

HIV PREVENTION & CONTROL

Costed Operational Plan

2018 - 2020



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ACRONYM

AEM	AIDS Epidemic Model
6th AMTP	6th AIDS Medium-Term Plan
ANC	Antenatal care
AO	Administrative order
ART	Anti-retroviral therapy
ARV	Anti-retroviral
BCC	Behavior change communication
BJMP	Bureau of Jail Management and Penology
CBO	Community based organization
CBS	Community-based HIV screening
CSO	Civil society organization
CUP	Condom use program
DOH-RO	Department of Health – Regional Office
DSWD	Department of Social Welfare and Development
EB	Epidemiology Bureau
EPP/Spectrum	Estimation and Projection Package / Spectrum (a projection software developed by Avenir Health used by the UN Joint Programme on AIDS [UNAIDS] and the World Health Organization)
ESU	Epidemiology Surveillance Unit
EQAS	External Quality Assurance Scheme
FSW	Female sex worker
FFSW	Freelance female sex worker
GFATM	Global Fund to Fight AIDS, Tuberculosis & Malaria
HACT	HIV/AIDS Core Team
HARP	HIV/AIDS and ART Registry of the Philippines
HBC	Home -based care
HCT	HIV counseling and testing, see VCT
HCW	Health care worker
HIV	Human Immunodeficiency Virus
HIV IMPAC	Inventory and Mapping of at-risk Populations, Areas & Current Response
HRT	Hormone replacement therapy
HSA	Health Sector Agenda
HSP	Health Sector Plan for HIV and STI
HTS	HIV testing services
IEC	Information, education, and communication
IHBSS	Integrated HIV Behavioral and Serologic Surveillance
MCH	Maternal and child health

M & E	Monitoring and Evaluation
MSM	Male who have sex with male
NASA	National AIDS Spending Assessment
OI	Opportunistic infection
OHAT	Outpatient HIV AIDS Treatment Package of PhilHealth
PE	Peer educator
PhilHealth	Philippine Health Insurance Corporation
PLHIV	People living with HIV
PMTCT	Prevention of mother to child transmission
PNAC	Philippine National AIDS Council
PEP	Post exposure prophylaxis
PreP	Pre-exposure prophylaxis
PSM	Procurement and Supply Management
PWID	People who inject drugs
RESU	Regional Epidemiology and Surveillance Unit
RFSW	Registered female sex workers
RH	Reproductive health
SOP	Standard operating procedure
STI	Sexually transmitted Infection
SW	Sex worker
TB	Tuberculosis
TCS	Treatment, care, and support
TGW	Transgender women
VCT	Voluntary counseling and testing

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EXECUTIVE SUMMARY

The Health Sector Plan (HSP) HIV Prevention and Control Operational Plan 2018 - 2020 is a product of a series of consultations and participatory processes involving HIV program managers, representatives of the key populations (KP) communities, support civil society organizations (CSO), and the HIV Technical Working Group (TWG). These stakeholders are working from the national, regional, and local levels. The guidance of the National AIDS, STI Prevention and Control Program (NASPCP) and the Epidemiology Bureau (EB) was pivotal in crafting a realistic three-year HIV operational plan.

This new plan is bolder and innovative as it aims to respond to the changing face of the HIV epidemic in the Philippines by broadening the options for key populations (KP). An intensified age- and gender-responsive HIV prevention program will be guided by the distinct differences of the key populations. Planned initiatives include activities to address human rights-related barriers to HIV prevention, diagnosis, and treatment. In particular, the program will implement guidelines on provision of HIV services for young KP as well as new initiatives for people who inject drugs (PWID).

Among others, the HIV program will:

- Use existing and emerging technologies for HIV prevention, such as pre-exposure prophylaxis (PrEP)
- Fast track and increase coverage for HIV diagnosis and treatment through the rollout of community-based HIV screening (CBS) and rapid HIV diagnostic algorithm (rHIVda); routine HIV-provider initiated counseling and treatment (PICT) and treatment among new enrollees in closed settings, ante-natal clinics, and in rehabilitation centers; and community-based treatment for PWID
- Implement Hepatitis C screening and treatment for HIV-positive PWID
- Employ service delivery networks (SDN) within and across sectors (e.g., prevention, diagnosis to treatment, health to social welfare, local government unit [LGU] to LGU, economic to health, and legal support)
- Enhance and expand the roles of peer educators who will become community health outreach workers (CHOW)
- Implement the test and treat all policy and link people living with HIV (PLHIV) to treatment, care, and support.

The plan sustains and improves:

- Condom and lubricant distribution in strategic access points for KPs
- Provision of enhanced minimum package of services to KPs
- Sundown clinics for males having sex with males (MSM) and transgender women (TGW)
- Prevention of mother to child transmission (PMTCT) programs
- Expansion of post exposure prophylaxis(PEP) coverage
- Treatment hubs and satellite clinics
- Hepa B screening among MSM, TGW, and PWID
- HIV-TB collaboration

- Procurement and Supply Management (PSM)
- Effective coordination of functions at national and local levels for better programmatic planning, budgeting, implementation, and monitoring and evaluation.

The three-year plan will have a total cost of PhP **PhP15,879,255,871.39**.

PROCESS IN DEVELOPING THE OPERATIONAL PLAN

The development of the Operational Plan (OpPlan) was extensively guided by desk reviews of pertinent documents and consultations with key stakeholders.

Desk review

The review of pertinent documents ensured that recommendations are incorporated in the OpPlan and that it is aligned with the 6th AIDS Medium Term Plan (6th AMTP) and Philippine Health Agenda 2016-2022 - All for Health Towards Health for All.

Review of the Philippine Health Sector Plan for HIV and STI 2015-2020 and its Operational Plan 2015-2017

The details of the results of the review of the Health Sector Plan 2015 to 2020 can be found in a twin document “Review of the Philippine Health Sector Plan for HIV and STI 2015 to 2020 and its Operational Plan 2015 to 2017”. The review identified the following key barriers to achieving the health sector targets:

- Conflicting and non-responsive policy environment
 - Conflicting laws challenged the implementation of the operations research on needles and syringe program for PWIDs in Cebu City. In a Senate hearing, legislators ordered implementers to stop the program.
 - Owing to the intensified campaign against drug use, it has become even more difficult for PWID to access HIV services.
- The MSM and TG Plan 2012-2016, which was developed by the KPs themselves, was not fully implemented.
- Low investment for prevention efforts
 - Although the DOH is committed to fund the cost of treatment, care, and support, local funding is still low.
 - Many of the high burden sites depend highly on external funding support.
 - Investment for prevention is still not established within other government agencies.
- Unclear implementation strategy
 - The lack of guidelines and operating procedures for the regional and local implementation of the HSP posed a great challenge for local key players.
 - Existing guidelines are not communicated well to regional implementers, resulting in varying interpretation

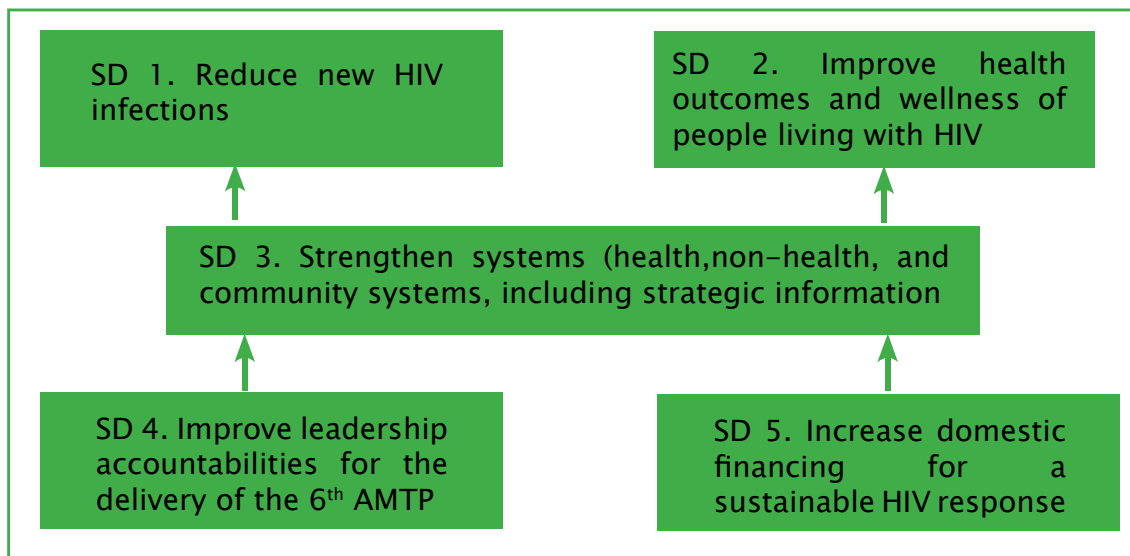
Based on the review, the following recommendations were made:

- Policy environment
 - Strategies on addressing issues on PWID amidst the intensified policy on drug use need to be revisited.
 - Ensure that the MSM and TG Plan is implemented. The MSM and TG communities have reaffirmed the plan as still relevant in responding to the changing epidemic.
 - The Philippine National AIDS Council should continue to support, develop detailed operational plans, and monitor the implementation of the 6th AMTP.
- Funding
 - Increase the engagement of CBO and NGO not just in program implementation, but in planning and budgeting as well.
 - Continuous advocacy must be done to engage LGU. It is also imperative to strengthen the local AIDS council (LAC) to ensure sustainability.
- Implementation
 - There should be improved coordination between stakeholders from the national, regional, and local levels. Local stakeholders must be encouraged to encourage local stakeholders to join in the planning and budgeting process.
 - Plans must have clear descriptions of the functions and roles of each stakeholders.
 - The Services Delivery Network (SDN) must be strengthened.
 - Clearer guidelines must be issued to support the smooth and streamlined implementation of activities and delivery of HIV prevention, diagnosis, and treatment services.

6th AMTP

The document serves as the blue print for the country's HIV response. The OpPlan is aligned with the 6th AMTP's strategic directions 1 (reduce new HIV infections), 2 (Improve health outcomes and wellness of PLHIV), and 3 (strengthen systems).

Figure 1: 6th AMTP Strategic Directions



Philippine Health Agenda 2016-2022

This HIV Operational Plan is anchored as well on the three guarantees stated in the Philippine Health Agenda 2016-2022 - All for Health Towards Health for All:

- All life stages and triple burden of disease services for both the well and the sick
- Functional SDN of health facilities
- Financial freedom when accessing service through universal health insurance

The three guarantees are envisioned to be fulfilled by applying the ACHIEVE¹ strategy .

