

Annexes Workshop

Programmatic Gap Tables, Funding Landscape Table,
Performance Framework, Detailed Budget

28 January 2026

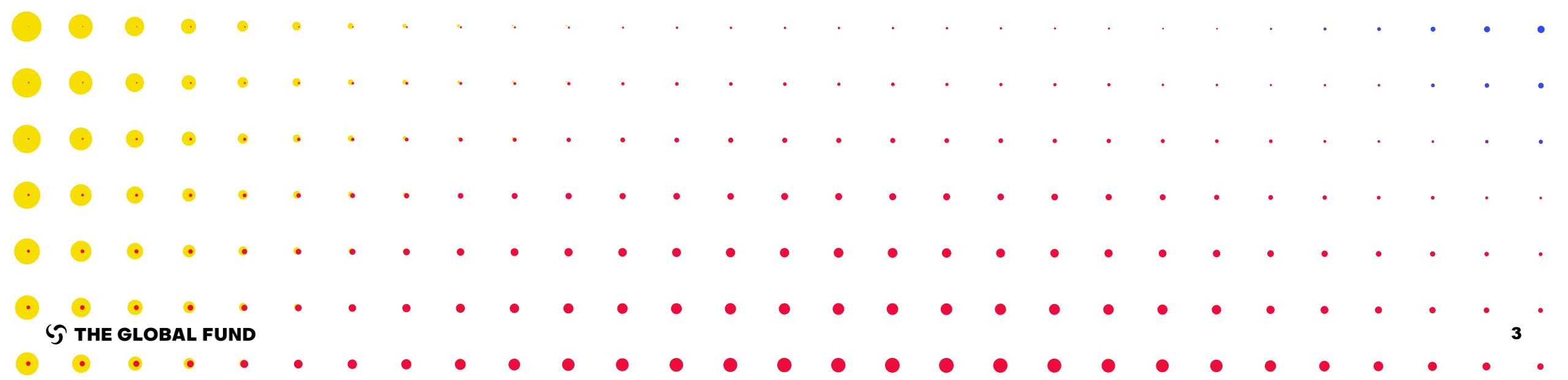
Agenda

- 1 Opening Remarks**
 - 2 Updates to Funding Landscape Tables**
 - 3 Updates to Performance Framework**
 - 4 Updates to Detailed Budget & Health Product Management Template**
 - 5 Updates to Programmatic Gap Tables**
-



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Opening remarks





The Full Review for GC8

THE GLOBAL FUND

Funding Request Form
Full Review

Grant Cycle 8

Summary Information

Country(s)	Country or countries submitting the Funding Request.
Component(s) ¹	Component(s) included in this Funding Request.
Planned grant(s) start date(s)	Projected start date for the grant(s).
Planned grant(s) end date(s)	Projected end date for the grant(s).
Principal Recipient(s)	The entity or entities nominated by the Applicant to implement the program(s).
Currency	Indicate the currency of the Funding Request as per the Allocation Letter.
Allocation Funding Request Amount	Amount requested from the Allocation, in line with the program split submitted by the applicant and confirmed by the Global Fund. This amount should be consistent across all application documents.
Prioritized Above Allocation Request (PAAR) Amount	Amount requested in the PAAR. This amount should be consistent across all application documents.
Matching Funds Request Amount (if applicable)	Amount requested in Matching Funds (if eligible), as outlined in the Allocation Letter. This amount should be consistent across all application documents.

See the Core Guidance page for guidance on prioritizing and developing the Funding Request.
See the Example of a Full Review Funding Request (forthcoming) for an example of how to complete this form.

¹ HIV, TB and malaria components can all include modules for Resilient and Sustainable Systems for Health (RSSH).

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Goal for GC8: drive impact while reducing the work necessary to develop Funding Requests

Key Principles:

1. Only ask for information in the Funding Request that needs to be requested at the Funding Request stage
2. Only ask for this information once
3. Support countries in realizing the GC8 Strategic Shifts

Result:

