP- USD 7,679,866 + PR2 BRAC USD 8,581,004).

He also presented the C19RM Fund Portfolio Optimization: Wave-2 funding request including activities. He mentioned that total proposed allocation for the C19RM Wave 2 is Grant total: \$7,887,242. Out of that, \$7,887,242, NMEP (PR1) is USD 4,413,192 (IEDCR2,833,425) and BRAC PR-2 BRAC is USD 3,474,050.

Finally, he requested the 116th meeting of BCCM to endorse the Malaria FR and to submit by March 20, 2023 with necessary approval by Hon'ble Minister-MOHFW & BCCM Chair comfortably. Detail budgetary Proposal of Malaria FR is attached as *Annexure -A*.

Academia: Prof. Dr. M A Faiz, Vice Chair -BCCM stated that cross cutting RSSH should be addressed very carefully. As Malaria has been turned to the elimination phase, government health system strengthening should be given priority on intervention under RSSH. In that case, NMEP and BCCM should think about more and more oxygen consumables good for people who need the ventilation and breathing support, in addition, high flow Oxygen supply under Malaria FR and C19RM wave-2.

The BCCM OC Chair: Respected Kazi Zebunnessa Begum, Additional Secretary (WH), HSD, MOHFW sought for comment and feedback from the members, alternate members and stakeholders. She informed about the justification on the total allocation for malaria and C19RM wave2 for NMEP that is less than BRAC.

PRs Malaria: Prof. Dr. Nazmul Islam, Director, Disease Control & LD, CDC responded to the question of the BCCM OC Chair. He stated that the budget split for the malaria allocation among the two PRs is justified and in accordance with the division of responsibilities in programme implementations.

TB Funding Request (FR) 2024-2026 and C19RM FR Wave-2 for TB

BCCM Secretariat: The Global Fund BCCM Coordinator requested to Dr. Akramul Islam, Senior Director, WASH and Communicable Disease, BRAC to present the TB Funding Request as well as C19RM FR for the BRAC TB part together in this meeting.

PR2 (BRAC) Tuberculosis (TB): Dr. Akramul Islam, Senior Director, WASH and Communicable Disease, BRAC presented the BRAC TB FR for 2024-2026 grant cycle in this meeting. He mentioned that BRAC adjusted to all the comments and feedbacks by FR Development Committee meeting on 28th February 2023, BCCM Oversight Committee meeting on 1st March 2023 and finalized this TB FR PR2 part and C19RM Wave-2 proposal.

He presented the modular proposal and budget allocated for every module in the BRAC TB FR. He presented the activities and total allocated budget for the TB FR PR2 Part programme that is \$5,51,83,325, Prioritized Above Allocation Request (PAAR) Amount is \$45,292,967 and C19RM WAV2 is 14,033,510. He also presented the detailed budget in accordance with the Sub Recipients

distribution in the meeting. Finally, he requested to the 116th meeting of BCCM to endorse the TB FR to submit by March 20, 2023 with necessary approval by Hon'ble Minister-MOHFW & BCCM Chair. Detail budgetary Proposal of TB FR is attached as *Annexure -B*.

BCCM Secretariat: The Global Fund BCCM Coordinator requested to Dr. Mustafizer Rahman, LD - NTP & TBL to present the TB Funding Request as well as C19RM FR for the TB part together in this meeting.

PR1 (NTP) Tuberculosis (TB): On behalf of Dr. Mahfuzer Rahman, LD-TBL & ASP, DGHS; Dr. Rupali Shishir Banu, NPC-NTP presented the NTP part of the TB FR for 2024-2026 grant cycle in this meeting. She discussed that NTP was integrated and adjusted with all the comments and feedbacks by FR Development Committee meeting on 28th February 2023, BCCM Oversight Committee meeting on 1st March 2023 and the committee finalized this TB FR for PR1 part and C19RM Wave-2 proposal.