Figure 2: Logic Model for the Health Sector Plan for HIV

Logic Model for the Health Sector Plan for HIV							
Vision	Zero new infections, Zero discrimination, Zero AIDS-related death						
Impact	Reduced new HIV infections		Improved health outcomes and well-ness of PLHIV			Strengthened systems & strategic information	
Outcome	Prompt service utilization	Affordable HIV services	Adequate and capable human resources	Accessible integrated patient-centered HIV services	Available quality HIV products and services	Evidence-based program management	Multi-sectoral implementation of regional and local HIV operational plans
Strategy	<ol style="list-style-type: none"> 1. Activate HIV patient support groups and communities to access quality HIV services 2. Collaborate with other government agencies and partners to reduce out of pocket expenses of HIV patients and expand social protection measures 3. Harmonize national, regional, local and CSO efforts to mobilize adequate and capable human resources for the reduction of new HIV infections 4. Innovate HIV surveillance, research and data generation for decision-making 5. Enforce HIV care and prevention standards and use of quality HIV products and services 6. Value clients and patients through provision of integrated human rights and patient-centered services 7. Engage regional and local government units to implement HIV operational plans through multi-sectoral collaboration 						

²ACHIEVE: Activate, Collaborate, Harmonize, Innovate, Enforce, Value, and Engage.

Workshops and consultations

The workshops and consultations elicited recommendations from the participants on how to make the OpPlan more responsive to the changing epidemic. The AIDS Epidemic Model (AEM) Costing workshop was a vital step in setting the most realistic target and budget of the three-year HIV operational plan.

The table below summarizes the workshops and consultations with key stakeholders (KP, TWG, program implementers):

Date and Venue	Workshop Title
Jan. 17-19, 2017; H2O Hotel	HSP Review
Jan. 20-21, 2017 ; H2O Hotel	HSP Review Consultants Meeting
Jan. 23-24, 2017; Ciudad Christia	GFATM Tri-disease Country Dialogue
Jan. 25-26, 2017; H2O Hotel	HIV Technical Working Group
Jan. 27, 2017; H2O Hotel	HSP Review Consultants Meeting
Jan. 31 - Feb. 4, 2017; Secdea Resort	AIDS Epidemic Model: Costing Workshop
Feb. 9-10, 2017; Estancia Resort	Review of the 1st draft of the HSP Operational Plan 2018 - 2020; Human Rights Consultation with Key Populations
Feb.15, 2017; Grand Opera Hotel	Review of the HSP Operational Plan 2018 - 2020 by the HIV Technical Working Group; Review of the Contents of the GF Funding Request
Feb. 17, 2017; Astoria Plaza	Human Rights Consultation with Key Populations
Feb. 21, 2017; Linden Suites	TWG meeting on HSP targets
Feb. 23, 2017; Linden Suites	Key Population (KP) Consultation with Transgender People to Strengthen the Human Rights Component of the Philippines HIV Health Sector Plan (HSP).

THE HIV PREVENTION AND CONTROL OPERATIONAL PLAN 2018– 2020

Assumptions and risks

The success of accomplishing all the activities in this plan within the three-year period hinges on the following:

- Policies, guidance documents and procedural guidelines on various prevention and treatment activities are developed, approved in 2017, and applied henceforth. These policies and guidance documents are:
 - Guidance on proxy consent for testing and treatment of minors
 - Policy on CBS
 - Policy on rHIVda
 - Expanded guidelines on PEP to cover rape survivors, CBS motivators, and other potential exposures
 - Guidelines on PrEP
 - Updated PMTCT guidelines
 - Guidelines on community case management
 - Test and treat all policy
 - Guidelines for community-based treatment for PWID
 - National Treatment Guidelines for Hepatitis C
- Funding from government and external donors are secured
- Health systems at various levels of implementation are functional

A major risk in the achievement of this plan is the political commitment of local chief executives of the target cities and municipalities to support the HIV prevention initiatives such as screening and testing of minors and condom/lubricant distribution.

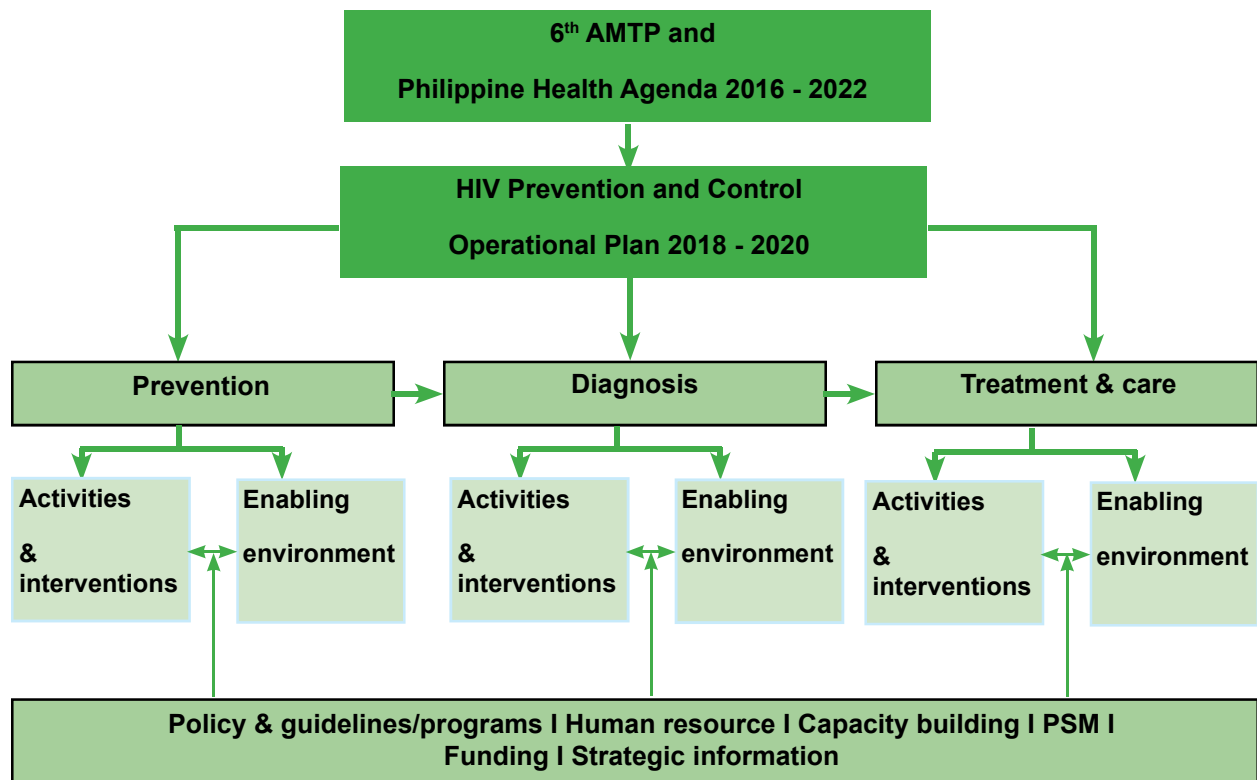
Objectives

By the end of 2020, strategies, activities, and systems under this operational plan will

1. Reduce new infections among key populations
2. Improve health outcomes and wellness of people living with HIV and AIDS
3. Strengthen systems for health to ensure that objectives 1 and 2 will be achieved

Conceptual framework

Figure 3: Conceptual Framework of the HIV Prevention and Control Operational Plan 2018 - 2020



Targeted key populations²

The plan will focus its prevention, diagnosis, and treatment program to the following:

KP	Estimated population
MSM (15 -17 years old; 18 and above)	531,500 or 2.2% of males aged 15 - 49 ³
TGW (15 -17 years old; 18 and above)	122,000
PWID (15 17 years old; 18 and above)	10,000 to 21,700 aged 15 - 49
Female Sex Workers (FSW), (15 -17 years old; 18 and above - freelance or street-based - registered	66,100 aged 15 -49
Pregnant women living with HIV and their babies	

Programmatic targets

	2017	2018	2019	2020
Reach⁴	80%	80%	85%	90%
Test⁵	60%	70%	80%	90%
Treat⁶	90%	90%	90%	90%

Activities reflected in the plan are geared towards achieving these targets for the three-year period.

Geographic coverage (see annex 1)

Based on the evidence provided by the 2015 Integrated HIV Behavioral and Serologic Surveillance (IHBS), HIV/AIDS & ART Registry of the Philippines (HARP), this operational plan will cover:

- Cities and municipalities classified under Category A Plus
This includes 82 highly urbanized cities, IHBS sites with HIV Prevalence, cities and first class municipalities with more than 50 HIV cases; 17 cities and municipality in the National Capital Region (NCR), and the whole Cebu Province.
- Cities and municipalities classified under Category B
This includes 67 cities and municipalities with 10 to 49 HIV cases.
- Cities and municipalities classified under Category C
This includes 106 cities and municipalities with less than 10 HIV cases.

² National estimate of key populations is from the 2015 Size Estimation of Key Affected Populations in the Philippines

³ This figure includes estimate of transgender women at 23% of the MSM estimate.

⁴ Reach is defined as client is provided with HIV information, condoms/lubes

⁵ Test is defined as client went through community-based screening and is tested at the facility; tested at the facility

⁶ Treat is defined as client is linked to care (baseline laboratories are performed and client is enrolled in ART)

Detailed strategic actions or activities

HSP Plan Objective 1. Prevent new HIV infections among KP, including young KP

The actions outlined here are focused in expanding and scaling up prevention coverage and in rolling out new screening and testing strategies to cover more KPs and reduce the turn-around time for the release of confirmatory results.

