MINUTES OF
EXECUTIVE, OVERSIGHT, AND REGIONAL MOBILIZATION COMMITTEES

1. INPUT FIELDS INDICATED BY YELLOW BOXES

MEETING DETAILS				(Place "x" in the Relevant Box)	
LOCATION/VENUE	1st Floor, Dok Ngiw Ban Meeting Room No. 118, Ministry of Health				
MEETING NUMBER	03	TOTAL NUMBER OF PARTICIPANTS/ (INCLUDING ALTERNATIVES & CCM SECRETARIAT STAFF)		EXCOM MEMBERS	1
DATE (dd.mm.yy)	18 Sept 2026			OC MEMBERS/ALTERNATES	6
MEETING SCHEDULE START	13:00			RMC MEMBERS/ALTERNATES	4
MEETING ACTUAL STARTED	13:30			OTHERS INCLUDING CCM SECRETATIAT STAFF	24
MEETING ACTUAL ENDED	17:00			TOTAL (Including online)	35

DETAILS OF PERSON WHO CHAIRED THE MEETING				MEETING TYPE	
HIS / HER NAME & ORGANIZATION	First Name	Dr. Rattanaxay			
	Family Name	Phetsouvanh		Regular Meeting	x
	Position/Title	Senior Advisor		Extra-ordinary Meeting	
	Organization	Foundation Mérieux Laos		Other Meeting	
HIS / HER ROLE ON THE MEETING	Chair	x	GLOBAL FUND SECRETARIAT / LFA ATTENDANCE AT THE MEETING	LFA	x
	OC Chair			FPM / PO	x
	OC Member			OTHERS	x
	Alternate			NONE	

2. AGENDA OF THE MEETING

AGENDA SUMMARY		
AGENDA ITEM No.	WRITE THE AGENDA TITLE OF EACH AGENDA ITEM/TOPIC	RESPONSIBLE PERSON
Agenda Item #1	**Principal Recipient - Ministry of Health (PR-MoH)** • Terms of Reference (TOR) of Department of Finance (DOF) and Department of Disease Control (DDC) • Update on PR Readiness for the Global Fund Partner Portal for Grant Entity Data (GED)	Rep. of DOF & DDC
Agenda Item #2	**Co-Financing** • Update on the status of Co-financing preparation for TB & HIV • Update on the status of Co-financing preparation for Malaria (RAI4E & RAI5E)	Rep. of DOF, DDC, UNOPS & CMPE
Agenda Item #3	**Progress update on the submission of Funding Request for GC8 for TB and HIV** • Update on the Funding Request for GC8 status for TB & HIV	Rep. of CHAS, NTC & TAs
Agenda Item #4	**Progress update on the submission of Funding Request for GC8 for Malaria (RAI5E)** • Update on the Funding Request for GC8 status for Malaria (RAI5E)	PR-UNOPS, CMPE and TAs
Agenda Item #5	**Progress update on the GF Grant Implementation for Catalytic Matching Fund** • update on the GF Grant Implementation for Catalytic Matching Fund	Rep. of NCLE
Agenda Item #6	AOB and close the meeting • Next Oversight Field Visit Program	Chairperson

3. MINUTES OF EACH AGENDA ITEM

OPENING PROGRAM	Introduction and endorsement of agenda Quorum verification and conflict of interest identification

Introduction and Endorsement of the Agenda

- **Call to Order:** The Chair officially opened the meeting and extended a warm welcome to all committee members and participants attending both in-person and online.
- **Agenda Approval:** The proposed meeting agenda was presented to the floor for review. Following the review, the agenda was endorsed by the participants.

Quorum Verification and Conflict of Interest Identification

- **Quorum Confirmation:** The CCM Secretariat verified the attendance and confirmed that a quorum was present, allowing the joint meeting to proceed with official business.
- **Meeting Objectives:** The Secretariat briefly outlined the primary objectives of the joint session to align all participants.
- **Conflict of Interest:** (Note: The standard protocol for identifying any conflicts of interest regarding the agenda items was observed at this time.)
- **Handover:** Following the administrative confirmations, the CCM Secretariat invited the Chair to lead the main proceedings of the meeting.

Agenda Item #1	**Principal Recipient - Ministry of Health (PR-MoH)**

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

Following the internal meeting at the Ministry of Health between the Department of Finance (DOF) and the Department of Disease Control (DDC) on 18th September to discuss their respective Terms of Reference (TOR), the representative from the National Program Coordination Office (NPCO) provided a progress update.