She also presented the modular proposal and budget allocated for every module in the TB FR NTP part. She described the activities and total allocated budget for the TB FR PR1 Part programme that is \$70,739,345.30, Prioritized Above Allocation Request (PAAR) Amount is \$54,427,844.70 and C19RM WAV2 is 54,427,844.70. She also presented the detailed budget in accordance with the prioritized interventions in the meeting. Finally, she requested to the 116th meeting of BCCM to endorse the TB FR and to submit by March 20, 2023 with necessary approval by Hon'ble Minister-MOHFW & BCCM Chair. Detail budgetary Proposal of TB FR for PR1 is attached as *Annexure-C*.

Discussions:

FR Development Committee: Professor Dr. Ahmedul Kabir, ADG Planning informed the meeting that as FR Development Committee Chair, he requested TB stakeholders to make the budgetary proposal within the Global Fund declared allocation. If we justify the demand and funding gap, PRs should include the demand in the section of PAAR (Above Allocation). He also informed the meeting that TB PRs made proposal proposing a bit higher amount than the allocated amount where PR1 NTP primary Budget was more than USD 100 million and PR2 BRAC primarily proposed more than USD87 million. Last two days in FR Development Committee and BCCM Oversight Committee it was strongly recommended to fit the priority activities including TB diagnostics in the allocated amount and other quality demand in the PAAR section of the proposals with rationale.

He thanked NTP, BRAC and other TB stakeholders to make the TB Funding Request within allocated budget by the Global Fund and to put others priority demand in the PAAR section. He stressed on the scaling up molecular diagnostics as well as diagnostic kits for the TB case identifications especially remote and rural areas.

The BCCM OC Chair: Respected Kazi Zebunnessa Begum, Additional Secretary (WH), HSD, MOHFW questioned on the areas where BRAC and NTP increase the budget for the proposed Funding Request for 2024-2026 grant cycle. She particularly wanted to know about the justification of increased number of HR for BRAC and NTP.

PR2 (BRAC) Tuberculosis (TB): Dr. Akramul Islam, Senior Director, WASH and Communicable Disease, BRAC responded to the question of BCCM OC Chair. He justified the increases of HR in BRAC part of the TB Funding Request. He mentioned that case identification, TB Preventive Treatment and MDR TB identification are the main objectives. So, field level HR need to be increased to enhance these case identifications, cover the TPT, MDR and Extra-pulmonary TB identifications.

The GF Country Team: Ms Gyongyver Jakab, Senior Fund Portfolio Manager, GFCT informed the meeting that the GFCT visit was scheduled from 12-17 March 2023 to review TB and Malaria Funding Request rigorously with the PRs and stakeholders. So, there will be changes in the allocated budget for different modules and some of the modules need to be interchanged in between PRs. BCCM should consider the GFCT visit and revision of the TB, Malaria and C19RM Wave-2 Funding Requests in accordance with the GF Guidelines and conditions.

The BCCM OC Chair: Respected Kazi Zebunnessa Begum, Additional Secretary (WH), HSD, MOHFW responded to the issue of GFCT revision after the BCCM endorsement. She said that modular budget changes and intervention component budgetary changes within the total allocated budget according to the GF Allocation Letter and endorsed in the BCCM would not be a major issue. After the revision of TB, Malaria, HIV and C19RM Wave2 Funding Request, PRs should share the updated FRs with BCCM so that BCCM get informed about the changes in the FRs. She finally requested the 116th BCCM meeting to endorse the TB, Malaria and C19RM Wave-2 Funding Requests which were presented by the FR Development Core Committee Chair on behalf of BCCM Funding Request Development Committee.

BCCM Members: All BCCM Members who attended the meeting are agreed to endorse the TB, Malaria and C19RM Wave2 Funding Requests within the allocated total budget according to the Global Fund Country Team discussions, PRs would share the updated version of Malaria FR with BCCM to share with all the stakeholders before submission.