1. Seven fewer required annexes
2. 60% fewer pages in the Forms and Instructions

Full Review Funding Request Package



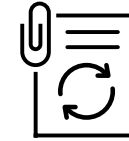
**Funding
Request Form**



**National Strategic
Plans**



**Funding
Landscape Table**



**Sustainability &
Transition
Documentation (if
available)**



**Performance
Framework**



**Funding Priorities
from Communities
and Civil Society**



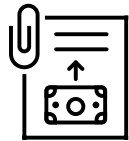
**Programmatic
Gap Tables**



**CCM Endorsement
of Funding Request**



**Detailed
Budget**



**Prioritized
Above
Allocation
Request**



**Assessment of
Equity, Human
Rights & Gender-
related Barriers to
Health Services***

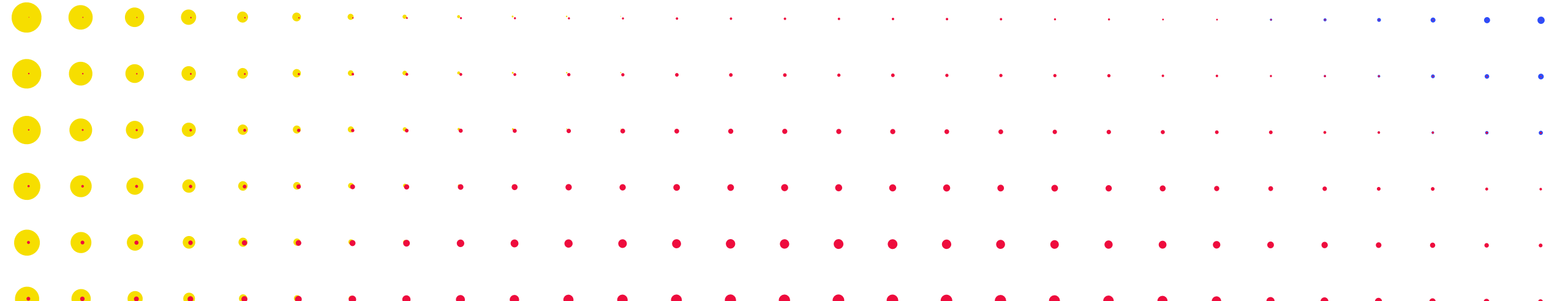


**CCM Statement of
Compliance**



2

Updates to Funding Landscape Tables



Objective of Funding Landscape Table (FLT)

Critical for understanding the financing landscape in GC8

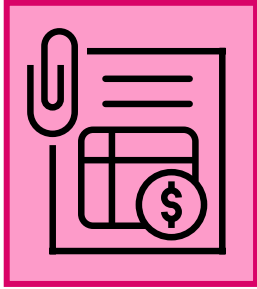
Understanding financing of the national responses in GC8 will be increasingly important as countries navigate significant changes in the overall funding landscape

The FLT is a critical tool and mandatory FR annex that enables applicants to provide information about sources of finance for the national disease response and health systems. It is used in conjunction with the programmatic gap table (PGT) to support country dialogue on domestic financing of national responses and advance transition and sustainability efforts across the Global Fund portfolio.

This information is critical for CCMs and the Global Fund to:

- Understand overall gaps in disease specific financing
- Understand available financing for specific programmatic interventions, to support country level discussions on transition of those interventions to domestic financing
- Support grant design and how it can best address financing gaps and prioritize specific health system investments
- Support design of government co-financing commitments, at disease and programmatic level, which are formally included in the Co-Financing Commitment Letter

Funding Landscape Table



- Illustrates total funding need for national responses including RSSH, past and future expenditure estimates, sources of financing, and funding gaps. Detailed gap tables provide trends in domestic financing of specific interventions, a critical priority for GC8.
- Alignment with the Programmatic Gap Table is critical to ensure coherence across tools



High Impact / Core Countries - GC8 Funding Landscape Table

Please read the Instructions sheet carefully before completing this form

Country	Zambia
Fiscal Cycle	April - March
Currency	USD

Component	Malaria
Fiscal Year in which implementation period starts	2026
Fiscal Year in which implementation period ends	2028
Detailed Disease Financial Gap based on:	Global Fund Modules

What financing information does the FLT collect?

The FLT provides country data on the national disease and health system funding landscape, including:

1. **Total funding need for each disease response**, both historical and projected forward and broken down by funding sources
2. **Total funding for specific interventions** within disease responses, projected forward
3. **Total funding specifically for prioritized health products**, projected forward
4. **Overall government health investments**, broken down by source and projected forward
5. **Funding for RSSH priorities**, projected forward

For HI / Core portfolios: what are the key things to note for GC8?

Key highlights: Same tool, greater differentiation, more streamlined

What stays the same?

- Government health and RSSH table must be completed by all low- and lower-middle-income countries. This is not required for Upper Middle Income (UMI) portfolios.
- The Disease Gap Overview Table remains mandatory for all Funding Request applicants
- The RSSH section is applicable to all countries which intend to make RSSH-related co-financing commitments as part of co-financing requirements
- Countries may choose to fill out the FLT either using national strategic plan cost categories or Global Fund modules