The update outlined the status of the TORs and detailed the Principal Recipient (PR) Readiness for the Global Fund Partner Portal regarding Grant Entity Data (GED) for Grant Cycle 8 (GC8) (2027–2029), as summarized below. *(For further details, please refer to the attached presentation.)*

Roles and Responsibilities for the Global Fund Principal Recipient

- **Principal Recipient (PR) Structure:** The Ministry of Health (MoH) serves as the PR for the Global Fund (GFATM) grants. For HIV and TB programs implemented through the HANSA mechanism, the Department of Finance (DOF) operates as the PR, while the Department of Disease Control (DDC) acts as the Co-PR.
- **Coordination Mechanism:** The National Project Coordination Office (NPCO) functions as the central secretariat, operating under the direct guidance of the DOF. NPCO manages coordination with the Global Fund, the PR, and the Co-PR. Concurrently, the Co-PR is responsible for coordinating directly with project implementers in close collaboration with NPCO.

- **Key Leadership Roles:**
  - **Minister of Health:** Serves as the ultimate decision-maker and the authorized representative for executing legal agreements.
  - **Director General, DOF (PR):** Provides overall project management, oversees financial and procurement operations, signs legal and disbursement documents, and directs the daily operations of the NPCO.
  - **Director General, DDC (Co-PR):** Oversees technical guidance, project planning, implementation tracking, and reporting for the implementers in coordination with the PR and NPCO.

Key discussions and comments from the meeting

PR/Co-PR Role Assignment and Implementation Mechanism

- **Management Structure:** The Ministry of Health acts as the Principal Recipient (PR) representing the government of Lao PDR, with the following designations:

- **Department of Finance (DOF)** as the PR, responsible for overall project management, finance, procurement, and reporting.
- **Department of Disease Control (DDC)** as the Co-PR, responsible for technical guidance, planning, monitoring, and evaluation for the 3 diseases (HIV, TB, Malaria).
- **National Project Coordination Office (NPCO)** acts as the central coordinating body between the Global Fund, CCM, PR, and Co-PR.

- **Risks and Mitigation Measures:** The meeting agreed to integrate the implementation mechanism into the government system for sustainability (rather than working in parallel). Representatives from WHO and other sectors expressed concerns regarding delays in budget disbursement (which could be delayed by 4-6 months) and difficulties in basic-level control if financial and technical operations are separated. The meeting assigned DOF, DDC, and NPCO to continue revising the Terms of Reference (TOR) and develop Standard Operating Procedures (SOPs), including clear timelines for approval at each level, to ensure fast and non-overlapping document flow.

Decisions

1. The meeting agreed to integrate the grant implementation mechanism into the national government system to ensure long-term sustainability.
2. The meeting assigned the Department of Finance (DOF), the Department of Disease Control (DDC), and the National Project Coordination Office (NPCO) to continue revising their respective Terms of Reference (TOR) and to develop Standard Operating Procedures (SOPs). These SOPs must include clear approval timelines at each level to ensure an efficient, non-overlapping document flow and mitigate potential delays in budget disbursement.

Agenda Item #2	**Co-Financing Preparation for TB, HIV, and Malaria (RAI4E & RAI5E)**

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

Representative from National Program Coordination Office (NPCO) and UNOPS presented the Co-Financing preparation for TB, HIV and Malaria (RAI4E & RAI5E) as below *(For more information, please see the attached PPT)*.

- **Key Updates on Co-Financing preparation for TB and HIV:**
  - The presentation outlined the ongoing progress of government co-financing commitments for the Global Fund Grant Cycle 8 (GC8) covering the 2027–2029 period.
  - Current efforts involve finalizing formal government co-financing commitments, specifically drafting the Commitment Letter required to support the funding requests.
  - Lao PDR has been allocated up to USD 11,594,718 for GC8; however, 20% of this allocation is contingent upon realizing a total domestic financial commitment of at least USD 8,527,867 for HIV, TB, and RSSH.
  - The government plans to increase the overall health budget from USD 6,208,923.70 in GC7 to USD 8,527,867.00 in GC8, reflecting a 7% increase. By the end of the 2027–2029 grant period, the health sector budget is expected to represent 9% of total government spending.
  - The presentation included detailed breakdowns of approved co-financing budgets for HIV and TB across 2024, 2025, and projections for 2026, categorized by procurement, operational activities, and training.
- **Reference:** For comprehensive financial data, specific budget lines, and detailed presentation slides, please refer to the attached document.