Prevention for Key Population: Males having sex with male (MSM)
Intervention: Age Group 15 - 17
<ul style="list-style-type: none">• Provide a complete package of age-appropriate and gender sensitive HIV prevention: Information, condoms and lubricants, voluntary testing, and post exposure prophylaxis to all who need (i.e, in cases of rape, accidental needle prick injury)• Promotion of HIV services through appropriate channels such as mass media, social media or events.• Use existing and emerging technologies for HIV prevention (PrEP, rHIVda)
Intervention: Age Group 18 above
<ul style="list-style-type: none">• Provide complete package of HIV prevention: Information, condoms and lubricants, voluntary testing, and post exposure prophylaxis to all who need (i.e, in cases of rape, accidental needle prick injury)• Promotion of HIV services through appropriate channels such as mass media, social media or events• Use existing and emerging technologies for HIV prevention (i.e, PrEP,• Fast track HIV diagnosis and treatment - community-based HIV screening, rHIVda)
Policy guidelines and structural intervention needed:
<ul style="list-style-type: none">• Develop a seamless evidence-based, age-appropriate, comprehensive, and life-skill approach to HIV education curriculum for children and youth• Integrate HIV in sexuality and reproductive health services and vice versa.• Develop guidance on access of minors to information and prevention commodities• Provide access to information, testing and other services through proxy consent to young key affected populations• Develop a comprehensive condom(eg: age-specific size of condoms) and water-based lubricants plan to ensure procurement and distribution of the said commodities in various strategic access points• Establish sundown clinics in all burden areas• Expand the implementation of CBS• Sensitize health care providers on sexual orientation, gender identity and expression (SOGIE), child's rights HIV issues• Update workplace HIV policy of the Department of Labor and Employment

Prevention for Key Population: Transgender women

Intervention: Age Group 15 - 17

- Provide complete package of age-appropriate and gender sensitive HIV prevention: Information, condoms and lubricants, voluntary testing, information on hormone replacement therapy (HRT) and risks of needle sharing (for those who inject hormonal replacement), post exposure prophylaxis to all who need (i.e, in cases of rape, accidental needle prick injury), and referral to endocrinologist if needed
- Promotion of HIV services through appropriate channels such as mass media, social media or events
- Use existing and emerging technologies for HIV prevention (i.e, Community-based HIV screening, PrEP, rHIVda)

Intervention: Age Group 18 above

- Provide complete package of HIV prevention: Information, condoms and lubricants, voluntary testing, and post exposure prophylaxis to all who need (i.e, in cases of rape, accidental needle prick injury)
- Promotion of HIV services through appropriate channels such as mass media, social media or events
- Use existing and emerging technologies for HIV prevention (i.e, PrEP,
- Fast track HIV diagnosis and treatment - community-based HIV screening, rHIVda)

Policy guidelines and structural intervention needed:

- Develop a seamless evidence-based, age-appropriate, comprehensive, and life-skill approach to HIV education curriculum for children and youth
- Integrate HIV in sexuality and reproductive health services and vice versa
- Develop an evidence-based comprehensive package for transgender women with intensified information and services campaign on HIV prevention, sexual, and mental health
- Develop guidance on access of minors to information and prevention commodities
- Provide access to information, testing and other services through proxy consent to young key affected populations
- Develop a comprehensive condom (e.g: age-specific size of condoms) and water-based lubricants plan to ensure procurement and distribution of the said commodities in various strategic access points
- Expand the implementation of CBS
- Establish sundown clinics in all burden areas
- Sensitize health care providers and endocrinologists on SOGIE, child's rights HIV issues
- Update workplace HIV policy of the Department of Labor and Employment

Prevention for Key Population: People who inject drugs and their partners

Intervention: Age Group 15 - 17

- Provide complete package of age-appropriate and gender sensitive HIV prevention: Information, condoms and lubricants, voluntary testing, and post exposure prophylaxis to all who need (i.e, in cases of rape,)
- Promotion of HIV services through appropriate channels such as mass media, social media or events
- Use existing and emerging technologies for HIV prevention (i.e, PrEP,
- Fast track HIV diagnosis and treatment - Community-based HIV screening, rHIVda)
- Pre-exposure prophylaxis (PrEP) for non-positive partners of PWID
- Screening and treatment of Hepatitis B and C
- Prevention of mother to child transmission of HIV for female partners of PWID

Intervention: Age Group 18 above

- Provide complete package of HIV prevention: Information, condoms and lubricants, voluntary testing, and Post exposure prophylaxis if needed (i.e, in cases of rape, accidental needle prick injury)
- Promotion of HIV services through appropriate channels such as mass media, social media or events
- Use existing and emerging technologies for HIV prevention (i.e, Community-based HIV screening, PrEP, rHIVda)
- Pre Exposure Prophylaxis (PrEP)
- Prevention of mother to child transmission of HIV for female partners of PWID
- Pre-exposure prophylaxis (PrEP) for partners of PWID
- Screening and treatment of Hepatitis B and C (hepatitis C treatment for HIV-positive PWID)

Policy guidelines and structural intervention needed:

- Develop policy for community-based treatment/rehabilitation for PWID including support for PWID groups
- Develop a seamless evidence-based, age-appropriate, comprehensive, and life-skill approach to HIV education curriculum for children and youth
- Provide access to information, testing and other services through proxy consent to young key affected populations
- Expand the implementation of CBS
- Integrate HIV education and voluntary counseling testing in closed settings
- Develop guidelines on community-based treatment for PWID
- Develop evidence-based policy on pre-exposure prophylaxis (PrEP), based on wide and meaningful consultation with different stakeholders including key populations
- Develop National Guidelines on Hepatitis C treatment
- Support Senate Bill 1313 of Sen Risa Hontiveros (Barangay Health and Rehabilitation Strategy)

Prevention for Key Population: Female sex worker (Freelance FSW or street-based and FSW in registered entertainment establishments)

Intervention: Age Group 15 - 17

- Provide complete package of age-appropriate and gender sensitive HIV prevention: Information, condoms, voluntary testing, and post exposure prophylaxis if needed (i.e, in cases of rape, accidental needle prick injury)
- Promotion of HIV services through appropriate channels such as mass media, social media or events
- Use existing and emerging technologies for HIV prevention (i.e, PrEP,
- Fast track HIV diagnosis and treatment - Community-based HIV screening, rHIVda)

Intervention: Age Group 18 above

- Provide complete package of HIV prevention: Information, condoms, voluntary testing, and post exposure prophylaxis if needed (i.e, in cases of rape, accidental needle prick injury)
- Promotion of HIV services through appropriate channels such as mass media, social media or events
- Use existing and emerging technologies for HIV prevention (i.e, PrEP)
- Fast track HIV diagnosis and treatment - Community-based HIV screening, rHIVda)
- Sensitize health care providers on SOGIE, child's rights HIV issues

Policy guidelines and structural intervention needed:

- Develop a seamless evidence-based, age-appropriate, comprehensive, and life-skill approach to HIV education curriculum for children and youth
- Integrate HIV in sexuality and reproductive health and vice versa.
- Provide access to information, testing and other services through proxy consent to young key affected populations
- Develop a comprehensive condoms and water-based lubricants policy to ensure procurement and distribution of the said commodities in various strategic access points
- Expand the implementation of CBS
- Amend PEP guidelines to include rape victims as recipient of PEP
- Develop PrEP policy and guidelines
- Prevention of mother to child transmission of HIV
- Assess peer education implementation and develop an evidence-based peer education policy and program defining scope, capacity needs, roles, and responsibilities and taking into consideration the evolving roles of KPs as counselors, advocates, and treatment buddies.

Prevention for Key Population: Pregnant women living with HIV and their babies

Intervention

- Prevent maternal to child transmission of HIV (PMTCT)
 - For pregnant partners of KP or PLHIV who wants to get pregnant
 - Referral to ANC with PMTCT guidelines
- For newborns:
 - Polymer chain reaction (PCR) test and other needs based on PMTCT guidelines

Policy guidelines and structural intervention needed:

- Cascade updated PMTCT Guidelines to all ante natal clinics, birthing centers, and post natal clinics
- Resolve access issues to PMTCT
- Resolve issue on requirement for cesarian section for pregnant positive women by the Philippine Obstetrics and Gynecological Society (POGS)
- Establish and/or strengthen Referral/SDN
- Sensitize health care providers on SOGIE, child's rights HIV issues

DIAGNOSIS: Improve testing strategies

Intervention

- Provide access to screening and testing and other services among young key populations
 - Establish sundown clinics for MSM and TGW in HIV burden areas
 - Community-based screening⁷
 - Roll out rHIVda
 - Routine opt-out HIV testing and treatment in ante-natal clinic, birthing centers, and post-natal clinics.
 - Implement and expand routine opt-out HIV testing and treatment among new enrollees in rehabilitation centers and closed settings,
 - Increase HIV screening and testing by Integrating with TB program and Ante natal care (ANC), birthing centers, and post-natal clinics.
 - Hepatitis C screening for PWID
 - Community case management from diagnosis to link to care
 - Train CBS motivators and SHC staff
- **Policy guidelines and structural intervention needed:**
- Ensure non-mandatory and non-pre-requisite nature of HIV testing in relation to work/employment application
 - Guideline on proxy consent for children and minors
 - Training of health service providers
 - LGU buy-in in the establishment of sundown clinics
 - Finalize/approve policy and operating guidelines on Community-based screening
 - Train CBS motivators and SHC staff
 - Finalize/approve policy and operating guidelines
 - Equip social hygiene clinics with appropriate Infrastructure (refurbishment and upgrading of facilities, equipment, reagents, and supplies)
 - Buy-in of local chief executives and owners of private ante-natal, birthing centers and post-natal clinics
 - Buy-in of intervention by officials administering closed settings, public and private ante-natal clinics
 - Issue HIV-TB and HIV-PMTCT integration guideline
 - Training of TB and ANC health service providers on HIV in preparation for task shifting of personnel
 - National guidelines for Hepatitis C screening and treatment
 - National Guideline for Community Case Management
 - Capacity building of CBOs and their members in community case management

⁷The draft enabling policy and operating guidelines and other support documents were completed in October 2015 with support from UNAIDS. It was demonstrated by the HIV and AIDS Support House in the National Capital Region (NCR), Cebu, and Davao from June 15 to December 15 in 2016. The results of the CBS demonstration will inform the roll out of the program in Global Fund-supported areas 2017.

HSP Plan Objective 2: Improve health outcomes and wellness of people living with HIV and AIDS

This will ensure that PLHIVs receive the medical and social support they need to live their lives to the fullest. The provision of support extends to their affected families and significant others as well.

Treatment, Care, and Support
Intervention
<ul style="list-style-type: none">• Access to treatment of minor PLHIV• Scale-up quality treatment services for PLHIV, including other medical needs of ageing PLHIV on ART• Scale up ART enrollment through the implementation of the test and treat all policy• Development of a psychosocial support program to include mental health program including spiritual, nutritional, medical, home, facility, and alternative-based care interventions, and economic interventions for PLHIVs• Legal support for PLHIV and/or families who experience HIV-related discrimination• Treatment of opportunistic infections (OI)• Treatment of Hepatitis C for PWIDs• Community-case management• Strengthen home-based care
Policy guidelines and structural intervention needed:
<ul style="list-style-type: none">• Guidance on proxy consent and treatment of minor PLHIV• Policy on treat all• Standardize baseline tests guidelines• Expansion of PhilHealth coverage• Improve procurement and supply management of OI drugs• National Hepatitis C Treatment Guideline• Guidelines on Community Case Management• Develop Community-based treatment guidelines• Capacity building of CBOs and their members in community case management• Guideline on Home-based care• Financial assistance for transportation and other incidentals• Research agenda:<ul style="list-style-type: none">▪ Mental Health Program for PLHIVs and Carers▪ Types of Psychosocial support for PLHIVs

HSP Objective 3: Strengthen systems for health to support objectives 1 and 2

The 6th AMTP recommended cross-cutting activities to enhance the enabling environment for a more effective and efficient HIV program such as:

- Conduct an exhaustive review of existing AIDS and related policies, issuances, guidelines, and other documents to identify policy gaps and synergies
- Increase the proportion of human resources and enhance their skills
- Increase and improve infrastructures
- Enhance knowledge and information management
- Review the functional service delivery network to optimize the synergies of implementers, both public, private and civil society.
- Develop a HIV research agenda in collaboration with research institutions, universities, and colleges and ensure the participatory approach to research
- Ensure timely release and utilization of data
- Develop behavior change communications (BCC) program

