



UNCLASSIFIED

May 13, 2022

MEMO FOR CRAIG CLOUD, U.S. AMBASSADOR TO BOTSWANA

FROM: S/GAC – Dr. Sara Klucking, S/GAC Chair

THROUGH: S/GAC – Dr. Angeli Achrekar, Acting U.S. Global AIDS Coordinator

SUBJECT: PEPFAR Botswana Country Operational Plan 2022 Approval

This memo represents the successful completion of the PEPFAR Botswana Country Operational Plan (COP) 2022 planning, development and submission. PEPFAR Botswana, together with the partner government, civil society and multilateral partners, has planned and submitted a COP 2022 in alignment with the directives from the COP 2022 planning level letter, data-driven decisions made during the in-country retreat, and agreements made during the virtual planning meeting.

This memo serves as the approval for the PEPFAR Botswana COP 2022 with a total approved budget of \$60,355,679 including all initiatives and applied pipeline, to achieve the targets and outcomes as listed in this memo and all appendices. Total budget is reflective of the following programming:

	New Funding (All Accounts)	Pipeline	Total Budget FY2023 Implementation
TOTAL	50,891,316	9,464,363	60,355,679
Bilateral	50,374,316	9,464,363	59,838,679
Central	517,000		517,000

The total FY 2023 outlay for COP 2022 implementation shall not exceed the total approved COP 2022 budget of \$60,355,679 without additional written approval. Any prior year funds that are not included within this COP 2022 budget and documented within this memo, its appendices and official PEPFAR data systems are not to be made available for execution and outlay during FY 2023 without additional written approval. The new FY 2022 funding and prior year funds approved within this memo as a part of the total COP 2022 budget are allocated to achieve specific results, outcomes and impacts as approved. All requested Operational Plan Updates and shifting of funds – either between mechanisms and partners, or to add additional funding to mechanisms and partners for execution in FY 2023– must be submitted to and approved by S/GAC and documented in FACTSInfo NextGen via the Operational Plan Update process.

UNCLASSIFIED

Approved funding will be made available to agencies for allocation to country platform to implement COP 2022 programming and priorities as outlined below and in the appendix.

American Rescue Plan Act (ARPA) ESF Funds

All ARPA ESF funds from COP 2021 must be obligated by September 30, 2022. ARPA funds obligated by this date can continue to be outlayed for their approved purposes in COP 2022/FY2023 on top of the approved COP 2022 envelope.

Background

This approval is based upon: the discussions that occurred between the country team, agency headquarters, S/GAC, partner government, local and global stakeholders and partners during the March 15-17, 2022 virtual planning meetings and participants in the May 4, 2022, virtual approval meeting; the final COP 2022 submission, including all data submitted via official PEPFAR systems or within supplemental documents.

Program Summary

Funding and targets for PEPFAR Botswana's COP 2022 are approved to support PEPFAR Botswana's (PEPFAR/B) COP 2022 vision of "Pivoting Towards Equitable Sustainability". PEPFAR/B will continue to support the Government of Botswana (GoB) to achieve the 95-95-95 UNAIDS goals. Notably, Botswana, as demonstrated by the preliminary finding of 93-98-98 from the recent Botswana AIDS Impact Survey (BAIS) V, has now nearly attained and in some cases exceeded these goals overall. However, when these data are reviewed by age, sex, and geography, gaps of underserved populations are identified. In COP 2022, PEPFAR/B will focus on the remaining case-finding, treatment, and viral-load suppression gaps to ensure 95-95-95 is achieved across all age bands and sexes through the delivery of evidence-based, equitable, person-centered HIV services, leaving no one behind. Through this targeted approach to closing the gaps, PEPFAR/B will reach and retain 179,580 individuals on life-saving treatment (53% of the 336,189 PLHIV in Botswana on ART) by the end of FY 2023 with 98% virally suppressed. In addition, PEPFAR/B will conduct an Integrated Behavioral and Biological Surveillance Survey (IBBSS) to provide up-to-date estimates on HIV prevalence and progress, and to inform remaining gaps toward the 95-95-95 goals among key population (KP) groups.

In parallel to achieving the 95-95-95 mission, the program for COP 2022 will work closely with the GoB to intentionally pivot the PEPFAR/B program to ensure program impact can be sustained long-term. Botswana's success in achieving 93-98-98 positions Botswana to articulate and implement a vision for sustainability that can serve as a model for others. PEPFAR/B will support the GoB to build enduring capabilities consistent with sustaining HIV impact with resilient and capacitated country health systems and strong communities, enabling environments, and local partners. Additionally, PEPFAR/B will support the GoB to build lasting collaborations for greater impact, burden sharing, and accountability.