- **Key Updates on Co-Financing for Malaria (RAI4E & RAI5E)**
  - **RAI4E (2024–2026) Performance:** The presentation highlighted an excellent overall co-financing absorption rate of 99% for the current period. The actual and budgeted expenditures are projected to reach USD 4,438,384 against the initial commitment of USD 4,480,330.
  - **RAI5E (2027–2029) Commitments:** The co-financing commitment for the GC8 allocation has been finalized at USD 5,552,433. This total consists of USD 4,480,329 for human resources and operational costs (in-kind), and USD 1,072,104 for malaria-specific activities. The amounts were calculated using an exchange rate of LAK 22,000 per USD, as guided by the DOF.
  - **Commitment Letter Status and Next Steps:**

- A fully signed GC8 co-financing letter from the Ministry of Finance and/or relevant budget authorities must be provided before the GAC meeting in November; failure to do so will result in the withholding of full allocation funds.
- The commitment amounts have been successfully agreed upon with CMPE and DOF.
- UNOPS has drafted the initial letter and shared it with the Global Fund for review.
- The CCM has responded to the Global Fund's initial comments and is currently awaiting further feedback.
- Once finalized by CMPE, the DDC and CCM will advance the letter for formal ministerial signatures.

Key discussions and comments from the meeting

Progress on Government Co-financing and Procurement

- **Status of the Commitment Letter:** It has been endorsed by the CCM and is currently pending signature consideration by the Ministry of Health before being forwarded to the Ministry of Finance for signature to ensure timely completion.
- **Observations from the Global Fund:** The Global Fund provided comments and requested clarity regarding the central administration support payments (GC7), suggesting a clear breakdown of activity types for each disease and providing English translations of the details to facilitate review by external experts.
- **Government Budget:** The 2026 co-financing budget (Category 62) for HIV/TB has been allocated at approximately 250 million Kip per center (totaling 500 million Kip for the 2 centers). For malaria, the government contributes by covering personnel costs (salaries for medical staff at the central, provincial, and district levels), with an estimated total value for the 3 years (GC8) exceeding 4 million USD.
- **Issues with HIV Testing Reagent Procurement:** There is a challenge regarding the inconsistency in procurement standards between the use of the state budget (the HIV Center has a planned total co-financing budget of approximately 4.1 million USD to be used for reagent procurement) and the Global Fund. The meeting proposed centralizing procurement and joint planning (e.g., procuring reagents for mothers and children) to achieve unified standards, save costs, and avoid overlapping procurement or substandard reagents that would affect diagnosis. Moving forward, the committee will be restructured to clearly define procurement roles.

Decisions

1. The meeting agreed to expedite the signature process for the GC8 Co-Financing Commitment Letter from the Ministry of Health and Ministry of Finance to ensure submission to the Global Fund before the GAC meeting in November 2026.
2. The meeting approved the proposal to address Global Fund comments by providing a clear breakdown of central administration support payments in English for each disease program.
3. The meeting agreed to harmonize HIV testing reagent procurement standards by moving toward centralized procurement and joint planning under state and grant funds, and directed the restructuring of the procurement committee to clearly define roles and responsibilities.

Agenda Item #3	**Progress update on the submission of Funding Request for GC8 for TB and HIV**

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

Representative from CHAS and TA presented on the Progress update on the submission of Funding Request for GC8 for TB and HIV under the HANSA 2 as below (For more information, please see the attached PPT).

Progress Update on Funding Request Submission for GC8 (HIV and TB)

- **Submission Timeline and Milestones:**
  - The first draft of the GC8 funding request for HIV and TB was submitted for Global Fund review on August 3, 2026, containing programmatic gap analyses, detailed budgets, and the combined performance framework.
  - Following the initial review, feedback from the Global Fund was addressed on August 12 and 18.

- The revised submission (2nd submission) was presented and endorsed by the CCM Plenary Meeting on August 21, 2026.
- Following the endorsement, additional Global Fund comments received on August 21, September 1, and September 10, 2026, were addressed.
- The CCM formally shared all updated documents, including the Performance Framework, Budget Details (Annexure 1 for HIV and Annexure 2 for TB), and the Co-Financing Commitment Letter, with the Global Fund on September 14, 2026.

- **Key Revisions to the Funding Request:**
  - **Health Products (HP):** The Global Fund financing structure for HIV and TB Health Products was adjusted to a descending scale: 50% in Year 1 (2027), 40% in Year 2 (2028), and 30% in Year 3 (2029).
  - **HIV Self-Testing (HIVST):** Responding to community consultation feedback, the procurement plan was updated to allocate 50% for HIVST and 50% for HIV/Syphilis dual tests targeting Key Populations, moving away from the initial plan of 100% HIVST under Global Fund support.
  - **Performance Metrics:** The presentation highlighted key coverage indicators for the 2027–2029 period. For instance, the target for people living with HIV on ART is projected to increase from 71% in 2027 to 83% by 2029. For TB, the percentage of newly diagnosed patients with documented HIV status is targeted to reach 95% by 2029.