The table below lists the needed systems strengthening for Objectives 1 and 2:

Objective 1. Prevent new HIV infections among key populations - Male having sex with male (MSM), Transgender women (TGW), and People who inject drugs (PWID) and prevent mother to child transmission of HIV				
Needed Systems for Health	Year 2018 -2020			Lead or Collaborating Partner Agency/office
	2018	2019	2020	
Policy & Guidelines				
Update PMTCT guideline				
Develop Guidelines on Community Case Management				
Implement the test and treat all policy				
Establish/enforce standards for HIV testing, including but not limited to test kits, procedures, release of test results, testing modalities, and timely provision of needed HIV treatment and care.				
Develop Guidelines for HIV services in closed settings				
Support amendments to RA 9165 to make needle-syringe program an exception to Sec.10, 12, and other related provisions				PNAC CSO
Develop standards for peer education, peer counseling, and other community-led support services				
Develop guidelines on the integration of HIV with existing adolescent sexual and reproductive health programs and of ASRH in HIV				

Needed Systems for Health	Year 2018 -2020			Lead or Collaborating Partner Agency/office
	2018	2019	2020	
Policy & Guidelines				
Establish national guidelines on developing service delivery network (SDN) at various levels of HIV program implementation				
Develop Guidelines on minimum package of services (in low burden areas)				
Support Senate Bill 1313 of Sen Risa Hontiveros (Barangay Health and Rehabilitation Strategy)				PNAC
Advocacy to ensure a functional service delivery network (SDN) at various levels of HIV program implementation				
Assess and develop comprehensive package of interventions for KP, including children and youth				NYC CWC Unicef
Initiate high level advocacy with drugs stakeholders (Dangerous Drugs Board, law enforcement bodies, legislative and judiciary) for HIV prevention among PWID				PNAC CSO
Service delivery				
Develop an evidence-based comprehensive package for transgender women with intensified information and services campaign on HIV prevention, sexual, and mental health				TGW
Implement Communication Plan and include: <ul style="list-style-type: none"> • Condom and Lubes Strategy • Strategic communication Plan for specific Key Population 				
Explore self-HIV testing				
Explore Opioid Substitution Therapy (OST) for PWID				WHO
Integrate PMTCT in the HIV service points (hubs, SHC, HIV testing facilities, NGO/ CBO led services)				
Expand post exposure prophylaxis (PEP) coverage				

Needed Systems for Health	Year 2018 -2020			Lead or Collaborating Partner Agency/office
	2018	2019	2020	
Health service providers				
Augment personnel in facilities catering to HIV and STI services (Physician, Medical technologist, and nurses, PSM staff/s, project aides) and DOH-NASPCP				
Increase capacity of health service providers at the national, subnational, and local levels and employ competency-based approach with age and gender sensitivity and responsiveness as an overarching feature.				
Training of Community Health Outreach Workers (CHOWs) CBS protocol, pricking and reading of results				CBOs
PICT training in TB-DOTS and PMDT facilities in Category A and B priority sites				
Training of all ANC on PICT and PMTCT of HIV				
HIV proficiency training for medical technologist				SACCL LGU
Capacity building of psychologists/psychiatrists on HIV for counseling that is not HIV testing-related.				Psychiatrists Association of the Philippines
Advocacy and orientation of Bureau of Jail Management and Penology (BJMP) on HIV and drug-related detention centers and rehabilitation facilities				BJMP
Standardize modules on HIV Counseling and Testing and train new HCT trainers				
Improve effectiveness of the coordination function at national and local levels for better programmatic planning, budgeting, implementation and M&E (National and regional program implementation review)				LGU CSO
Engage NGOs and CBOs in HIV prevention, care and treatment Involve and retain				
Procurement and Supply Management (PSM)				
Procure preventive commodities (condoms and lubes, PEP and PrEP) based on the commodity procurement plan				
Drugs for syphilis and other STIs				
HIV test kits for HIV testing				
CBS test kits				
Laboratory reagents, supplies, and equipment for syphilis and other STIs				

Needed Systems for Health	Year 2018 -2020			Lead or Collaborating Partner Agency/office
	2018	2019	2020	
Funding				
Conduct planning and budgeting workshops to localize the HSP OpPlan				LGU CBO
Advocate for LGUs to finance their HIV prevention interventions				PNAC
Strategic information				
Sustain current CBS information system developed by the CBS demonstration project.				CBO LGU-SHC Testing facilities
Assessment of HIV prevention, treatment, and care situation among PWID				EB
Regular mapping of locations, events or social media platforms where they can be found				RESU CBO LGU
IHBSS, HARP				
Ensure timely release and utilization of data				NASPCP LGU

Objective 2. Improve health outcomes and wellness of people living with HIV and AIDS

Needed Systems for Health	Year 2018 -2020			Lead or Collaborating Partner Agency/office
	2018	2019	2020	
Policy & Guidelines				
Update guidelines that are relevant to treatment and care of PLHIVs such as but not limited to: <ul style="list-style-type: none"> • ART guidelines based on WHO’s recommendations and considering MDR PLHIV • Inclusion of ARV in the National Drug Formulary • Guidelines for the management of opportunistic infections • Nutritional guidelines for PLHIVs on ART • Guidelines on ART among TGW who are on HRT • Psychosocial 				Treatment hubs SHC CBO
Review and amend conflicting policies within DOH (ie. DOH AO 2010-0033 - Immediate burial of deceased PLHIV and DOH AO 2003-001 - mandatory HIV test for pre-employment abroad.)				
Programmatic Initiative for treatment and care				
Scale-up quality treatment services for PLHIV				Treatment hubs SHC
Scale-up mental health, spiritual, nutritional, medical, home-, facility-, and alternative-based care interventions to PLHIVs				CBO FBO
Expand satellite treatment hubs and treatment hubs in Categories A & B				LGU
PMTCT of HIV including provision of RH services in all HIV treatment centers/ hubs				
Develop package of psychosocial support				CBO
Human resource				
Augment personnel in facilities catering to HIV and STI services (Physician, Medical technologist, and nurses, PSM staff/s, project aides) and DOH-NASPCP				LGU
Augment HIV human resource with close partnership with civil society (NGOs and CBOs)				

Needed Systems for Health	Year 2018 -2020			Lead Bureau	DOH	Lead or Collaborating Partner Agency/ office
	2018	2019	2020			
Capacity Building- Review capacity of service providers at the national and subnational and local levels and employ competency-based approach with age and gender sensitivity and responsiveness as an overarching feature.						
Orient Regional Centers for Health Development on comprehensive HIV program management				NASPCP		
Require all social hygiene clinics to be licensed to operate				NASPCP		SACCL LGU
Training on OI management including OI screening in all HIV treatment centers/ hub				NASPCP		Treatment hubs SHC
Strengthen linkage between treatment centers and social services for psychosocial support of HIV infected and affected children				NASPCP		
Capacity building of CBOs and their members in community case management						
Technical assistance to LGUs in terms of strategic, operational, gender/age-sensitive, and budget planning				Regional offices		
Procurement and Supply Management (PSM)						
Procurement of affordable drugs, reagents, and supplies <ul style="list-style-type: none"> • Anti-retroviral drugs • OI drugs other than for TB • INH for IPT (c/o TB program) • Supplies and reagents for virological test on HIV for infants 						
Procurement of CD4 and viral load machines and reagents						
Equipment to pulverize ARV for pediatric use						
Reagents for drug resistance (ARV) study						
Funding						
Conduct planning and budgeting workshops to localize the HSP OpPlan						
Strategic information						
Strengthen records management of treatment hubs and other facilities, i.e., automation, use of UIC,						
Monitor drug adherence and drug resistance						

Requisite enabling environment for prevention of HIV among key populations

Socio-cultural mores and practices are major obstacles to implementing sexual health and rights education and services. The Philippine/AIDS Program Transition from Donor Support - Transition Preparedness Assessment thus recommends the creation of an enabling legal environment to enhance anti-discrimination protection to promote the human rights of KPs, people living with HIV (PLHIV), vulnerable communities, and providers of HIV services.

Young sub-populations are hindered from accessing services and commodities such as condom. A special concern is the need for parental consent before minors can be tested for HIV. The Implementing Rules and Regulations of R.A. 8504 states in Rule 4, Section 26, that a “written informed consent shall be obtained before HIV testing... by the parent of a minor”. Section 43 states that HIV test result “shall be released only to... parent of a minor who was tested.” In addition, minors who need to start ART should be accompanied by parents to ensure adherence to treatment, monitoring, and management of side effects. If young KP are not reached and/or tested, they will continue to have unprotected high-risk behaviors that will lead to transmission of new HIV infections, unnecessary deaths due to late diagnosis, and burden in health care.

Conflicting provisions in R.A. 8504 (AIDS Law) and R.A. 9196 or the Comprehensive Dangerous Drugs Act of 2002 restrict the delivery of HIV interventions and pose dangers even to peer educators and health workers who risk being apprehended in providing HIV services. The intensified campaign against drug use makes it even more difficult to provide PWIDs with HIV services.

The Department of Health should lead a high level advocacy to revise regulations hindering KP’s access to HIV preventive, treatment, and care services.

Implementation arrangement: key implementers and partners and their role

The prevention of HIV and AIDS is a multi-sectoral and multi-agency undertaking. The involvement of KP and civil society- especially the community based organizations - are essential in achieving the objectives of this operational plan. The organizations and/or offices which will be involved are:

- Department of Health (National and Regional Offices)
 - National AIDS Prevention and Control Program (NASPCP)
 - Epidemiology Bureau - National HIV & STI Surveillance Strategic Information Unit
 - AIDS Program (Regional)
 - Regional Epidemiology Surveillance Unit (RESU)
- Philippine National AIDS Council
- Local Government Units - City Health Offices
- Civil Society Organizations
 - Community-Based Organizations
- For GF-supported sites:
 - Save the Children - Principal Recipient of the Global Fund AIDS Funding Request Project
 - Sub-recipients of the Global Fund AIDS Funding Request Project in nine (9) regions in the Philippines

Fig. 4. Implementation arrangement

Cost of the HIV Prevention and Control Operational Plan 2018 -2020

	2018	2019	2020
Prevention	326,325,313.03	261,064,298.99	244,317,393.92
Testing	973,048,647.95	409,711,618.76	490,679,875.88
Treatment	3,073,069,482.20	4,284,924,669.57	5,823,134,775.70
TOTAL	4,372,463,443.18	4,955,700,587.31	6,558,132,045.49

The total cost of the program for three years amounts to **PhP15,879,255,871.39**.