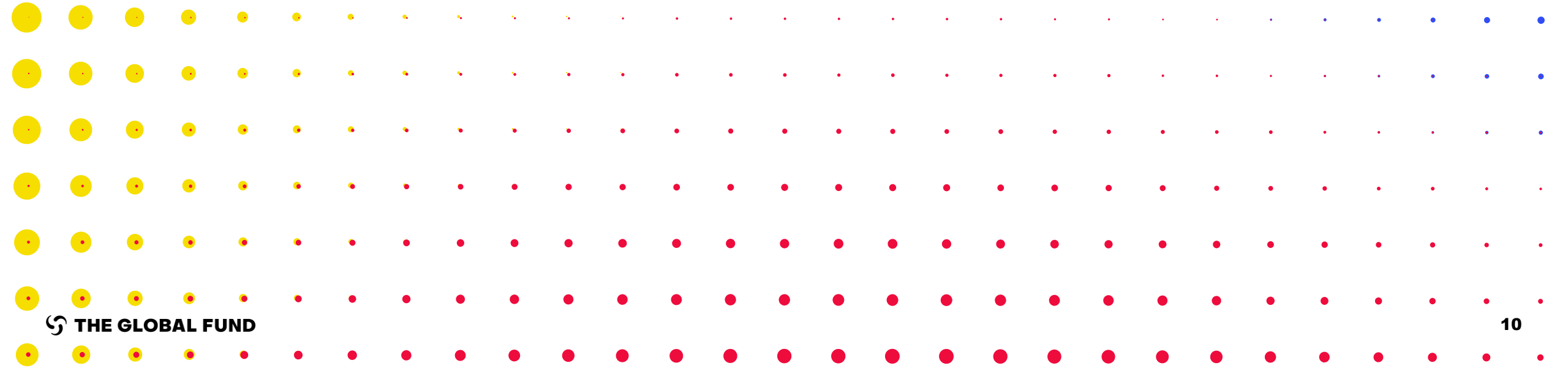
What is different for GC8?

- **Greater differentiation in the use of Detailed Disease Financial Gap table.** Specific modules must now only be completed where the following conditions BOTH apply:
 1. The total Global Fund contribution to any specific module (as set out in the separate Programmatic Gap Table) is greater than 35% based on the average contribution to priority indicators in the module; AND
 2. The Funding Request is NOT based on the Payment for Results Modality
- **Greater differentiation in the use of Health Products tab.** The tab is only mandatory if the Global Fund funding request for procurement and management of health products exceeds 35% of the total Global Fund disease allocation
- Formatting of the tool has been streamlined to be more user friendly and simple

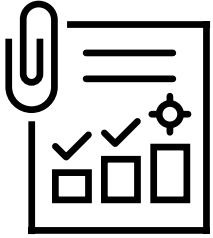


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Updates to Performance Framework



Key messages on the Performance Framework



Shows the national program targets over the funding request period

Includes impact, outcome and coverage indicators, and workplan tracking measures when coverage indicators aren't possible

Crucial tool for monitoring, oversight, and performance assessment throughout the grant implementation period



If developing a Grant-ready Funding Request, the PR(s) develop the **online** Performance Framework and submit to Applicant/CCMs in Partner Portal. The CCM receives an Excel extract, used for the FR submission.



If developing the classic Funding Request, the Applicant/CCM develop the excel Performance Framework and upload it for submission in Partner Portal. At Grant Making stage, the PR(s) develop/finalize the Performance Framework online.

More information about the system and process of the Performance Framework will be shared in a subsequent session.

What's new Performance Framework excel form

Enhancements have made based on feedback received.

No structural changes have been made to the form, only changes made for user-friendliness.

Overall

- ☐ Updated alerts have been added (rightmost column) to the Impact, Outcome and Coverage Indicators.

Overview

- ☐ Implementation and AUP start/end dates prefilled by the Global Fund.
- ☐ Space for translations of Goals and Objectives (GF internal use only).

Work Plan Tracking Measures (WPTM)

- ☐ Updated column title from Criteria for completion to “Progress Criteria”; Start, Advanced and Completed criteria now filled separately
- ☐ WPTM Category added.
- ☐ Space for translations of Milestones/Targets and Progress Criteria (GF internal use only).

Impact, Outcome, Coverage tabs

- ☐ Comments section includes guidance text to assist with completing additional information: 1) Baseline; 2) Indicator definition; 3) Targets and assumptions; 4) Measurement and recording; 5) Grant contribution; 6) Other
- ☐ Coverage tab only: Country and Scope of Targets have been split into two columns.

Indicator Disaggregations

- ☐ Separate tabs for each Impact, Outcome and Coverage indicator disaggregations.
- ☐ Hyperlinks between tabs for easy navigation between main indicator and associated disaggregations.