Programming to be implemented in FY 2023 begins to pivot support towards sustainability with a gradual shift of PEPFAR interventions to GoB custodianship and a strengthening of country

health systems capacity. This pivot will leverage U.S. Government Agency strengths across clinical and community platforms and streamline Agency efforts to best support enhanced case finding strategies, person-centered services, laboratory system strengthening, surveillance for recent infections, supply chain strengthening, addressing structural barriers to health services, and continuous quality improvement. Agencies roles have been aligned to encourage collaboration and synergize efforts to bring maximum quality of services with efficiency to the people of Botswana. PEPFAR/B will work closely with the GoB on these and other priority services and systems that underpin sustainability. PEPFAR/B will also, guided by principles of interagency cooperation and collaboration and by leveraging agency strengths and comparative advantages, realign internally to strengthen and create efficiencies.

Key areas of focus in COP 2022 include services for adolescents and children living with HIV, reducing HIV-related mortality, increased PrEP services for adolescent girls and young women (AGYW) and KP organizations and working with the GoB to strengthen continuous quality improvement and data systems for decision making. To enhance sustainable high-quality services in all facility-based health service delivery sites in Botswana, a clinical mentorship program which emphasizes quality services and health equity for all seeking services regardless of age, gender and sexual orientation, will be introduced nationally. A major pivot towards sustainability is beginning to shift from direct service delivery to technical assistance across all programs to allow the PEPFAR program to have more reach in ensuring that the GoB is able to provide equitable, person-centered services with quality and efficiency to all the people of Botswana. To enhance access to and availability of comprehensive KP services and strengthen the clinical-community interface, PEPFAR/B will be implementing a sustainable, evidence-based and competent KP service delivery framework in public health facilities. In addition, PEPFAR/B will maintain partnerships with KP-led and competent organizations in providing comprehensive HIV services via community-based service points. In its pivot toward sustainability of these KP services, PEPFAR/B will also work with the GoB to continue strengthening policy structures for social contracting and social enterprise, and address structural barriers to ensure that services to key populations are welcoming, supportive, and personalized. PEPFAR/B will continue to invest in community-led monitoring and critical partnerships with multilateral institutions and civil society organizations to ensure alignment and synergistic programming that cuts across both clinical and social dynamics of the HIV response, including HIV stigma, discrimination, and gender-based violence (GBV).

COP 2022 will support 87,821 PLHIV with TB Prevention Therapy (TPT) services including a scale up of 3HP implementation, and stronger integration of TPT in the core package of services including multi-month dispensing and differentiated service delivery models. PEPFAR/B will support 36,303 WLHIV on ART, including female sex workers, with cervical cancer screening services. Additional HIV prevention interventions for COP 2022 include continued funding for the prevention interventions that target vulnerable AGYW through the DREAMS (Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe) program with increases PrEP programming and GBV interventions for both AGYW and for KPs. DREAMS is committed to durable and sustainable programming through capacity building of DREAMS ambassadors and mentors. Finally, over 10,000 men will receive voluntary medical male circumcision services in COP 2022. In summary, COP 2022 builds on Botswana's success in achieving 93-98-98 and pivots to support the GoB in articulating and implementing a vision for sustainability.

Funding Summary

All COP 2022 funding summarized in the charts below is approved at the agency and account levels as indicated. Funds are to be utilized to achieve the targets and outcomes and to fund implementing partners and Management and Operations costs (U.S. Government Costs of Doing Business) as documented in PEPFAR systems.

	Total	of which, Bilateral New Funding						Applied Pipeline	
		Total	FY 2022			FY 2021			FY 2020
			GHP-State	GHP-USAID	GAP	GHP-State	GHP-State		
TOTAL	59,836,679	50,374,316	42,874,316	40,678,066	2,196,250	-	7,500,000	9,464,363	
DOD Total	256,679	-	-	-	-	-	-	256,679	
DOD	256,679	-	-	-	-	-	-	256,679	
HHS Total	30,220,565	24,268,468	21,359,966	19,163,716	2,196,250	-	2,908,502	5,952,097	
HHS/CDC	30,220,565	24,268,468	21,359,966	19,163,716	2,196,250	-	2,908,502	5,952,097	
HHS/HRSA	-	-	-	-	-	-	-	-	
PC Total	2,964,944	-	-	-	-	-	-	2,964,944	
PC	2,964,944	-	-	-	-	-	-	2,964,944	
STATE Total	1,029,890	942,711	942,711	942,711	-	-	-	87,179	
State	136,844	136,844	136,844	136,844	-	-	-	-	
State/AF	893,046	805,867	805,867	805,867	-	-	-	87,179	
USAID Total	25,366,601	25,163,137	20,571,639	20,571,639	-	-	4,591,498	203,464	
USAID, non-WCF	24,521,801	24,521,801	20,426,839	20,426,839	-	-	4,094,962	-	
USAID/WCF	844,800	641,336	144,800	144,800	-	-	496,536	203,464	

* Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2023.

	Total	of which, Central New Funding						Applied Pipeline	
		Total	FY 2022			FY 2021			FY 2020
			GHP-State	GHP-USAID	GAP	GHP-State	GHP-State		
TOTAL	517,000	517,000	517,000	517,000	-	-	-	-	
DOD Total	-	-	-	-	-	-	-	-	
DOD	-	-	-	-	-	-	-	-	
HHS Total	-	-	-	-	-	-	-	-	
HHS/CDC	-	-	-	-	-	-	-	-	
HHS/HRSA	-	-	-	-	-	-	-	-	
PC Total	-	-	-	-	-	-	-	-	
PC	-	-	-	-	-	-	-	-	
STATE Total	-	-	-	-	-	-	-	-	
State	-	-	-	-	-	-	-	-	
State/AF	-	-	-	-	-	-	-	-	
USAID Total	517,000	517,000	517,000	517,000	-	-	-	-	
USAID, non-WCF	517,000	517,000	517,000	517,000	-	-	-	-	
USAID/WCF	-	-	-	-	-	-	-	-	

* Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2023.

GHP-State Funds: Upon the clearance of a FY 2022 PEPFAR GHP-State Congressional Notification (CN), funds will be made available for transfer to agency HQs as indicated in the above chart. Funds are made available for outlay in FY 2023 at approved COP 2022 partner budget levels to achieve FY 2023 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Upon receipt from S/GAC, agency headquarters will move the funds to the country platform via each agency's internal process.

CDC GAP Funds: With the receipt of this signed memo, CDC is approved to use CDC GAP funds, as indicated in the above funding chart. Funds are to be made available for outlay in FY 2023 at approved COP 2022 partner budget levels to achieve FY 2023 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. With this approval, CDC GAP funding may be made available to country teams per CDC internal processes and following agency requirements.

Applied Pipeline Funds: With the receipt of this signed memo, respective agencies are approved to use applied pipeline funds as indicated in the above funding chart. Funds are to be made available for outlay in FY 2023 at approved COP 2022 partner budget levels to achieve FY 2023 targets and outcomes as documented in official PEPFAR systems and summarized in the approval memo's appendix. Additional or remaining pipeline from previous year's activities that are not currently captured in the COP 2022 total budget level and documented within COP 2022 partner budgets are not to be executed or outlayed without written approval from S/GAC.

Earmarks: PEPFAR Botswana has planned for programming for FY 2022, FY 2021, and/or FY 2020 GHP-State funding that it considered to meet a number of earmarks, as indicated in the table below. The amounts programmed during COP may exceed the original controls assigned to PEPFAR Botswana. Upon approval of this memo, the amounts below will become the new earmark controls for the Botswana. Any changes to the amount of funding programmed for earmark-eligible activities must be approved via an OPU.

Earmarks	COP22 Funding Level			
	TOTAL	FY 2022	FY 2021	FY 2020
Care & Treatment	19,418,478	18,454,767	-	963,711
Orphans and Vulnerable Children	14,031,597	13,935,923	-	95,674
Preventing and Responding to Gender-based Violence	1,766,157	1,766,157	-	-
Water	50,000	50,000	-	-

* Only GHP-State and GHP-USAID will count towards the Care and Treatment and OVC earmarks

** Only GHP-State will count towards the GBV and Water earmarks

AB/Y Earmark	COP22 Funding Level				
	TOTAL	FY 2022	FY 2021	FY 2020	Applied Pipeline
TOTAL Sexual Prevention Programming	5,078,644	4,351,194	-	727,450	-
Of which, AB/Y	3,452,500	3,452,500	-	-	-
% AB/Y of TOTAL Sexual Prevention Programming	68.0%	79.3%	N/A	N/A	N/A

*Applied Pipeline refers to funding allocated in prior years, approved for implementation in FY 2023.