Decision(s): *The 116th meeting of BCCM*

- *decided to endorse the Malaria Funding Request 2024-2026 and Malaria programme related Funding Request for C19RM Wave-2 in this meeting as presented.*
- *If there is any changes or any corrections or any editions happen in Malaria Funding Request 2024-2026 and Malaria programme related Funding Request for C19RM Wave-2 within the allocated total budget according to the Global Fund Country Team discussions in the meeting, PRs would share the updated version of Malaria FR with BCCM to share it with all the stakeholders before submission.*
- *decided to endorse the TB Funding Request 2024-2026 and TB programme related Funding Request for C19RM Wave-2 in this meeting as presented.*
- *If there is any changes or any corrections or any editions happen in TB Funding Request 2024-2026 and TB programme related Funding Request for C19RM Wave-2 within the allocated total budget according to the Global Fund Country Team discussions in the meeting, PRs would share the updated version of Malaria FR with BCCM to share it with all the stakeholders before submission.*

Agenda Item #3: Endorsement of C19RM Wave-2 Funding Request

Conflict of Interest: No conflict of Interest declared.

Discussions by the constituencies:

It is discussed and decided in the agenda item 2 with TB and Malaria FR endorsement

Agenda Item # 4: Update on the HIV Funding Request 2024-2026

Conflict of Interest: No conflict of Interest declared.

Discussions by the constituencies:

BCCM Secretariat: The Global Fund Bangladesh CCM Coordinator informed the meeting that according to the last meeting decision, HIV/AIDS Funding Request would -be submitted by 29 May 2023 (by submission window 2 and FR Development Committee would act accordingly for the respective disease components). He requested Dr. Shah Md. Jahim Uddin, Director, NASC to update the HIV Funding Request 2024-2026 and HIV related C19RM Wave-2 in this meeting.

HIV PRs: On behalf of all HIV PRs, Dr. Shah Md. Jahim Uddin, Director NASC updated the HIV Funding Request 2024-2026 and HIV related C19RM Wave-2 in this meeting. He informed the meeting that -

- Writing group Core Committee formation done
- Meeting of the core committee to review the FR materials ongoing
- Development of FR Narrative, PF, HPTM, Budget to be started after ongoing HIV JMM and JMM Report dissemination on 5th March 2023
- HIV NSP development and endorsement by BCCM by April 2023
- Approval from the FR development committee and TWG 1st draft submission to OC by end of April 2023
- Submission of the Final version of CN/ FR to BCCM by end of May 2023
- The proposal/ FR will be done after the programme continuation of current grant with necessary changes following JMM, size estimation report and updated NSP.

He also mentioned that HIV program related C19RM was also planned to submit by 29th May 2023 along with HIV Funding Request but NASP would share the draft C19RM Wave-2 for the HIV Program by 10th of March 2023 as NASP and other stakeholders working on it.

The BCCM OC Chair: Respected Additional Secretary (WH), HSD, MOHFW stressed to follow the roadmap for the HIV FR development along with C19RM Wave-2 development and to submit by 29th May 2023. She also informed that by end of April 2023 BCCM OC and BCCM meeting need to be done for the HIV Funding Request 2024-2026 endorsement and submission comfortably.

The BCCM Vice Chair: Respected Secretary, HSD, MOHFW and Vice Chair-BCCM stressed on the Global Fund guidelines for the Funding Request Development for the next grant cycle to ensure catching up with the submission window.

Decision(s): The 116th Meeting of BCCM

- acknowledged the update related to HIV FR development and submission as well as HIV related C19RM Wave-2;
- decided that NASP would submit NSP for HIV and draft HIV Funding Request 2024-2026 by Mid-April 2023 for the BCCM sharing;
- decided that BCCM OC meeting would review the draft of HIV Funding Request 2024-2026 by 25th April 2023 and BCCM would endorse HIV NSP and HIV Funding Request 2024-2026 by 30th April 2023

Agenda Item #6: Update CCM Reconstitution and CCM Evolution project

Conflict of Interest: No conflict of Interest declared.

Discussions by the constituencies:

BCCM Secretariat: BCCM Coordinator informed the meeting on the update of CCM Reconstitution and CSO Election. He informed that all the ministries and divisions' nominations were received by

BCCM Secretariat except one. He mentioned that PWID (NPUD), PLWD (TB -NATAB), MSM Hijra (HIV-KAP), MLBL Constituency have already done their election and sent nominations. He said that FBO, PLHIV, SWNOB will complete their election by 10th of March 2023.