Excel Performance Framework walkthrough

Overview tab

Performance Framework - Overview - A	
Version	1.0
Language	English
Country/Geography	Uzbekistan
Portfolio Categorisation	Focused
Grant Name/Funding Request Name	FR2045-UZB-C
Includes Payment for Results	Partial
Implementation Period Start Date	Yes No Partial
Implementation Period End Date	1-Jan-28
Allocation Utilization Period Start Date	31-Dec-30
Allocation Utilization Period End Date	1-Jan-28
	31-Dec-30

1. Template language preset by Global Fund Country Teams

2. User able to include whether PF includes indicators for Payment for Results module

3. Implementation and Allocation Utilization start and end dates preset by Global Fund

4. Reporting Frequency moved to the Reporting Periods table for better visibility

Programmatic Reporting Period			
Reporting Frequency	12		
Period Start Date	Period End Date	PUDR Due	Submission Date
1-Jan-28	31-Dec-28	Yes	1-Mar-29
1-Jan-29	31-Dec-29	No	14-Feb-30
1-Jan-30	31-Dec-30	Yes	1-Mar-31



Excel Performance Framework walkthrough Impact, Outcome and Coverage indicators

Indicator Code	Standard Indicator	Required Disaggregation	Comments
HIV O-11	Percentage of people living with HIV who know their HIV status at the end of the reporting period	Age, Gender	1. Baseline: 2. Indicator definition: 3. Targets and assumptions: 4. Measurement and recording: 5. Grant contribution: 6. Other:

5. Comment section guidance headers autopopulated in the cell for impact, outcome and coverage indicators

Country	Scope of targets
<div>Select country from list in dropdown (where applicable)</div>	<div>Geographic National, 100% of national program target Geographic Subnational, 100% of national program target Geographic Subnational, less than 100% national program target</div>

6. Coverage tab only: Country and Scope of targets split into separate columns, dropdown remain unchanged



Excel Performance Framework - walkthrough

Disaggregations

7. Separate tabs for each of the Impact, Outcome and Coverage indicators

Overview - A	Impact Indicators - B	Impact Disaggregation - B	Outcome Indicators - C	Outcome Disaggregation - C	Coverage Indicators - D	Coverage Disaggregation - D
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8. New table at the top of the Disaggregation tabs with hyperlinks to the rows with disaggregations

AA	AB	AC	AD	AE	AF	AG	AH	AI	AJ	AK
Performance Framework - Outcome Disaggregation - C										
Page Navigation	Outcome					Instructions				
Disaggregation List	1	2	3	4						

9. Disaggregations on the Impact, Outcome and Coverage tabs are hyperlinked to the disaggregation tab to the exact disaggregation location

Outcome Indicator Number	Indicator Code	Standard Indicator	Required Disaggregation
1	HIV O-11	Percentage of people living with HIV who know their HIV status at the end of the reporting period	Age,Gender

9

Outcome Indicator Number	Outcome Indicator Name	Category	Disaggregation	Baseline #N Baseline #D	Baseline %	Baseline Year	Baseline Source
1	Percentage of people living with HIV who know their HIV status at the end of the reporting period	Gender	Male				
1	Percentage of people living with HIV who know their HIV status at the end of the reporting period	Age	<15				
1	Percentage of people living with HIV who know their HIV status at the end of the reporting period	Age	15+				
1	Percentage of people living with HIV who know their HIV status at the end of the reporting period	Gender	Female				



Excel Performance Framework walkthrough

WPTM tab

No	Module Name	Intervention	WPTM Category
1	Differentiated HIV Testing Services	Testing for others at risk of HIV infection (including OVP)	<div>Capacity Building</div> <div>Data collection and analysis</div> <div>Digitalization</div> <div>Guidelines and SOPs</div> <div>Recruitment and hiring</div> <div>Renovation, installation, and maintenance</div> <div>Service Delivery and Program Implementation</div> <div>Strategy, policy, advocacy and planning</div> <div>Supply Chain and Logistics</div> <div>Technical Assistance / Support</div>

10. New Category column added to the WPTMs, with ten options to categorize the Key activity

1-Jan-28 to 31-Dec-28	
Milestone / Target Description	Progress Criteria
Started	
Advanced	
Completed	

11. Column title updated to “Progress Criteria”, with separate rows to define Start, Advanced and Completed criteria

Things to remember

If the template is modified outside of expected input by the Applicant, it will render the file 'un-importable'. This will require them to fill in all the information again and resubmit.

Do

- ✓ Read Instructions tab carefully prior to filling the form
- ✓ Increase/decrease the row height and/or column width
- ✓ Freeze panes
- ✓ Hide columns but please make sure to unhide columns before submitting the template



Ensure that all required fields in the template are correctly filled

Do not do

- ✗ Break the password protection
- ✗ Type or copy and paste information in cells that include drop-down lists/formulae, select only from the given list
- ✗ If N and D are available, do not manually enter the % value; once a % value is manually entered, you will need to manually re-calculate the % if N and D values are added/changed at a later stage
- ✗ Add or remove columns and/or rows
- ✗ Add new worksheets in the PF
- ✗ Save the workbook in a different file format other than .xlsx format



New - Online Performance Framework

Online Performance Framework

- **Real-time calculations** of percentages and annual targets
 - **Automatic sorting** of indicators by disease and module
 - **Disaggregations shown inline** with respective indicators
-

Data Quality Checks

- **System** checks of common data entry errors
 - **Warnings and Critical Warnings** alert user to possible data inconsistencies and require justification to submit form
 - **No errors** blocking form submission at funding request stage
-

Offline collaboration

- Can **download Excel extract** for offline collaboration (no import functionality)
-

More information about the system and process of the Performance Framework will be shared in a subsequent session.