See the accompanying HIV Prevention and Control Operational Plan 2018-2020 Indicative Cost for the full costing details.

Funding gap

The country has committed to allocate PHP1 billion for HIV programs for 2017. Annual increment to such budget is seen for the succeeding years in anticipation of the increase of people who will be needing treatment. The table below illustrates the items that the government is able to spend for and initiatives that need funding support from external sources.

Program	Government of the Philippines	Funding Gap
Prevention	<ul style="list-style-type: none"> Commodities (condoms, lubes, etc) IEC KAP prevention in closed settings Capacity building Post-exposure prophylaxis (PEP) Policy Support Mass Media Campaign 	<ul style="list-style-type: none"> CBO-led prevention programs Community centers (safe spaces) Community-based rehabilitation for PWID Professional social media campaign
Diagnosis	<ul style="list-style-type: none"> Commodities Capacity building Policy Support Expansion of facility- based testing centers Self-testing 	<ul style="list-style-type: none"> Continuing support to rHIVda (test kits and laboratories) CBS roll out
Treatment	<ul style="list-style-type: none"> ARV drugs Opportunistic infections drugs Baseline laboratories (CD4) PhilHealth OHAT package Drug resistance monitoring 	<ul style="list-style-type: none"> Hepatitis C treatment CBO-led care and support Baseline laboratories (including viral load test) Drug resistance monitoring
Health systems	<ul style="list-style-type: none"> Current staff (NASPCP, EB, ROs, SHCs, treatment hubs, laboratories) Medical Assistance Program (MAP) HIV integration with other programs 	<ul style="list-style-type: none"> High level advocacy for MAP institutionalization Support to policy development (CBS, rHIVda, proxy consent for YKAP, self-testing, PrEP, PEP, HRT) Case management (community and facility-based) Legal and Human Rights support Support to PSM Roll out of eHARP and SHC reporting system DOH staff support

Monitoring and Evaluation (M&E)

This plan shall use a separate document, Monitoring & Evaluation of the Philippine Health Sector's Strategic Plan for HIV 2015 - 2020 to measure the accomplishment of the activities stated herein. The said plan has already been updated to reflect the changes in some of the indicators.

ANNEX 1. GEOGRAPHIC COVERAGE

Category A Plus: This includes [a] highly urbanized cities, [b] IHBSS sites with HIV Prevalence, [c] cities and first class municipalities with more than 50 HIV cases. This also includes [a] all 17 Metro Manila sites and [b] the whole Cebu Province.

Olongapo	Antipolo	Iligan	Quezon City
San Jose del Monte	Cainta	Davao	San Juan
Angeles	Batangas	Tagum	Taguig
Malolos	Lipa	General Santos	Valenzuela
Marilao	Cavite	Koronadal	Argao
Meycauayan	Calamba	Baguio	Balamban
Santa Maria	Binan	Butuan	Bantayan
Mabalacat	Cabuyao	Caloocan	Bogo
San Fernando	San Pablo	Las Piñas	Carcar
Cabanatuan	San Pedro	Makati	Cebu
Tarlac	Lucena	Malabon	Consolacion
Bacoor	San Mateo	Mandaluyong	Daan Bantayan
Binangonan	Taytay	Manila	Dalaguete
Rodriguez	Puerto Princesa	Marikina	Danao
Gen. Trias	Naga	Muntinlupa	Lapu-Lapu
Silang	Iloilo	Navotas	Liloan
Tanza	Bacolod	Parañaque	Mandaue
Dasmarinas	Tacloban	Pasay	Minglanilla
Imus	Zamboanga	Pasig	Naga
Sta. Rosa	Cagayan de Oro	Pateros	Talisay
			Toledo

Category B: This includes cities and municipalities with 10 to 49 HIV cases.

Agoo	Tuguegarao	Pulilan	Mexico
Alaminos	Cauayan	San Ildefonso	Porac
Bauang	Ilagan	San Miguel	Apalit (PA)
Bayambang	Santiago	San Rafael	Arayat (PA)
Binmaley	Bayombong	Norzagaray	Floridablanca (PA)
Calasiao	Balanga	Obando	Santa Ana (PA)
Dagupan	Dinalupihan	Pandi	Santa Rita
Laoag	Mariveles	Paombong	Santo Tomas (PA)
Candon	Angat	Cabiao	Camiling
Lingayen	Balagtas	Cuyapo	Capas
Malasiqui	Baliuag	San Jose	Concepcion
San Carlos	Bocaue	San Leonardo	Gerona
San Fabian	Bulacan	Talavera	Paniqui
Urdaneta	Calumpit	Candaba	Victoria (TC)
Villasis	Guiguinto	Guagua	Subic
Vigan	Hagonoy	Lubao	
San Fernando	Plaridel	Magalang	

Category C: This includes cities and municipalities with less than 10 HIV cases.

Adams	Caoayan	Aringay	Bolinao
Bacarra	Cervantes (IS)	Bacnotan	Bugallon
Badoc	Galimuyod	Bagulin	Burgos (PS)
Bangui	Gregorio Del Pilar	Balaoan	Dasol
Banna (Espiritu)	Lidlidda	Bangar	Infanta (PS)
Batac	Magsingal	Burgos (LU)	Labrador
Burgos (IN)	Nagbukel	Caba	Laoac
Carasi	Narvacan	Luna (LU)	Mabini (PS)
Currimaog	Quirino (IS)	Naguilian	Manaoag
Dingras	Salcedo	Pugo	Mangaldan
Dumalneg	San Emilio	Rosario	Mangatarem
Marcos	San Esteban	San Gabriel	Mapandan
Nueva Era	San Ildefonso (IS)	San Juan (LU)	Natividad
Pagudpud	San Juan (IS)	Santo Tomas (LU)	Pozorrubio
Paoay	San Vicente (IS)	Santol	Rosales
Pasuquin	Santa	Sudipen	San Jacinto (PS)
Piddig	Santa Catalina (SC)	Tubao	San Quintin (PS)
Pinili	Santa Cruz (IS)	Agno	Santa Maria (PN)
San Nicolas (IN)	Santa Lucia	Aguilar	Santo Tomas (PS)
Sarrat	Santa Maria	Alcala	Sison (PS)
Solsona	Santiago (IS)	Anda (PS)	Tayug
Vintar	Santo Domingo (IS)	Asingan	Urbiztondo
Alilem	Sigay	Balungao	San Manuel
Banayoyo	Sinait	Bani	San Nicolas
Bantay	Sugpon	Basista	Sta. Barbara
Burgos (IS)	Suyo	Bautista	Sual
Cabugao	Tagudin	Binalonan	Umingan

HIV Prevention and Control
Operational Plan 2018 – 2020
Indicative Cost

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

OPERATIONAL PLANNING MATRIX (2018-2020)									
Output Indicator	STRATEGY	ACTIVITY	COST CATEGORY	REMARKS	2018		2019	2020	TOTAL REQ
					Duration/Factor/Doze	BUDGET REQ.	BUDGET REQ.	BUDGET REQ.	BUDGET REQ.
Indicator 1.1: Percentage of key populations reached by prevention program				80% of MSM = 197,620 CAT A + 67,500 Cat B + TG = 59,670 + 20,159					
	Activity 1	Mapping	Travel Related Cost	Numbers of mapping done	3	P 19,080,000.00	P 19,080,000.00	P 19,080,000.00	57,240,000.00
	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	P 41,340,000.00	P 41,340,000.00	P 41,340,000.00	124,020,000.00
		Outreach activities by CHOW for PWD	Travel Related Cost	3554 PWID / 4 qtrs / 40 reach per qtr = 22 CHOW (Yr 1=40/qtr Yr 2=43) 4*40*22CHOW= 3520	4	P 1,716,000.00	P 1,716,000.00	P 429,000.00	3,861,000.00
		Outreach activities by CHOW for PWD	Travel Related Cost	3554 PWID / 4 qtrs / 40 reach per qtr = 22 CHOW (Yr 1=40/qtr Yr 2=43) 4*40*22CHOW= 3520	4	P 312,000.00	P 312,000.00	P 234,000.00	858,000.00
		Outreach activities for Young KP	Travel Related Cost	15 regions x 45YKP x 12 months = 8100	2	P 3,960,000.00	P 3,960,000.00	P 3,960,000.00	11,880,000.00
		Events	Travel Related Cost	1 sessions per weekend x 15 YKAP persion with 1 CHOW with 1 YKAP leader = 8,100	10	P 2,400,000.00	P 2,400,000.00	P 2,400,000.00	7,200,000.00
	Activity 2.1	Outreach activities by CHOW for PWID	Travel Related Cost	22 CHOW to reach 40 per quarter each CHOW (81,480)	4	P 22,407,000.00	P 22,407,000.00	P 22,407,000.00	67,221,000.00
	Activity 3	Community Events (fiesta, mobile vct)	Travel Related Cost	117 CHOW to reach at least ___KP per event	10	P 11,700,000.00	P 14,040,000.00	P 14,040,000.00	39,780,000.00
	Activity 4	Integrate CBS in the Health Care Delivery System	Travel Related Cost						
		a. National Dissemination Forum of GF-HASH Technical Report	Travel Related Cost		16	P 13,879,040.00	P 13,879,040.00	P 13,879,040.00	41,637,120.00
		b. Consultation and Policy (Guidelines) Formulation Meeting and Writeshop on CBS Implementation	Travel Related Cost		2	P 146,240.00	P 73,120.00	P -	219,360.00
		b.1. Conduct of Consultation Meeting for Policy (Guidelines) Formulation on CBS	Travel Related Cost		2	P 146,240.00	P 73,120.00	P -	219,360.00
		b.2. Conduct of Writeshop for Policy (Guidelines) on CBS	Travel Related Cost		2	P 1,447,133.33	P 723,566.67	P -	2,170,700.00
		b.3. Conduct of National Consultation on the Draft Policy (Guidelines) on CBS	Travel Related Cost		2	P 732,666.67	P 366,333.33	P -	1,099,000.00
		c. Finalization of the National CBS Implementation Manual	Travel Related Cost		2	P 182,800.00	P 91,400.00	P -	274,200.00
		d. Creation of National and Regional Focal Team for CBS Implementation	Travel Related Cost		2	P 182,800.00	P 91,400.00	P -	274,200.00
		e. National Policy Dissemination Forum and Planning Workshop for CBS Implementation	Travel Related Cost		16	P 2,930,666.67	P 2,930,666.67	P -	5,861,333.33
		f. Regional Focal Teams TOT on CBS Implementation	Travel Related Cost		16	P 4,163,712.00	P 4,163,712.00	P -	8,327,424.00
		g. Regional Dissemination Forum and Planning Workshop on CBS Implementation	Travel Related Cost		16	P 8,327,424.00	P 8,327,424.00	P -	16,654,848.00
	Activity 6	Assess and develop comprehensive package of interventions for KP, including children and youth							
		Development of comprehensive package of interventions for KP, including children and youth	Travel Related Cost		1	P 616,000.00			616,000.00
		Consultation Meeting with National Program and TWG on package of interventions for KP, including children and youth	Travel Related Cost		2	P 219,360.00			219,360.00