He also informed that Academia and Private Sectors EOI request letters have been sent to different university scholar, academia researchers and private sector companies who have health related CSR respectively. BCCM Secretariat received many EOI from Academia & Researchers and some of the EOI from private sector for becoming member and alternate members for BCCM. By end of March 2023, academia and private sector members and alternate members also have to be selected by the BCCM Evolution Task Force or by BCCM Oversight Committee.

He also updated the meeting that BCCM prepared the online BCCM election website to conduct NGO Constituency election. This is the hardest part of the CSO members election for BCCM. BCCM Secretariat has already published advertisement for the CSO election. Accordingly, all the constituencies have started their election process except NGO Constituency. BCCM Secretariat planned to organize and conduct meeting with NGO Constituency related to their online election. It is hoped by March 2023, BCCM Secretariat will complete NGO election through online registration, nomination for candidature and election of members and alternate members.

Mr. Biswas presented the BCCM members and alternate members election and selection update through an excel presentation in the meeting which is attached as Annexure- AA.

The BCCM OC Chair: Respected Additional Secretary (WH), HSD, MOHFW and Chair BCCM-OC requested to the NGO and other CSO Constituencies to elect their members and alternate members by March 2023.

Chair of the meeting: The Chairperson of the meeting suggested to BCCM Secretariat to expedite the process of CCM Reconstitution.

Decision(s): *The 116th meeting of BCCM*

- *acknowledged the update on the progress of CCM Reconstitution and CCM Evolution.*
- *also acknowledged the TA Support for the CSO Election from UNAIDS and USAID.*
- *decided that CSO members and alternate members election need to be done very carefully in accordance with the GF Guidelines to comply eligibility requirements with appropriate documentation.*

Agenda Item #7: AOB: Co-Financing for the GF Allocation and Funding Request for 2024-2026

Conflict of Interest: No conflict of Interest declared.

The BCCM OC Chair: Respected Additional Secretary (WH), HSD, MOHFW and Chair BCCM-OC discussed that there are some issues about the CD/VAT and clearance of medical and non-medical products from the port. She mentioned that after a long time product reached in port in Bangladesh, HSD got a letter from the Global Fund with a condition that the GF would arrange the port clearance with their funds but they would deduct the fund from next grants. She mentioned that unfortunately, HSD received the letter at very late when it has already done much of port demurrage and penalty. She requested the NTP, NMEP and NASP to communicate HSD, MOHFW very timely with manner to solve the CD/VAT issues for the GF foreign procurements so that HSD can try to solve the issue timely without any extra charges and demurrage.

Respected Additional Secretary and Chair discussed about the government recruitment system. She referred that recently NTP had published a recruitment notice on BDjobs.com but without the approval

of the Government, the Recruitment Committee approved. Even NTP didn't take any administrative approval from HSD so far. She discoursed that all government PRs must get prior approval for any type of recruitment including the GF funded recruitment from the appropriate authority of HSD, MOHFW. She mentioned that GF can suggest to make it quickly through the third-party recruitment but need to get approval from HSD and Recruitment Committee.

Principal Recipient (NTP): Dr. Mahfuzer Rahman, LD-NTP & ASP responded to the port paying CD/VAT and Demurrage for the medical and non-medical products. He informed the meeting that NTP had already met with CMSD to solve the problem. CMSD as a consignee supposed to take necessary action to release these products' paying CD/VAT and port charge. CMSD would pay for the CD/VAT and demurrage with the approval of the Finance Division.

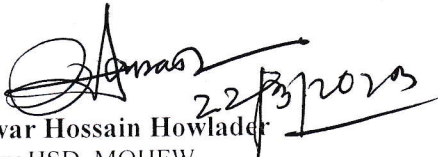
The Chairperson: Respected Secretary, HSD and BCCM Vice Chair tried to dig out the problems communicating with Planning wing, CMSD and Ministry of Shipping. He directed to planning wing and CMSD to allocate necessary amount and to take necessary action to release these products or paying or exempting the CD/VAT and demurrage as it is given by the Global Fund for people's wellbeing in Bangladesh. He also has given same direction for the medical product under NTP program. He invited all the LDs for this issue to come to Secretary-HSD very timely with manner. He will solve the issue discussing with CMSD, Finance Division and NBR.