AB/Y Earmark Budget Justification

AB/Y Requirement Met.

Initiatives by Agency

	Total Bilateral - New Funding	Total Bilateral Applied Pipeline	Total Central - New Funding	Total Central Applied Pipeline	Total COP22 Budget
TOTAL	50,374,316	9,464,363	517,000	-	60,355,679
<i>of which, Cervical Cancer</i>	<i>1,000,000</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>1,000,000</i>
<i>of which, Community-Led Monitoring</i>	<i>400,000</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>400,000</i>
<i>of which, Core Program</i>	<i>28,723,887</i>	<i>6,315,478</i>	<i>-</i>	<i>-</i>	<i>35,039,365</i>
<i>of which, DREAMS</i>	<i>17,060,114</i>	<i>2,085,428</i>	<i>-</i>	<i>-</i>	<i>19,145,542</i>
<i>of which, OVC (Non-DREAMS)</i>	<i>1,000,472</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>1,000,472</i>
<i>of which, Surveillance and Public Health Response</i>	<i>964,000</i>	<i>420,000</i>	<i>-</i>	<i>-</i>	<i>1,384,000</i>
<i>of which, USAID Southern Africa Regional Platform (Central)</i>	<i>-</i>	<i>-</i>	<i>517,000</i>	<i>-</i>	<i>517,000</i>
<i>of which, VMCC</i>	<i>1,225,843</i>	<i>643,457</i>	<i>-</i>	<i>-</i>	<i>1,869,300</i>
DOD Total	-	256,679	-	-	256,679
<i>of which, Core Program</i>	<i>-</i>	<i>187,379</i>	<i>-</i>	<i>-</i>	<i>187,379</i>
<i>of which, VMCC</i>	<i>-</i>	<i>69,300</i>	<i>-</i>	<i>-</i>	<i>69,300</i>
HHS Total	24,268,468	5,952,097	-	-	30,220,565
<i>of which, Cervical Cancer</i>	<i>875,000</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>875,000</i>
<i>of which, Core Program</i>	<i>18,238,668</i>	<i>4,957,940</i>	<i>-</i>	<i>-</i>	<i>23,196,608</i>
<i>of which, DREAMS</i>	<i>2,983,957</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>2,983,957</i>
<i>of which, Surveillance and Public Health Response</i>	<i>945,000</i>	<i>420,000</i>	<i>-</i>	<i>-</i>	<i>1,365,000</i>
<i>of which, VMCC</i>	<i>1,225,843</i>	<i>574,157</i>	<i>-</i>	<i>-</i>	<i>1,800,000</i>
PC Total	-	2,964,944	-	-	2,964,944
<i>of which, Core Program</i>	<i>-</i>	<i>879,516</i>	<i>-</i>	<i>-</i>	<i>879,516</i>
<i>of which, DREAMS</i>	<i>-</i>	<i>2,085,428</i>	<i>-</i>	<i>-</i>	<i>2,085,428</i>
STATE Total	942,711	87,179	-	-	1,029,890
<i>of which, Community-Led Monitoring</i>	<i>400,000</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>400,000</i>
<i>of which, Core Program</i>	<i>447,919</i>	<i>87,179</i>	<i>-</i>	<i>-</i>	<i>535,098</i>
<i>of which, DREAMS</i>	<i>94,792</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>94,792</i>
USAID Total	25,163,137	203,464	517,000	-	25,883,601
<i>of which, Cervical Cancer</i>	<i>125,000</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>125,000</i>
<i>of which, Core Program</i>	<i>10,037,300</i>	<i>203,464</i>	<i>-</i>	<i>-</i>	<i>10,240,764</i>
<i>of which, DREAMS</i>	<i>13,981,365</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>13,981,365</i>
<i>of which, OVC (Non-DREAMS)</i>	<i>1,000,472</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>1,000,472</i>
<i>of which, Surveillance and Public Health Response</i>	<i>19,000</i>	<i>-</i>	<i>-</i>	<i>-</i>	<i>19,000</i>
<i>of which, USAID Southern Africa Regional Platform (Central)</i>	<i>-</i>	<i>-</i>	<i>517,000</i>	<i>-</i>	<i>517,000</i>

FY 2023 Target Summary

COP/ROP 2022 funds are approved to achieve the following results in FY 2023.