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	P	41,340,000.00	P	41,340,000.00	P	41,340,000.00	124,020,000.00
		Drafting of comprehensive package of interventions for KP, including children and youth	Travel Related Cost		2	P	586,133.33					586,133.33
		Finalization of package of interventions for KP, including children and youth	Travel Related Cost		2	P	1,387,904.00					1,387,904.00
		Formulation / Adoption of package of interventions for KP, including children and youth	Travel Related Cost		2	P	584,960.00					584,960.00
		National Dissemination of the package of interventions for KP, including children and youth	Travel Related Cost		1	P	358,000.00					358,000.00
		Monitoring of HIV Program Implementation of package of interventions for KP, including children and youth	Travel Related Cost		16	P	8,806,400.00					8,806,400.00
	Activity 7	Develop a seamless evidence-based, age-appropriate, comprehensive, and life-skill approach to HIV education curriculum for children and youth	Travel Related Cost									
		1. Development of comprehensive curriculum on HIV education for children and youth	Travel Related Cost		2	P	1,760,000.00					1,760,000.00
		2. Consultation Meeting with National Program and TWG on HIV education for children and youth	Travel Related Cost		2	P	438,720.00					438,720.00
		3. Drafting of Revised Curriculum for HIV education for children and youth	Travel Related Cost		2	P	586,133.33					586,133.33
		4. Finalization of curriculum on HIV education for children and youth	Travel Related Cost		2	P	1,040,928.00					1,040,928.00
		5. Formulation / Adoption of guidelines for curriculum on HIV education for children and youth	Travel Related Cost		2	P	292,480.00					292,480.00
	Activity 8	Develop an evidence-based comprehensive package for transgender women with intensified information and services campaign on HIV prevention, sexual, and mental health	Travel Related Cost									
		1. Development of comprehensive prevention package for transgender women	Travel Related Cost		1	P	1,584,000.00					1,584,000.00
		2. Consultation Meeting with National Program and TWG on HIV prevention package for transgender women	Travel Related Cost		2	P	146,240.00					146,240.00
		3. Drafting of prevention package for transgender women	Travel Related Cost		2	P	586,133.33					586,133.33
		4. Finalization of prevention package for transgender women	Travel Related Cost		2	P	1,040,928.00					1,040,928.00
		5. Formulation / Adoption of prevention package for transgender women	Travel Related Cost		2	P	292,480.00					292,480.00
	Activity 9	Scale up HIV Program in Schools and Higher Educational Institutions	Travel Related Cost									
		1. Consultation Meeting with National Program, DepED, CHED for HIV Policy Harmonization and Enhancement of Program Implementation in HEIs	Travel Related Cost		2	P	146,240.00					146,240.00
		2. Drafting of Revised Harmonized Policy in the Implementation of HIV Program in Schools and HEIs	Travel Related Cost		2	P	586,133.33					586,133.33
		3. Finalization of the Harmonized Policy in the Implementation of HIV Program in Schools and HEIs	Travel Related Cost		2	P	1,040,928.00					1,040,928.00
	Activity 10	Enablers fund for KP reached by CHOW for access of health services	Living support to client		2,843	P	6,823,680.00					6,823,680.00

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	P	41,340,000.00	P	41,340,000.00	P	41,340,000.00	124,020,000.00
		Enablers fund for KP reached by CHOW for access of health services	Living support to client		6,480	P	15,552,000.00					15,552,000.00
Indicator 1.2: Percentage of KAP who have access to condom												
	Activity # 1	Capability building for 100% CUP for health workers and other key stakeholders for SHCs (SW)	Human Resources									
	Activity#2	Augment commodities (condoms and lubes)										
		Augment commodities (condoms and lubes) SW	Health Products - Non Pharma	Pop Estimates Cat A to C x target 60% x number of sexual per month (2) x 12 mos; Total need to be covered by government and donors (30%)	285,552pcs	P	942,321.60	P	1,099,375.20	P	1,256,428.80	3,298,125.60
		Augment commodities (condoms and lubes) MSM	Health Products - Non Pharma	Pop Estimates in Cat A sites + Cat B (158,100+54000) x number of sexual 2 x 12 mos in one year; Total need to be covered by government (30%)	1,673,158pcs	P	9,202,366.80	P	11,630,044.80	P	14,057,722.80	34,890,134.40
		Augment commodities (condoms and lubes) MSM	Health Products - Non Pharma	Pop Estimates in Cat A sites + Cat B (158,100+54000) x number of sexual 2 x 12 mos in one year; Total need to be covered by donors (70%)	975,218pcs	P	5,363,701.20	P	5,363,701.20	P	5,363,701.20	16,091,103.60
		Augment commodities (condoms and lubes) TG	Health Products - Non Pharma	Pop Estimates in Cat A sites + Cat B (158,100+54000) x number of sexual 2 x 12 mos in one year; Total need to be covered by donors (30% of Total need)	588,025pcs	P	3,234,139.92	P	3,963,571.92	P	4,693,003.92	11,890,715.76
		Augment commodities (condoms and lubes) TG	Health Products - Non Pharma	Pop Estimates in Cat A sites + Cat B (158,100+54000) x number of sexual 2 x 12 mos in one year; Total need to be covered by donors (70% of 30% of resources needs excluding out or pocket)	207,719pcs	P	1,142,452.08	P	1,142,452.08	P	1,142,452.08	3,427,356.24
		Augment commodities (condoms and lubes)PWID	Health Products - Non Pharma	40%, 50%, 60% of estimated PWID who are not yet diagnosed. Target: 5,065	24,312pcs	P	133,716.00	P	167,178.00	P	200,574.00	501,468.00
		Augment commodities (condoms and lubes)YKP	Health Products - Non Pharma	60%, 65%, 70% of the estimated YKAP in 39 sites Target: 44,940	291,211pcs	P	1,601,661.60	P	1,735,133.40	P	1,868,605.20	5,205,400.20
	Activity#3	Review Communication Plan and include: (1) Condom and Lubes Strategy (2) • Strategic communication Plan for specific Key Population using the Filipino psyche approach										
		Team Leader	External Professional Services		10 months	P	597,000.00					597,000.00
		Component Strategy Specialists	External Professional Services		10 months	P	511,820.00					511,820.00
		Component Technical Operatives	External Professional Services		10 months	P	376,210.00					376,210.00
		Administrative Support Operative	Program administration costs		10 months	P	257,230.00					257,230.00
		Materials Production: Monograph	Communication materials and publications	Qty based on total number of KAP	02,000pcs	P	60,000.00					60,000.00
		Support to Project Operations	Program administration costs		10 months	P	200,000.00					200,000.00
		Add: Mass Media placement (80,000,000/100,000,000/120,000,000: 2018,2019,2020)										

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

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Indicator 1.7: Percentage of PWID reporting the use of clean injecting equipment the last time they injected drugs												
	Activity #1	Conduct of IHBS	Travel Related Cost		1	P	15,000,000.00					15,000,000.00
	Activity #2	Explore Opioid Substitution Therapy (OST) for PWID										
		a. Development of comprehensive policy on	Travel Related Cost		2	P	219,360.00					219,360.00
		b. Consultation Meeting with National Program and TWG on	Travel Related Cost		1	P	358,000.00					358,000.00
		c. Drafting of Revised Policy / Guidelines for	Travel Related Cost		5	P	914,000.00					914,000.00
		d. Finalization of the Policy / Guidelines on	Travel Related Cost		5	P	1,096,800.00					1,096,800.00
		e. Formulation / Adoption of guidelines for Condoms and Lubes	Travel Related Cost		64	P	2,201,600.00					2,201,600.00
Indicator 10: Prevalence of syphilis among KAP												
	Activity #1	Procurement of lab reagents, supplies and equipment for syphilis and other STIs										
		STI Cost for diagnosis (30,000 cases x 2 visits)		POP ESTIMATES	381,511							
	1	Gram Stain kit (C violet, iodine, alcohol, safranin) set/4/500 ml	Health Products - Non Pharma		23,121.88	P	763,022.00	P	763,022.00	P	763,022.00	2,289,066.00
	2	TPPA-Syphilis Confirmatory test, Particle Agglutination	Health Products - Non Pharma		3,815.11	P	991,928.60	P	991,928.60	P	991,928.60	2,975,785.80
	3	Syphilis Test Kit (Rapid Test) Syphilis test kit, immunochromatographic assay for the qualitative detection of antibodies of all isotypes (IgG, IgM, LgA)	Health Products - Non Pharma		12,717.03	P	1,907,555.00	P	1,907,555.00	P	1,907,555.00	5,722,665.00
	4	Cryovial 2ml (internally threaded box of 500)	Health Products - Non Pharma		763.02	P	9,919.29	P	9,919.29	P	9,919.29	29,757.86
	5	Blood Collection Tube, Red (100 tubes per pack)	Health Products - Non Pharma		12,717.03	P	63,585.17	P	63,585.17	P	63,585.17	190,755.50
	6	Yellow Tip (pack of 1000)	Health Products - Non Pharma		12,717.03	P	63,585.17	P	63,585.17	P	63,585.17	190,755.50
	7	Disposable Gloves, Medium	Health Products - Non Pharma		3,815.11	P	19,075.55	P	19,075.55	P	19,075.55	57,226.65
	8	Glass slide, frosted end (72 pcs per pack)	Health Products - Non Pharma		5,298.76	P	26,493.82	P	26,493.82	P	26,493.82	79,481.46
	9	Applicator Stick with cotton on one end	Health Products - Non Pharma		3,815.11	P	19,075.55	P	19,075.55	P	19,075.55	57,226.65
	10	Disposable syringes 5ml, G21	Health Products - Non Pharma		3,815.11	P	19,075.55	P	19,075.55	P	19,075.55	57,226.65
	11	Disposable mask, non-porous, non-absorbent ear loop typed, plastic sealed	Health Products - Non Pharma		7,630.22	P	38,151.10	P	38,151.10	P	38,151.10	114,453.30
	Activity #2	Augment human resource requirement (Medtech, MD and RN)	Human Resources		12 months	P	3,960,000.00	P	3,960,000.00	P	3,960,000.00	11,880,000.00
Indicator 1.6: Number (#) and Percent (%) of RP treated for syphilis												
	Activity #1	Procurement of drugs for syphilis and other STIs										
		STI drugs										
	Activity #1.1	Azithromycin 500mg (pack of 100's in blister of 2 tabs) FDA registered	Health Products - Pharma	2015 PMP								
		Azithromycin 500mg (pack of 100's in blister of 2 tabs) FDA registered - MSM	Health Products - Pharma	2 tabs (500mg/tab) per patient x 10.66% of those who will turn out positive for NGI (males)	16788 patient/s	P	839,400.00	P	839,400.00	P	839,400.00	2,518,200.00