Updates to Detailed Budget and HPMT

Detailed Budget: At a glance

Overall structure remains unchanged: Five types of tabs

Setup Tab

Includes general information about the program, organized in three sections: i) Grant information; ii) Reporting set-up; and iii) Budget set-up

ICR and Investment Landscape Tabs

- ICR tab provides an estimate calculation of the Indirect Cost Recovery (ICR)
- Investment landscape tab provides an overview of the investment landscape by key categories:
 1. Health Products and Supply Chain Management Costs
 2. Program Management Related Costs
 3. Program Activity Related Costs

Summary Tabs

Four summary tabs which provide a snapshot of the budget grouped in pre-defined categories:

1. Budget Summary (by module, cost grouping and implementer)
2. Summary by Intervention
3. Summary by Cost Input
4. Budget Summary by Source of Funds

Detailed Budget Tabs

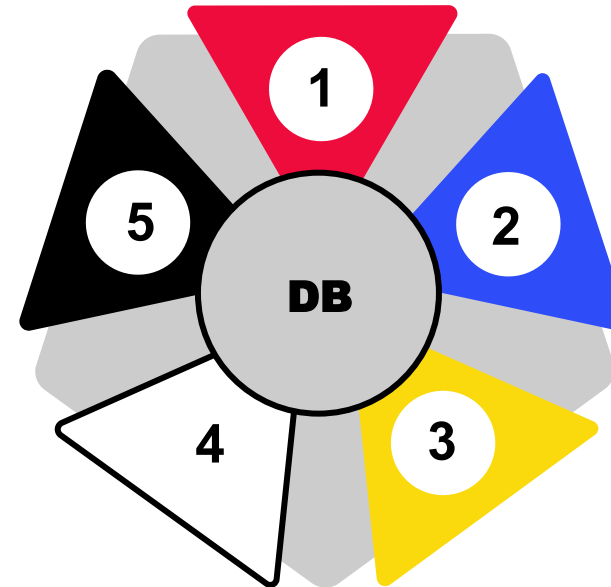
Two separate “Detailed Budget” tabs with annual budget amounts

- One tab for **Health Products (HP)** budget
- One tab for **Non-Health Products** budget

Assumptions Tabs

Standardized budget assumptions tabs for human resources (HR), travel-related costs (TRC), health products (HP)** and free sheet for other assumptions (incl. RBF related ones)

**Focused portfolio specific,
More info on the next slide



Detailed Budget: Summary of key changes

Optimization of Non-HP tab

Removal of:

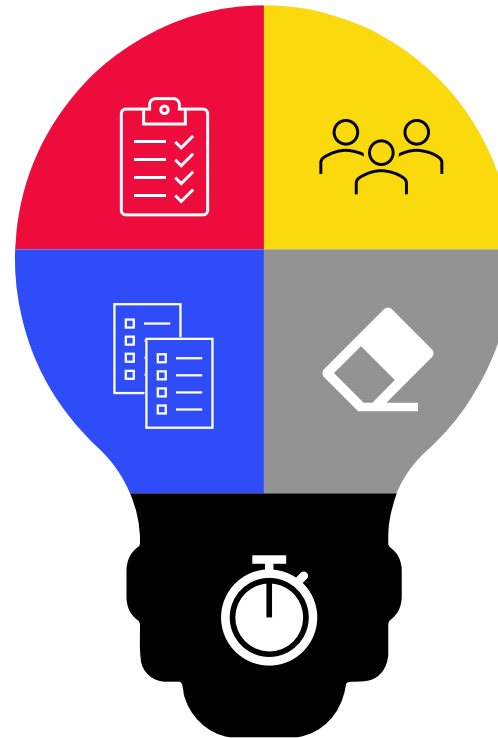
- **Unit Cost, Unit of Measure and Total Quantity for all years** Columns

Introduction of:

- **Total Cash Flow (payment currency)** column;
- **Unfunded Quality Demand & Climate and Health Fund** drop-down options under Source of Funding

Introduction of “HP Assumptions” tab

HP Assumptions tab is **applicable strictly to Focused portfolios**. They will need to link the total cost in grant currency to the Detailed Budget Non-HP tab using the HP cost groupings (4 to 7, incl). Under exceptional circumstances, some High Impact/Core portfolios may also be applicable; these will systematically be flagged by the Global Fund. The online HPMT is not required for these portfolios.



Update and standardization of reference data

Modules, Interventions, and Cost Inputs aligned with the **latest Modular Framework and Costing Dimensions**. All elements have been **updated and streamlined** with the aim of facilitating **more efficient budgeting of grant investments** and **reducing the overall time** required for budget completion.

Tabs removed

Financial Triggers tab – The triggers will be moved online. Input will be required by the Applicants/PRs directly in the Partner Portal.