- **Budget Overview (2027–2029):**
  - The total GC8 budget spanning 18 provinces is USD 20,122,585.
  - **TB Allocation:** Total USD 10,711,732 (Global Fund: USD 6,332,299 | Co-Financing: USD 4,379,433).
  - **HIV Allocation:** Total USD 9,410,853 (Global Fund: USD 5,262,419 | Co-Financing: USD 4,148,434).

- **Next Steps:** The PR will coordinate with the CCM and the Global Fund to monitor the submission timeline and ensure rapid responses to any forthcoming Global Fund queries before the final submission deadline.

Key discussions and comments from the meeting

Grant Cycle 8 (GC8) Funding Application

- **HIV and TB Programs:** The funding proposal has been continuously developed in collaboration with relevant stakeholders (CSOs, provincial level). The team has responded to feedback from the Global Fund and submitted all 11 documents into the system on September 14. Currently waiting for final comments before the Final Submission by the end of this September. The allocated budget is approximately 11.5 million USD.
- The meeting agreed that the Principal Recipient (PR) will maintain close coordination with the CCM and the Global Fund to rapidly address any remaining queries and ensure the Final Submission is completed by the end of September 2026.

Decisions
No Decision

Agenda Item #4	**Progress update on the submission of Funding Request for GC8 for Malaria (RAI5E)**

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

Representative from UNOPS and CMPE presented the progress update on the submission of Funding Request for GC8 for Malaria (RAI5E) as below (For more information, please see the attached PPT).

Malaria Grant Making Update (RAI5E)

- **Grant Making Timelines (RAI5E - 2027-2029):**
  - Following the Global Fund allocation letter received on March 13, 2026, and the subsequent endorsement and submission of the Funding Request by the CCM and RSC in May and June, respectively, the grant making process has progressed significantly.

- UNOPS (PR) submitted the first draft of the grant documents to the Global Fund on September 8, 2026, and is currently responding to Technical Review Panel (TRP) comments and undergoing LFA reviews.
- Grant negotiations with the Global Fund are scheduled to conclude in October, ahead of the GAC meeting on October 15, 2026.

- **Addressing TRP Comments:**
  - **Allocative Efficiency:** Responding to concerns about high program management costs, the grant-making process successfully reduced these costs from 31% to 29% by streamlining staff and minimizing administrative expenses to reallocate savings into priority programs.
  - **Program Integration:** Lao PDR demonstrated substantial progress in program integration, highlighting an increased domestic funding commitment, the integration of surveillance and supply chains into national platforms (PHEOC-NNDSS, DPF-MOH), and the DDC's transition to take over as the Principal Recipient. Village Malaria Workers are also actively joining the broader Village Health Volunteer network.
  - **Technical Capacity & Legacy Partnerships:** Under the Roadmap to Malaria Integration 2024–2030, Lao PDR is formalizing partnerships to sustain the program. CMPE will consolidate legacy training resources into a central Ministry of Health repository to embed core malaria competencies into routine education.
- **Budget Comparison (RAI4E vs. RAI5E):**
  - The total Global Fund allocation for Malaria decreased from USD 14,690,530 in GC7 (RAI4E) to USD 5,360,522 for GC8 (RAI5E).
  - **By Entity:** CMPE will manage the largest share at 66.64% (USD 3,572,296), followed by DDC at 9.78% (USD 524,147) and UNOPS at 8.00% (USD 428,842). Several entities from GC7 (HPA, MPSC, DOF) will not receive allocations in GC8.
  - **By Module:** The largest budget allocations remain concentrated in Case Management (30%), Program Management (29%), and RSSH: Monitoring and Evaluation Systems (21%).

Key discussion points and comments from the meeting

- **Malaria Program (UNOPS):** The first draft of the funding proposal was submitted to the Global Fund on September 8, and TRP feedback has been addressed. The malaria budget for GC8 has decreased to only 5.3 million USD (down from 14.6 million USD in GC7).
- The meeting agreed that the Principal Recipient (UNOPS) and relevant partners will proceed with the Grant Negotiations scheduled for mid-October in Bangkok to finalize the grant documents ahead of the GAC meeting on October 15, 2026.