Botswana	SNU Prioritizations			
	Scale-up: Saturation	Attained	Total	
	<15	20	652	672
TX_NEW	15+	256	7,944	8,200
	Total	276	8,596	8,872
	<15	46	2,320	2,366
TX_CURR	15+	2,431	174,783	177,214
	Total	2,477	177,103	179,580
	<15	40	2,082	2,122
TX_PVLS	15+	2,351	168,618	170,969
	Total	2,391	170,700	173,091
	<15	-	1,267	1,267
HTS_SELF	15+	741	21,938	22,679
	Total	741	23,205	23,946
	<15	167	4,942	5,109
HTS_TST	15+	2,161	111,309	113,470
	Total	2,328	116,251	118,579
	<15	20	651	671
HTS_TST_POS	15+	263	8,206	8,469
	Total	283	8,857	9,140
HTS_RECENT	Total	242	7,584	7,826
	<15	103	3,997	4,100
HTS_INDEX	15+	1,397	35,814	37,211
	Total	1,500	39,811	41,311
	<15	-	15	15
PMTCT_STAT	15+	-	23,216	23,216
	Total	-	23,231	23,231
	<15	-	-	-
PMTCT_STAT_POS	15+	-	4,991	4,991
	Total	-	4,991	4,991
	<15	-	-	-
PMTCT_ART	15+	-	4,984	4,984
	Total	-	4,984	4,984
PMTCT_EID	Total	-	5,039	5,039
	<15	-	-	-
TB_STAT	15+	88	1,556	1,644
	Total	88	1,556	1,644
	<15	-	-	-
TB_ART	15+	16	684	700
	Total	16	684	700
	<15	30	1,408	1,438
TB_PREV	15+	1,163	85,220	86,383
	Total	1,193	86,628	87,821
	<15	46	2,386	2,432
TX_TB	15+	2,481	178,312	180,793
	Total	2,527	180,698	183,225
VMMC_CIRC	Total	-	10,011	10,011
KP_PREV	Total	-	9,944	9,944
PrEP_NEW	Total	285	12,005	12,290
PrEP_CT	Total	54	2,387	2,441
CXCA_SCRN	Total	582	35,721	36,303
	<15	-	-	-
PP_PREV	15+	100	31,891	31,991
	Total	100	31,891	31,991
	<18	561	40,540	41,101
OVC_SERV	18+	287	5,571	5,858
	Total	848	46,111	46,959
OVC_HIVSTAT	Total	541	20,488	21,029
GEND_GBV	Total	132	12,155	12,287
AGYW_PREV	Total	-	26,290	26,290

* Totals may be greater than the sum of categories due to activities outside of the SNU prioritization areas outlined above

Partner Management and Stakeholder Engagement:

Agreements made during COP/ROP 2022 discussions, including those regarding geographic focus, targets, budgets, SIMS, use of pipeline, partner implementation and partner management will be monitored and evaluated on a regular basis via both ad hoc check-ins and discussions as well as the joint HQ and country team POART discussions. It is expected that teams closely monitor partner performance and engage with each implementing partner on a regular basis to ensure achievement of targets, outcomes and impact in a manner consistent with this memo, approved SDS, and budgets and targets as finalized in PEPFAR systems. Any partner with EITHER (1) <15 percent of target achievement at 3 months or (2) less than 40 percent of target achievement at 6 months must have a complete review of performance data (including trends in performance) and outlays to date, implement remediation, and conduct intensive follow-up. In the HIV treatment program, most clients are continuing on treatment year after year and current on treatment (TX_CURR) performance should be between 98 percent and 100 percent of the target. This can be adjusted in country context where HIV treatment services are still scaling up and the treatment new target is greater than 10 percent of treatment current. OVC programs are also similar in that there are clients continuing services from the previous year; if the IP is less than 80 percent of their target at Q2 performance review should be initiated. These elements (i.e. review, remediation, and follow-up) should be incorporated into the existing IP work plans. A second quarter of consistently poor performance by the IP should also result in implementation of a documented Performance Improvement Plan (PIP) or Correction Action Plan (CAP), in accordance with implementing agency policy. PIP indicators should reflect the core issue. If the issue is linkage of test positive to treatment the indicator measured should be test positive to new in treatment of greater than 85 percent. If the issue is retention it should be net new on treatment equal to 90 percent of new on treatment. After two quarters of intensive oversight and remediation for underperformance, partners should be close to full achievement of targets expected at quarter three. With a third quarter of consistently poor performance by the IP, implementing agencies should notify S/GAC the options the agency is implementing to address partner non-performance, including options for a shift to new partners. The country team should notify the S/GAC Chair and PPM immediately of the improvement plan.