Online HPMT

Introducing the new Health Product Management Template (HPMT) for Grant Cycle 8

New online form replacing the previous Excel version
Accessible by PRs online in the Partner Portal, upon CCM confirmation of nomination, for each grant



Improved User Experience

Online tool allowing for quick edits and easy product selection, moving away from a complex and heavy Excel file



Simplified Detailed Budget Calculation

Increased PR visibility and control as to how the detailed budget lines are calculated. The PR allocates the budget amount against the selected interventions for each group of products.



Integrated with GF systems

The online HPMT uses the most recent updated product list, with reference prices and lead times thanks to data integration with the Product Data Hub



Improved visibility

Increased data visibility for the GF and PRs throughout the Grant Life Cycle, enabled through the integration with GF systems



Built-in Data Quality Checks

Automated data quality checks:

1. Provide guidance to the user on potential data quality issues and missing information
2. Enable users to validate entries and provide comments before submitting
3. Ensures overall quality of submission

Understanding your Health Product Management requirements during Funding Request & Grant-making



HI/Core

During Funding Request (FR), the online HPMT is:

- Required for Grant-ready FR & strongly recommended for Classic FR (Prerequisite: early PR selection)
- Prepared and submitted by PR for each grant

Key steps for PRs:

1. Select 'Yes' to 'HPMT required?' in the Detailed Budget
2. Complete the online HPMT, then paste the budget output into the 'DB – HP' tab of the Detailed Budget

Note: PRs are not allowed to manually input data into the 'DB – HP' nor the 'HP Assumptions' tabs

If PRs are not selected early for the Classic Funding Request:

- Health Product information can be captured in the Detailed Budget

Key steps for PRs:

1. PRs select 'No' to 'HPMT required?' in the Detailed Budget
2. PRs use their estimations to provide lump-sum annual figures in the 'Detailed Budget Non-HP' tab of the Detailed Budget using cost groupings 4 to 7

Note: PRs do not input any data into the 'DB – HP' nor 'HP Assumptions' tabs of the Detailed Budget

Online HPMT required during Grant-making

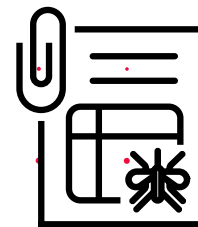
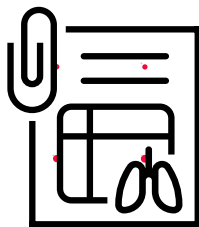
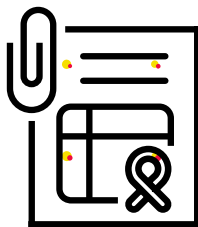
Focused

During Funding Request & Grant-making:

- PRs complete Health Product information in the Detailed Budget – 'HP Assumptions' tab & link the total cost amounts to appear in the 'Detailed Budget Non-HP' tab under the related cost categories 4-7
- Completion of the online HPMT is not required

5

Updates to Programmatic Gap Tables



<https://resources.theglobalfund.org/en/grant-life-cycle/applying-for-funding/funding-request-documents/>

www.endmalaria.org

GC8 Programmatic Gap Tables- Purpose and value

The **Programmatic Gap Tables** serve as a core analytical tool to identify and assess coverage gaps for priority modules and support target setting in grant performance frameworks

They provide a robust evidence base for investment prioritization and help articulate the strategic aims of the Funding Request, by enabling Applicants to:

- Quantify gaps between current coverage, expected coverage during the implementation period of the FR, and national and global targets for priority HIV and TB service coverage indicators
- Use standardized data sources and updated methodologies for gap analysis, aligned with global technical partners' recommendations
- Document key financial (domestic and external resources) and programmatic (epidemiological and system-level) assumptions to estimate:
 - Expected programmatic contributions from different funding sources
 - Progress toward National Strategic Plan service-coverage targets during the Funding Request period

Summary of changes

- ✓ HIV and TB PGTs only
- ✓ For Malaria programmatic gaps the RBM gap analysis tool should be used
 - ✓ New intervention areas included: Surveillance, M&E, and vaccine
- ✓ **Reduced list of priority modules and indicators**
- ✓ Form redesigned with:
 - **Reduced manual data entry**, tailored to Applicant's investment prioritization
 - To provide easy, **user-friendly navigation** experience for Applicants
- ✓ Improved guidance for Applicants to comply with data requirements
- ✓ Enhanced and **automated calculation** of:
 - Gaps to national strategic plan targets and global targets, all included in one section
 - Country covered targets and contributions to these targets by funding sources
- ✓ Clear links and complementarity with PAAR and Funding Landscape Tables in the Funding Request

What has changed

1. Five tabs, three sections, only **Section A** (two tabs) for data entry.

THE GLOBAL FUND Programmatic Gap Tables Date published: 19-Nov-25

Please read the instructions carefully before completing the Programmatic Gap Table.
To complete this cover sheet, select from the drop-down lists for Applicant and Applicant type.