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		Azithromycin 500mg (pack of 100's in blister of 2 tabs) FDA registered - PWID	Health Products - Pharma	2 tabs (500mg/tab) per patient x 10.66% of those who will turn out positive for NGI (males)	288 patient/s	P	14,400.00	P	14,400.00	P	14,400.00	43,200.00
		Azithromycin 500mg (pack of 100's in blister of 2 tabs) FDA registered - FSW (FFSW&RFSW)	Health Products - Pharma	2 tabs (500mg/tab) per patient x 16.33% of those who will turn out positive for NGI (females)	2095 patient/s	P	104,750.00	P	104,750.00	P	104,750.00	314,250.00
	Activity #1.2	Cefixime 400mg capsules (30 caps per pack)	Health Products - Pharma	2015 PMP								
		Cefixime 400mg capsules (30 caps per pack) MSM	Health Products - Pharma	1 tab per patient (400 mg) x 19.32% of those who will turn out positive (Gonococcal (Males)	3047 patient/s	P	380,875.00	P	380,875.00	P	380,875.00	1,142,625.00
		Cefixime 400mg capsules (30 caps per pack) - PWID	Health Products - Pharma	1 tab per patient (400 mg) x 19.32% of those who will turn out positive (Gonococcal (Males)	522 patient/s	P	65,250.00	P	65,250.00	P	65,250.00	195,750.00
		Cefixime 400mg capsules (30 caps per pack) - FSW (FFSW&RFSW)	Health Products - Pharma	1 tab per patient (400 mg) x 0.99% of those who will turn out positive (Gonococcal (Females)	20714 patient/s	P	2,589,250.00	P	2,589,250.00	P	2,589,250.00	7,767,750.00
	Activity #1.3	Penicillin G. Benzathine 1.2M unit power for IM	Health Products - Pharma	2015 PMP								
		Penicillin G. Benzathine 1.2M unit power for IM - MSM	Health Products - Pharma	2 vials per shot @ 1.2M unit/vial x 3 times per person; 1.95% of those tested will turn out positive	3071 patient/s	P	737,047.22	P	960,960.00	P	960,960.00	2,658,967.22
		Penicillin G. Benzathine 1.2M unit power for IM - PWID	Health Products - Pharma	2 vials per shot @ 1.2M unit/vial x 3 times per person; 6.11% of those tested will turn out positive	165 patient/s	P	39,649.02	P	49,920.00	P	49,920.00	139,489.02
		Penicillin G. Benzathine 1.2M unit power for IM - FSW (FFSW)	Health Products - Pharma	2 vials per shot @ 1.2M unit/vial x 3 times per person; 3.17% of those tested will turn out positive	20700 patient/s	P	4,967,899.26	P	5,013,600.00	P	5,013,600.00	14,995,099.26
		Metronidazole	Health Products - Pharma		20700 patient/s	P	413,991.61	P	414,000.00	P	414,000.00	1,241,991.61
Indicator 2.1: Percentage of KAP tested for HIV and got their results				0.6								
	Activity	Expand HIV Counseling and / or Testing (HCT) service in priority cities and provinces:										
	Activity	Expand Rapid HIV Diagnostic Algorithm (rHIVDA)										
	Activity	Implement Health Facility-Based HIV Testing Services										
	Activity	Implement Workplace-Based HIV Testing Services										
	Activity	Promote National HIV Testing Awareness Week										
	Activity	Scale up HIV Program in Schools and Higher Educational Institutions										
		Roll out Community-Based Screening (CBS)										
		a) National Dissemination Forum of GF-HASH Technical Report	Travel Related Cost		1	P	586,133.33	P	-	P	-	586,133.33
		b) Consultation and Policy (Guidelines) Formulation Meeting and Writeshop on CBS Implementation				P	-	P	-	P	-	
		> Conduct of Consultation Meeting for Policy (Guidelines) Formulation on CBS	Travel Related Cost		1	P	72,000.00	P	-	P	-	72,000.00

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		> Conduct of Writeshop for Policy (Guidelines) on CBS	Travel Related Cost		1	P	459,620.00	P	-	P	-	459,620.00
		> Conduct of National Consultation on the Draft Policy (Guidelines) on CBS	Travel Related Cost		1	P	40,000.00	P	-	P	-	40,000.00
		d) Creation of National and Regional Focal Team for CBS Implementation	Travel Related Cost		1	P	146,533.33	P	-	P	-	146,533.33
		e) National Policy Dissemination Forum and Planning Workshop for CBS Implementation	Travel Related Cost		1	P	16,000.00	P	-	P	-	16,000.00
		f) Regional Focal Teams TOT on CBS Implementation	Travel Related Cost		1	P	64,000.00	P	-	P	-	64,000.00
		g. Regional Dissemination Forum and Planning Workshop on CBS Implementation	Human Resources		1	P	286,400.00	P	-	P	-	286,400.00
		h. Streamlining of CBS implementation	Travel Related Cost		72	P	1,728,000.00	P	864,000.00	P	1,920,000.00	4,512,000.00
		i. Procurement of Equipment, kits, and other collateral commodities to support CBS implementation (as per checklist)										
		Community Based Screening Kits - includes bags, biohazard bags, cotton balls, lancets, lancing device, flashlight, etc.	Health Products - Non Pharma		306	P	1,224,000.00	P	1,224,000.00	P	1,224,000.00	3,672,000.00
		j. National Desk Review on CBS Implementation	Travel Related Cost		60	P	1,103,088.00	P	1,103,088.00	P	1,103,088.00	3,309,264.00
Indicator 2.2: Percentage of pregnant women screened for HIV and know results												
		link to activities on the expansion of HCT sites and conduct of HCT		infants x 2times		P	-	P	-	P	-	-
		Procurement of virological test for HIV for infants	Health Products - Pharma		50	P	600,000.00	P	600,000.00	P	600,000.00	1,800,000.00
		Develop Policy on Early Infant Diagnosis (EID)				P	-	P	-	P	-	-
		a) Develop policy on Early Infant Diagnosis				P	-	P	-	P	-	-
		> Conduct of workshop to develop policy on EID	Travel Related Cost		40	P	583,200.00	P	-	P	-	583,200.00
		> Consultation meeting to finalize policy on EID	Travel Related Cost		50	P	680,000.00	P	-	P	-	680,000.00
		b) Dissemination of Policy on Early Infant Diagnosis	Communication materials and publications		50	P	3,107,600.00	P	-	P	-	3,107,600.00
		c) Implementation of EID			16	P	-	P	-	P	-	-
		> Conduct of training for EID	Travel Related Cost		8	P	2,617,440.00	P	981,540.00	P	654,360.00	4,253,340.00
		> Conduct of regional quarterly meeting on implementation of EID	Travel Related Cost		16	P	1,152,000.00	P	1,152,000.00	P	1,152,000.00	3,456,000.00
Indicator 2.3: Percentage of pregnant women screened for HIV and know results -												
		> Setting up of regional facilities for milk banking				P	-					-
		- Regional Coordination Meeting to set up regional facilities for milk banking	Travel Related Cost		2	P	658,080.00					658,080.00
		> Consultation with MNCHN and CBOs Focusing on Mother and Child welfare and the role of CBOs in mother and child ARV access	Travel Related Cost		16	P	3,456,000.00					3,456,000.00
		> Development of Policy and MOP on role of CBOs in mother and child ARV access	External Professional Services		1	P	792,000.00					792,000.00
		> Training of CBO on mother and child ARV access	Human Resources		8	P	8,585,472.00					8,585,472.00

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

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		> Reproduction of MOP on Mother and Child ARV Access	Communication materials and publications		1	P	7,200,000.00					7,200,000.00
		> Operations Research on the role of CBOs in ARV access	External Professional Services		1	P	1,056,000.00					1,056,000.00
		> Feedbacking on Operations Research on the role of CBOs in ARV access	Travel Related Cost		15	P	720,000.00					720,000.00
Indicator 3.1: Percentage of estimated PLHIV diagnosed with HIV												
		Cobas Taqman HIV 1 Test (manual extraction)	Health Products - Non Pharma	estimated PLHIV with annual target: 2018: 70% of 79,109 2019: 80% of 94,392 2020: 90% of 112,542	55,376	P	332,256,000.00	P	453,084,000.00	P	607,728,000.00	1,393,068,000.00
		High Pure Viral Nucleic Acid Kit	Health Products - Non Pharma		55,376	P	55,376,000.00	P	75,514,000.00	P	101,288,000.00	232,178,000.00
	Activity 2:	Support for courier/transport of specimen for viral load testing (for hubs with no VL machine)	Procurement and SCM Costs		55,376	P	44,300,800.00	P	60,411,200.00	P	81,031,200.00	185,743,200.00
	Activity 3:	Advocate with airline companies on specimen handling										
		Meeting with Airline Companies and Courier Services	Travel Related Cost		1	P	16,000.00	P	16,000.00	P	16,000.00	48,000.00
	Activity 4:	Conduct ARV resistance surveillance	External Professional Services		1	P	5,000,000.00	P	5,000,000.00	P	5,000,000.00	15,000,000.00
	Activity 5:	Provide Hepatitis B Screening	Health Products - Non Pharma	80% of 5,000	4,000.00	P	1,200,000.00	P	1,200,000.00	P	1,200,000.00	3,600,000.00
	Activity 6:	Diagnose Hep C among PWID (including PWID with HIV)										
		HepC RDT	Health Products - Non Pharma		300	P	135,000.00	P	202,500.00	P	270,000.00	607,500.00
		HCV RNA (Confirmatory)	Health Products - Non Pharma			P	-	P	3,150,000.00	P	4,200,000.00	7,350,000.00
		Routine Laboratory Test	Health Products - Non Pharma			P	-	P	634,500.00	P	846,000.00	1,480,500.00
		HepB RDT	Health Products - Non Pharma			P	-	P	225,000.00	P	300,000.00	525,000.00
		CD4 Test	Health Products - Non Pharma			P	-	P	450,000.00	P	600,000.00	1,050,000.00
		X ray	Health Products - Non Pharma			P	-	P	112,500.00	P	150,000.00	262,500.00
		HIV Viral Load Test	Health Products - Non Pharma			P	-	P	3,150,000.00	P	4,200,000.00	7,350,000.00
		Ultrasound	Health Products - Non Pharma			P	-	P	225,000.00	P	300,000.00	525,000.00
		Syphilis RDT	Health Products - Non Pharma			P	-	P	225,000.00	P	300,000.00	525,000.00
		Provide Hep C Treatment for PWID with HIV	Health Products - Non Pharma			P	8,460,000.00	P	14,805,000.00	P	21,150,000.00	44,415,000.00