Continued engagement with all stakeholders, including civil society and community members, multilateral partners and bilateral partners, is to continue throughout COP/ROP 2022 implementation. Core to this critical engagement is the sharing of and discussion surrounding quarterly results and achievement and findings from community-led monitoring. This continued engagement will ensure all parties' understanding of PEPFAR/Botswana's progress and help identify any strategic changes to be made in order to more efficiently and effectively reach epidemic control.

COP21-COP22 Budget Shifts by Funding Agency and Program Area

COP 21 Budget by Funding Agency and Program Area

Funding Agency	GRAND TOTAL	% of TOTAL	ASP	ASP as % of Total	C&T	C&T as % of Total	HTS	HTS as % of Total	PM	PM as % of Total	PREV	PREV as % of Total	SE	SE as % of Total	Net Specified	Net Specified as % of Total
Total	4,021,210	100%	3,497,601	87%	16,818,877	41%	2,489,232	62%	2,071,634	51%	17,689,506	44%	3,342,992	83%	-	0%
DOD	866,839	21%	20,000	0%	321,052	8%	0	0%	294,787	7%	231,000	6%	0	0%	0	0%
HHS	30,244,007	75%	1,777,743	4%	12,305,675	31%	1,877,478	47%	8,920,862	22%	5,539,247	14%	0	0%	0	0%
PC	3,715,071	9%	-	0%	-	0%	-	0%	3,373,874	8%	223,429	6%	111,768	3%	-	0%
STATE	1,029,591	3%	-	0%	418,292	1%	-	0%	515,942	1%	95,357	2%	0	0%	-	0%
USAD	24,622,992	61%	1,169,856	3%	3,201,558	8%	591,747	1%	7,668,933	19%	6,760,467	17%	5,130,531	13%	-	0%

COP 22 Budget by Funding Agency and Program Area

Funding Agency	GRAND TOTAL	% of TOTAL	ASP	ASP as % of Total	C&T	C&T as % of Total	HTS	HTS as % of Total	PM	PM as % of Total	PREV	PREV as % of Total	SE	SE as % of Total	Net Specified	Net Specified as % of Total
Total	40,458,779	100%	6,310,248	16%	11,182,357	28%	1,147,272	3%	31,477,218	77%	14,340,179	35%	6,545,337	16%	-	0%
DOD	256,679	0%	11,550	0%	69,300	0%	0	0%	89,429	0%	92,400	0%	0	0%	0	0%
HHS	30,220,565	75%	3,256,370	8%	10,039,780	25%	3,258,664	8%	10,200,539	25%	3,465,218	9%	0	0%	0	0%
PC	2,860,944	7%	-	0%	-	0%	-	0%	2,629,747	7%	223,479	1%	111,768	0%	-	0%
STATE	1,029,820	3%	-	0%	414,792	1%	-	0%	615,088	2%	-	0%	0	0%	-	0%
USAD	25,885,601	64%	3,102,448	8%	2,644,385	7%	615,061	1%	7,948,411	20%	5,139,332	13%	6,433,564	16%	-	0%

COP 21-22 Budget Shifts by Funding Agency and Program Area

Funding Agency	Total Change	Change in ASP	% Change in ASP	Change in C&T	% Change in C&T	Change in HTS	% Change in HTS	Change in PM	% Change in PM	Change in PREV	% Change in PREV	Change in SE	% Change in SE	Change in Not Specified	% Change in Not Specified
Total	(177,311)	(300,747)	-7%	(1,110,250)	-10%	(1,093,500)	-9%	(56,240)	-3%	(1,749,131)	-12%	(1,111,111)	-33%	-	-
DOD	(610,160)	(8,450)	-1%	(251,752)	-8%	-	0%	(211,359)	-7%	(136,600)	-6%	-	0%	-	0%
HHS	(23,442)	1,478,625	83%	(2,268,895)	-18%	1,381,186	74%	1,279,871	14%	(1,894,029)	-35%	-	0%	-	0%
PC	(750,127)	-	0%	-	0%	(730,127)	-22%	-	0%	-	0%	-	0%	-	0%
STATE	288	-	0%	(5,500)	-1%	-	0%	99,156	1%	(95,357)	-1%	-	0%	-	0%
USAD	1,260,609	1,932,892	153%	(657,173)	-20%	23,314	4%	279,478	4%	(1,621,135)	-24%	1,303,233	25%	-	0%