Applicant	Please select
Component	HIV
Applicant type	Please select
English: Choose the language (line B14)	
Language	English



Navigation Tabs:

- CoverSheet_Instructions
- Section_A_HIV_Numerator_Tab_1**
- Section_A_HIV_Denominator_Tab_2
- Section_B_HIV_Gaps
- Section_C_HIV_CountryTargets&Co

Coversheet: Instructions
and color legend

Section A: Data Entry Tab 1
(Numerators)

Section A: Data Entry Tab 2
(Denominators)

Section B: Gaps to Country
and Global targets

Section C: Country targets
and contributions by sources

Automated calculations and analysis

What has changed

2. Includes more comprehensive instructions and guidance for users

THE GLOBAL FUND **Programmatic Gap Tables** Date published: 19-Nov-25

Please read the instructions carefully before completing the Programmatic Gap Table.
To complete this cover sheet, select from the drop-down lists for Applicant and Applicant type.

Applicant	Please select
Component	HIV
Applicant type	Please select
English: Choose the language (line B14)	
Language	English

Instructions to fill the PGT section by section

Section A: HIV Numerator

Section B: HIV Denominator

Section C: HIV Country Targets & Co

CoverSheet_Instructions Section_A_HIV_Numerator_Tab_1 Section_A_HIV_Denominator_Tab_2 Section_B_HIV_Gaps Section_C_HIV_CountryTargets&Co

General instructions to fill the PGT section by section are in the coversheet

Users are strongly advised to read these instructions fully before starting to complete the PGT


What has changed

2. Includes more comprehensive instructions and guidance for users

[illegible]

What has changed

2. Includes more comprehensive instructions and guidance for users

HIV Data Entry Tab 2. Denominators and estimates entry tab.					Additional guidance	
<p>Highlighted Cells to be completed by applicants</p> <p>*Prepopulated from Data Entry tab 1. If the indicator is not selected, data entry is not required.</p>						
Module	Population	Indicator selection*	Indicator code	Need (denominators or estimates)		
						

Guidance supports the effective use of available data on population size estimates and indicator denominators to calculate gaps and coverage targets.

What has changed

4. Tailored data entry requirement based on country-specific module and indicator selection

<

Applicants can select the priority modules according to priority investments in the Funding Request

When a priority module is selected, respective priority indicators will appear automatically, and all required fields will be enabled (yellow) for data entry

Data entry is requested for elementary indicators, avoiding duplicity. In Section A, Tab 1, numerator data is requested for the baseline and targets, and the split by funding sources for the implementation period of the Funding Request.

In Section A, Tab 2, denominator data is requested when relevant to the indicator definition. Other estimates are requested when needed to estimate the gap to Global Targets.

What has changed

4. Tailored data entry requirement based on country-specific module and indicator selection

HIV Data Entry Tab 1. Numerators entry tab.

Highlighted cells to be completed by applicants using country data

* For the selection of the priority modules to complete, please refer to the instructions. Priority modules and/or indicators not selected do not require completion by the Applicant.

Priority module	Module selection*	Requirement	Population	Indicator selection*	Indicator code	Numerators (elementary indicators)
Treatment care and support	Yes	Select the indicators related to interventions included in the funding request	People living with HIV	Yes		
				Yes		
				Yes		
				No		
				No		
				No		

Baseline	Country (National Strategic Plan) targets			Domestic
0	0	0	0	0

Applicants can “de-select” indicators within the selected modules, based on their prioritization of investments and considering provided Guidance or advice from their Country Teams

The fields for data entry will automatically be blocked for data entry if “no” is selected

“De-selected” indicators will be disabled in all subsequent sections

What has changed

5. New functionalities, automated calculations and analysis for a more user-friendly experience and synergies with other Funding Request documents

entry tab.
ed by applicants using country data
ules to complete, please refer to the instructions. Priority modules and/or indicators not selected do not require completion by the Applicant.

(Example of Section A, Tab 1)

Requirement	Population	Indicator selection*	Indicator code	Numerators (elementary indicators)	Share of country targets by sources							Targets not covered by any source		
					External resources				Global Fund allocation					
					2028	2026	2027	2028	2026	2027	2028	2026	2027	2028
					19979.12	3362.95	4156.56	4994.78	23540.65	24939.36	24973.9	0	0	0
					6000	0	0	0	15000	8100	10000	-1500	6300	4000
					3995840	672600	831320	998960	2690400	3325280	3995840	2017000	165640	998960
					52791.03	11972.64	13102.41	15083.15	11972.64	6551.205	7541.575	0	0	0
					10000	2400	2400	2400	2400	3600	4000	1200	3000	3600
					13197756	2993160	3275603	3770788	2993160	1637801	1885394	0	0	0