Respected Secretary also discussed about the recruitment of the Government PRs. He agreed with Additional Secretary's (WH) proposal to ensure administrative approval for the NTP, NMEP and NASP recruitment.

Decision(s): *The 115th Meeting of BCCM*

- *decided that LDs would communicate with HSD, MOHFW to take immediate action to releasemedical and non-medical products from the sea port and airport either paying CD/VAT and demurrage or exempting CD/VAT and demurrage from port authority and NBR.*
- *decided that Government PRs must recruit their GF funded staffs by the established recruitment process of the Government (HSD, MOHFW).*

Having no other issues to discuss, the Chairperson of the meeting thanked all the participants for their active participation in the meeting and wrapped up the meeting.


22/3/2023
Dr. Md. Anwar Hossain Howlader
Secretary, HSD, MOHFW
&
Vice Chair, BCCM

Malaria FR 2024-2026 Budgetary Proposal with C19RM Wave-2**PR-1 (NMEP)**

Module	USD
Case Management	2,187,701
Program Management	1,790,431
RSSH or PP: Human Resources for Health HRH and Quality of Care	223,162
RSSH or PP: Laboratory Systems including national and peripheral)	49,525
RSSH: Community Systems Strengthening	37,053
RSSH: Health Financing Systems	183,811
RSSH: Health Sector Planning and Governance for Integrated People centered Service	31,090
RSSH: Monitoring and Evaluation Systems	1,652,160
Vector Control	3,689,951
Grand Total	9,844,883

PR -2 BRAC

Module	USD
Case management	6,110,113
Program management	1,922,189
RSSH: Community systems strengthening	94,555
RSSH: Health financing systems	269,677
RSSH: Health sector planning and governance for integrated people-centered services	69,829
RSSH: Monitoring and evaluation systems	1,496,604
Vector control	283,342
Grand Total	10,246,311

Total

Malaria Program (PAAR)

Budget	PR1 (NMEP)	PR2 (BRAC)
	USD 7,679,866	USD 8,581,004

Malaria PAAR Budget Module:

Module#1: Vector Control

Module#2: Case Management

Module#4: RSSH/PP: Human Resources for Health (HRH) and Quality of Care

Module#5: RSSH: Community Systems Strengthening

Module#6: RSSH/PP: Laboratory Systems (including national and peripheral)

Module#8: RSSH: Monitoring and Evaluation Systems

Malaria Programme C19RM Wave-2

Budget	PR1(NMEP)	PR2 (BRAC)
	USD 4,413,192 -> IEDCR: 2,833,425 (for surveillance and pandemic preparedness)	USD 3,474,050

TB FR 2024-2026 Budgetary Proposal with C19RM Wave-2**TB PR2-BRAC**

Cost Category	Budget (USD)	%
1.0 Human Resources (HR)	3,30,85,299	60%
2.0 Travel related costs (TRC)	47,31,711	9%
3.0 External Professional services (EPS)	48,976	0%
7.0 Procurement and Supply-Chain Management costs (PSM)	96,858	0%
8.0 Infrastructure (INF)	88,158	0%
9.0 Non-health equipment (NHP)	1,32,772	0%
10.0 Communication Material and Publications (CMP)	3,15,385	1%
11.0 Indirect and Overhead Costs	67,47,560	12%
12.0 Living support to client/ target population (LSCTP)	40,28,389	7%
13.0 Payment for results	59,08,215	11%
Total	5,51,83,325	100%

Name of the Organization	Budget (USD)	
BRAC	4,03,20,756	
Damien Foundation	65,88,754	
LAMB	3,91,431	
RDRS	13,22,016	
TLMI	9,10,514	
HEED	19,89,061	
PIME Sister	1,88,509	
NATAB	2,83,195	
BGMEA	4,67,899	
BKMEA	1,20,279	
Nishkriti	1,83,121	
BAMANEH	64,250	
PKS Khulna	1,57,719	
IMAGE	1,78,894	
CWFD	3,58,377	
Tilottama	1,22,627	
MAMATA-Chittagong	2,20,356	
KMSS	3,96,754	
BAPSA	1,76,160	
Nari Maitree	2,44,004	
UTPS	1,86,186	
DAM	1,75,513	
RIC	1,36,949	
Grand Total	5,51,83,325	