Decisions
No Decision

Agenda Item #5	**Progress update on the GF Grant Implementation for Catalytic Matching Fund**

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

Representative from The National Centre for Laboratory and Epidemiology (NCLE) presented a progress report on the Global Fund's Matching Funds (MF) for the Lab Systems Strengthening (IBF1) initiative (NCLE has not shared the presentations).

Key discussion points and comments from the meeting

Laboratory Systems, Diagnostics, and Future Directions

- **Integrated Specimen Referral System (NSR):** The National Center for Laboratory and Epidemiology (NCLE) successfully utilized C19RM funds to implement and evaluate the system in 8 districts, receiving 152 samples into the system (exceeding the target of 120 samples) and emphasizing Bio-safety and Bio-security standards. The actual required budget nationwide is approximately 12 million USD, but the Global Fund supported 7.5 million USD, achieving a high absorption rate of 95%.
- **Management of Diagnostic Equipment (GeneXpert):** Key Performance Indicators (KPIs) such as EQA were submitted for assessment 2 times this year (down from the usual 3 times due to budget constraints) but still

successfully met the targets. The utilization of the 55 existing GeneXpert machines has maintained an operational rate exceeding the 55% standard according to SR reports, utilizing the DNO theory at approximately 22%.

- **Maintenance Challenges:** The maintenance cost for GeneXpert machines is very high (estimated at millions of USD over 3 years), posing a major challenge. The meeting proposed a long-term strategic plan utilizing the state budget to assist, exploring the use of existing PCR machines at the provincial level instead, and building the capacity of domestic companies to act as maintenance providers for sustainability. The HIV and TB centers must coordinate closely in planning the procurement and installation of equipment to reduce overlap and save costs.

Decisions

The meeting agreed to develop a long-term strategic plan to address the high maintenance costs of diagnostic equipment, which includes exploring state budget assistance, utilizing existing provincial PCR machines, and building domestic capacity for maintenance. Furthermore, the meeting mandated that the HIV and TB centers coordinate closely in planning the procurement and installation of equipment to reduce overlap and save costs.

Agenda Item #6	**Closing Session** **Next Meetings:** o The Q3 CCM Plenary Meeting is expected to be held in late October. o The oversight field visit for the three diseases is planned to take place in early November. o Formal adjournment.

SUMMARY OF PRESENTATIONS AND ISSUES DISCUSSED

The CCM Secretariat informed the meeting of its plan to conduct the second oversight field visit in early November 2026, based on the CCM Work Plan 2026. The meeting agreed with this proposal.

Decisions

The meeting agreed with the CCM Secretariat's proposal to conduct the oversight field visit for HIV, TB and Malaria is planned to take place in early November.

4. SUMMARY OF DECISIONS AND ACTION POINTS

AGENDA ITEM N°.	WRITE IN DETAIL THE DECISIONS	KEY PERSON RESPONSIBLE	DUE DATE
Agenda Item No. 1	• Integrate the grant implementation mechanism into the government system. • Revise TORs and develop SOPs with clear approval timelines to prevent delays in document flow and financial disbursements.	DOF, DDC, and NPCO	As soon as possible / Ongoing
Agenda Item No. 2	• Advance the GC8 Co-Financing Commitment Letter for ministerial signatures (MoH and MoF) prior to the November GAC deadline. • Provide detailed, translated breakdowns of central administration support payments per disease as requested by the Global Fund. • Restructure the procurement committee and harmonize procurement standards for HIV testing reagents through joint planning and centralized procurement.	CMPE, DDC, CHAS, DOF, and CCM Secretariat	October–November 2026 (Before GAC Meeting)
Agenda Item No. 5	• Develop a long-term strategic plan for equipment maintenance (exploring state budget support, utilizing provincial PCR machines, and building domestic maintenance capacity). • HIV and TB Centers to coordinate closely on the procurement and installation of equipment to optimize costs.	NCLE, HIV and TB Centers	Ongoing

Agenda Item No. 6	• The oversight field visit for HIV, TB and Malaria is planned to take place in early November.	CCM Secretariat	Early November 2026

5. MINUTES PREPARED BY:

TYPE/PRINT NAME	Mr. Budhsalee Rattana	**DATE:**	29 September 2026
FUNCTION/POSITION	Coordinator and Finance Officer	**SIGNATURE**	

6. MINUTES APPROVED BY:

TYPE/PRINT NAME	Dr. Rattanaxay Phetsouvanh	**DATE:**	30 September 2026
FUNCTION/POSITION	CCM Vice Chair / Senior Advisor, Foundation Mérieux Laos	**SIGNATURE**	