Errors will be highlighted with **red colored fields** in relevant cells with automated calculations: Section A Tab 1, Section B and C

Red fonts will appear in relevant cells with automated calculations to highlight when gap is present (Section A Tab 1) or **red** and **orange** when gaps are critical (Section B) or country targets are poorly covered (Section C)

Programmatic Gaps
d from Data Entry Tab 1. If the indicator is not selected, data entry is not required.
al targets for HIV are estimated based on 2025 AIDS Targets and Global strategy for corresponding indicators of the priority modules, when applicable. UF https://www.unaids.org/sites/default/files/2025-05/20250328_recommended_2030_HIV_targets_livedocument_en_13_May_2025.pdf

(Example of Section B)

Requirement	Population	Indicator code	Numerators (elementary indicators)	Indicator Selection*	Gap to country target						Gap to global target**					
					Absolute gap			Gap in %			Absolute gap			Gap in %		
					2026	2027	2028	2026	2027	2028	2026	2027	2028	2026	2027	2028
					0	0	0	0.0%	0.0%	0.0%	27,714	21,614	15,127	45.2%	34.2%	23.2%
					-1,500	6,300	4,000	-10.0%	35.0%	20.0%	-1,030	4,233	411	-6.7%	26.6%	2.5%
					2,017,800	1,662,640	998,960	30.0%	20.0%	10.0%	12,106,550	10,668,440	8,847,860	72.0%	61.6%	49.6%
					0	0	0	0.0%	0.0%	0.0%	11,224	7,707	0	15.8%	10.5%	0.0%
					1,200	3,000	3,600	10.0%	16.7%	18.0%	14,997	11,571	10,968	58.1%	43.5%	40.1%
					0	0	0	0.0%	0.0%	0.0%	23,110,300	12,158,488	20,838,563	60.0%	57.5%	52.5%

Blue fonts will appear in relevant cells with automated calculations to highlight when gaps are not critical in Section B (<10%) or country targets are mostly covered in Section C (>90%)

What has changed

5. New functionalities, automated calculations and analysis for a more user-friendly experience and synergies with other Funding Request documents

Programmatic Gaps

from Data Entry Tab 1. If the indicator is not selected, data entry is not required.

Global targets for HIV are estimated based on 2025 AIDS Targets and Global strategy for corresponding indicators of the priority modules, when applicable. URL: https://www.unaids.org/sites/default/files/2025-05/20250328_recommended_2030_HIV_targets_livedocument_en_13_May_2025.pdf

Population	Indicator code	Numerators (elementary indicators)	Indicator Selection	Gap to country target						Gap to global target**					
				Absolute gap			Gap in %			Absolute gap			Gap in %		
				2026	2027	2028	2026	2027	2028	2026	2027	2028	2026	2027	2028
				0	0	0	0.0%	0.0%	0.0%	27,711	21,814	15,127	45.2%		
				-1,500	6,300	4,000	-10.0%	35.0%	20.0%	-1,030	4,233	411	-6.7%		
				2,017,800	1,662,640	998,960	30.0%	20.0%	10.0%	12,106,550	10,668,440	8,847,860	72.0%	61.6%	49.6%
				0	0	0	0.0%	0.0%	0.0%	11,224	7,707	0	15.8%	10.5%	0.0%
				1,200	3,000	3,600	10.0%	16.7%	18.0%	14,997	11,571	10,968	58.1%	43.5%	40.1%
				0	0	0	0.0%	0.0%	0.0%	22,448,700	22,158,488	20,838,563	60.0%	57.5%	52.5%
				10,089	8,313	4,995	30.0%	20.0%	10.0%	37,799	29,927	20,122	61.6%	47.4%	30.9%
				235	282	332	10.0%	10.0%	10.0%	1,417	1,092	747	40.1%	30.1%	20.0%
				0	0	0	0.0%	0.0%	0.0%	11,224	7,707	0	15.8%	10.5%	0.0%
				0	0	0	0.0%	0.0%	0.0%	15,750	9,600	3,250	26.3%	15.8%	5.3%
				0	0	0	0.0%	0.0%	0.0%	500	455	405	42.1%	36.8%	31.6%
				0	0	0	0.0%	0.0%	0.0%	16,250	10,055	3,655	26.6%	16.2%	5.8%

Section B: To define the Prioritized Above Allocation Request applicants are encouraged to prioritize the modules and interventions where there are critical gaps in reaching country targets

Things to remember

- ✓ FLT and PGT complement each other providing the basis for the Funding Request prioritization as together they demonstrate how the Funding Request addresses country's critical gaps
- ✓ Early completion of the Programmatic Gap Tables during Funding Request development is essential
- ✓ The gap analysis for priority indicators in **Section B** should guide completion of the PAAR
- ✓ Targets in the **Performance Framework** should be consistent with the analysis of coverage (by all available funding sources) in the **section C** of the PGT for the same indicators