PAAR TB PR 2-BRAC

Module	Budget (USD)	Percentage
TB diagnosis, treatment and care	34,422,642	76%
Drug-resistant (DR)-TB diagnosis, treatment and care	69,586	0%
TB/DR-TB Prevention	1,929,345	4%
Collaboration with other providers and sectors	3,170,508	7%
Key and vulnerable populations (KVP) – TB/DR-TB	1,231,969	3%
TB/HIV	21,675	0%
RSSH: Community systems strengthening	271,137	1%
RSSH: Health financing systems	34,793	0%
RSSH: Health products management systems	34,793	0%
RSSH: Monitoring and evaluation systems	430,753	1%
Programme management	2,717,578	6%
Total	45,292,967	100%

CI9RM WAVE2 -TB PR 2-BRAC

Module	Budget (USD)	Percentage
TB diagnosis, treatment and care	6,396,585	46%
Collaboration with other providers and sectors	2,485,924	18%
Key and vulnerable populations – TB/DR-TB	36,076	0%
RSSH: Community systems strengthening	1,116,706	8%
RSSH/PP: Human resources for health (HRH) and quality of care	2,988,619	21%
RSSH: Monitoring and evaluation systems	32,059	0%
Programme management	977,541	7%
	14,033,510	100%

TB PR 1: NTP

Module	Activities	Budget	%
Program Management	HR, Capacity Development, Monitoring & Supervision, Meeting, Office Expenses	6,274,214.13	8.87%
TB diagnosis, treatment and care	HR, Capacity Development, Meeting, Cartridge, Reagents,	46,609,711.94	65.89%
Drug-resistant (DR)-TB diagnosis, treatment and care	Drugs, Referral Labs, Training	4,939,980.81	6.98%
TB/HIV	Screening, Training, Meeting	492,682.50	0.70%
RSSH: Monitoring and evaluation systems	Supervision, Surveillance of TB, HIV & Malaria; Internet Connectivity	2,222,229.33	3.14%
Key and vulnerable populations (KVP) – TB/DR-TB	Training & meeting	150,246.80	0.21%
TB/DR-TB Prevention	IC workshop & training	7,951,864.95	11.24%
RSSH: Health products management systems	PSM meeting & training	72,916.19	0.10%
RSSH/PP: Human resources for health (HRH) and quality of care	CHCP Training	266,649.76	0.38%
Collaboration with other providers and sectors	Meeting with DGMIS & ICDDRDB	1,534,838.88	2.17%
RSSH/PP: Laboratory systems (including national and peripheral)	X-ray user License & referral lab equipment maintenance	224,010.00	0.32%
Total		70,739,345	

PAAR -NTP

Module and Activities	Total
Drug-resistant (DR)-TB diagnosis, treatment and care	2,302,385.17
DR-TB diagnosis/drug susceptibility testing (DST)	1,992.47
DR-TB treatment, care and support	2,300,392.70
RSSH/PP: Laboratory systems (including national and peripheral)	300,000.00
RSSH/PP: Biosafety and biosecurity, infrastructure and equipment	300,000.00
TB diagnosis, treatment and care	47,140,792.17
TB screening and diagnosis	47,140,792.17
TB/DR-TB Prevention	4,630,744.16
Infection prevention and control (IPC)	1,398,514.25
Preventive treatment	3,232,229.91
TB/HIV	53,923.19
TB/HIV - Screening, testing and diagnosis	53,923.19
Grand Total	54,427,844.70

CI9RM Wave -2 (NTP)

TB Diagnosis, Treatment and Care			
Name of the item	Quantity (each)	USD/Quantity	Total
Digital X-ray	250	70000	17,500,000.00
XDR Cartridge	677425	19.8	13,413,015.00
PSC for XDR Cartridge			79,529.70
TOTAL			30,992,544.70