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

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		Clinic Rental	Program administration costs			P 240,000.00	P 240,000.00	P 240,000.00	720,000.00
		Communication	Program administration costs			P 24,000.00	P 24,000.00	P 24,000.00	72,000.00
		Salary of Medical Staff	Human Resources						
		Nurse	Human Resources			P 624,000.00	P 624,000.00	P 624,000.00	1,872,000.00
		Medical Technologist	Human Resources			P 312,000.00	P 312,000.00	P 312,000.00	936,000.00
		Physician	Human Resources			P 522,000.00	P 522,000.00	P 522,000.00	1,566,000.00
		Transportation allowance per visit per patients (200 pesos per visit)	Living support to client			P 480,000.00	P 480,000.00	P 480,000.00	1,440,000.00
		Allowance of volunteers	Program administration costs			P 120,000.00	P 120,000.00	P 120,000.00	360,000.00
		Conduct coordination & monitoring meetings	Travel Related Cost						
		Meeting	Travel Related Cost			P 9,600.00	P 9,600.00	P 9,600.00	28,800.00
		Travel/Airfare/Accommodation	Travel Related Cost			P 135,000.00	P 135,000.00	P 135,000.00	405,000.00
		Training on management of HIV, Hepatitis B/C (1 doctor, 2 nurses) a. Clinical management b. Counseling (can be combined with volunteers)	Human Resources			P 81,000.00	P 81,000.00	P 81,000.00	243,000.00
		- Bio Refrigerator	Health Products - Equipment			P 203,040.00	P 203,040.00	P 203,040.00	609,120.00
		- Bio Freezer	Health Products - Equipment			P 393,390.00	P 393,390.00	P 393,390.00	1,180,170.00
		- Centrifuge	Health Products - Non Pharma			P 53,439.00	P 53,439.00	P 53,439.00	160,317.00
		- Autoclave	Health Products - Non Pharma			P 320,455.00	P 320,455.00	P 320,455.00	961,365.00
		- Computer with Printer	Non-health equipment			P 50,000.00	P 50,000.00	P 50,000.00	150,000.00
		Timer, digital, for clinic or laboratory use	Health Products - Non Pharma			P 15,000.00	P 15,000.00	P 15,000.00	45,000.00
		Lancing Device - Quality Pricker - Universal Lancet includes lancet, pack of 100's	Health Products - Non Pharma			P 20,000.00	P 20,000.00	P 20,000.00	60,000.00
		Alcohol, 70%, isopropyl, 150ml	Health Products - Non Pharma			P 800.00	P 800.00	P 800.00	2,400.00
		Cotton Balls, 300's	Health Products - Non Pharma			P 1,400.00	P 1,400.00	P 1,400.00	4,200.00
		Sharps disposal containers, plastic containers Capacity: 300ml - 500ml	Health Products - Non Pharma			P 2,000.00	P 2,000.00	P 2,000.00	6,000.00
		Biohazard waste plastic bag, 8.5 x 11,"100's	Health Products - Non Pharma			P 30,000.00	P 30,000.00	P 30,000.00	90,000.00
		Gloves, Nitrate, disposable, powder-free, 100's	Health Products - Non Pharma			P 6,000.00	P 6,000.00	P 6,000.00	18,000.00
		Masking Tape, 1/2"inch	Health Products - Non Pharma			P 300.00	P 300.00	P 300.00	900.00
		Pregnancy Test	Health Products - Non Pharma	80% of 5,000	4,000.00	P 640,000.00	P 640,000.00	P 640,000.00	1,920,000.00

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	P 41,340,000.00	P 41,340,000.00	P 41,340,000.00	124,020,000.00
	Activity 4:	Conduct ARV resistance surveillance	External Professional Services		1	P 5,000,000.00	P 5,000,000.00	P 5,000,000.00	15,000,000.00
	Activity 5:	Provide Hepatitis B Screening	Health Products - Non Pharma	80% of 5,000	4,000.00	P 1,200,000.00	P 1,200,000.00	P 1,200,000.00	3,600,000.00
		HepC RDT	Health Products - Non Pharma		300	P 135,000.00	P 202,500.00	P 270,000.00	607,500.00
		HCV RNA (Confirmatory)	Health Products - Non Pharma			P -	P 3,150,000.00	P 4,200,000.00	7,350,000.00
		Routine Laboratory Test	Health Products - Non Pharma			P -	P 634,500.00	P 846,000.00	1,480,500.00
		HepB RDT	Health Products - Non Pharma			P -	P 225,000.00	P 300,000.00	525,000.00
		CD4 Test	Health Products - Non Pharma			P -	P 450,000.00	P 600,000.00	1,050,000.00
		X ray	Health Products - Non Pharma			P -	P 112,500.00	P 150,000.00	262,500.00
		HIV Viral Load Test	Health Products - Non Pharma			P -	P 3,150,000.00	P 4,200,000.00	7,350,000.00
		Ultrasound	Health Products - Non Pharma			P -	P 225,000.00	P 300,000.00	525,000.00
		Syphilis RDT	Health Products - Non Pharma			P -	P 225,000.00	P 300,000.00	525,000.00
		Provide Hep C Treatment for PWID with HIV	Health Products - Non Pharma			P 8,460,000.00	P 14,805,000.00	P 21,150,000.00	44,415,000.00
		Clinic Rental	Program administration costs			P 240,000.00	P 240,000.00	P 240,000.00	720,000.00
		Communication	Program administration costs			P 24,000.00	P 24,000.00	P 24,000.00	72,000.00
		Salary of Medical Staff	Human Resources						
		Nurse	Human Resources			P 624,000.00	P 624,000.00	P 624,000.00	1,872,000.00
		Medical Technologist	Human Resources			P 312,000.00	P 312,000.00	P 312,000.00	936,000.00
		Physician	Human Resources			P 522,000.00	P 522,000.00	P 522,000.00	1,566,000.00
		Transportation allowance per visit per patients (200 pesos per visit)	Living support to client			P 480,000.00	P 480,000.00	P 480,000.00	1,440,000.00
		Allowance of volunteers	Program administration costs			P 144,000.00	P 144,000.00	P 144,000.00	432,000.00
		Conduct coordination & monitoring meetings	Travel Related Cost						
		Meeting	Travel Related Cost			P 9,600.00	P 9,600.00	P 9,600.00	28,800.00

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	P 41,340,000.00	P 41,340,000.00	P 41,340,000.00	124,020,000.00
		Travel/Airfare/Accommodation	Travel Related Cost			P 135,000.00	P 135,000.00	P 135,000.00	405,000.00
		(volunteer) Care agent training- 15 pax a. Self empowerment training b. Counseling training	Human Resources			P 54,000.00	P 54,000.00	P 54,000.00	162,000.00
		Training on management of HIV, Hepatitis B/C (1 doctor, 2 nurses) a. Clinical management b. Counseling (can be combined with volunteers)	Human Resources			P 81,000.00	P 81,000.00	P 81,000.00	243,000.00
		- Bio Refrigerator	Health Products - Equipment			P 203,040.00	P 203,040.00	P 203,040.00	609,120.00
		- Bio Freezer	Health Products - Equipment			P 393,390.00	P 393,390.00	P 393,390.00	1,180,170.00
		- Pippetors (10-100ul)	Health Products - Non Pharma			P 7,798.00	P 7,798.00	P 7,798.00	23,394.00
		- Pippetors (20-200 ul)	Health Products - Non Pharma			P 7,798.00	P 7,798.00	P 7,798.00	23,394.00
		- Centrifuge	Health Products - Non Pharma			P 53,439.00	P 53,439.00	P 53,439.00	160,317.00
		- Autoclave	Health Products - Non Pharma			P 320,455.00	P 320,455.00	P 320,455.00	961,365.00
		- Computer with Printer	Non-health equipment			P 50,000.00	P 50,000.00	P 50,000.00	150,000.00
		Timer, digital, for clinic or laboratory use	Health Products - Non Pharma			P 15,000.00	P 15,000.00	P 15,000.00	45,000.00
		Lancing Device - Quality Pricker - Universal Lancet Includes lancet, pack of 100's	Health Products - Non Pharma			P 20,000.00	P 20,000.00	P 20,000.00	60,000.00
		Alcohol, 70%, isopropyl, 150ml	Health Products - Non Pharma			P 800.00	P 800.00	P 800.00	2,400.00
		Cotton Balls, 300's	Health Products - Non Pharma			P 1,400.00	P 1,400.00	P 1,400.00	4,200.00
		Sharps disposal containers, plastic containers. Capacity: 300ml - 500ml	Health Products - Non Pharma			P 2,000.00	P 2,000.00	P 2,000.00	6,000.00
		Biohazard waste plastic bag, 8.5 x 11, "100's	Health Products - Non Pharma			P 30,000.00	P 30,000.00	P 30,000.00	90,000.00
		Gloves, Nitrile, disposable, powder-free, 100's	Health Products - Non Pharma			P 6,000.00	P 6,000.00	P 6,000.00	18,000.00
		Masking Tape, 1/2"inch	Health Products - Non Pharma			P 300.00	P 300.00	P 300.00	900.00
		Pregnacy Test	Health Products - Non Pharma	80% of 5,000	4,000.00	P 640,000.00	P 640,000.00	P 640,000.00	1,920,000.00
Indicator 3.2: Percentage of PLHIV who are started on ART									
	Activity 1:	Provide uninterrupted supply of antiretroviral drugs							
		-Procurement of ARVs (1st and 2nd line regimen)	Health Products - Pharma		55,376	P 553,763,000.00	P 755,136,000.00	P 1,012,878,000.00	2,321,777,000.00
		-Distribution of quality ARV to Treatment Hubs and Primary Care Facilities	Procurement and SCM Costs			P 152,699,977.17	P 208,228,520.07	P 279,300,797.40	640,229,294.64
	Activity 2:	Enhance engagement of private physicians	Travel Related Cost		1	P 122,400.00	P 122,400.00	P 122,400.00	367,200.00
		Provide augmentation nurses to treatment hubs	Human Resources		360	P 107,511,840.00	P 131,403,360.00	P 155,294,880.00	394,210,080.00
	Activity 2:	Provide manpower augmentation including partnership with CBOs	Human Resources	Total number of Treatment & Satellite Treatment Hub	187	P 2,805,000.00	P 2,805,000.00	P 2,805,000.00	8,415,000.00
	Activity 3:	Development of IEC materials on positive living	Travel Related Cost	# of stakeholders (NGOs, CBOs, Gas)	30 pax	P 54,000.00	P 54,000.00	P 54,000.00	162,000.00
	Activity 5:	Procurement of reagents for Drug resistance study	Health Products - Non Pharma	5% of PLHIV on ART per year	2769 PLHIV	P 22,150,520.00	P 30,205,440.00	P 40,515,120.00	92,871,080.00
	Activity 6:	Facility enhancement (space conducive for counseling)	Infrastructure		25	P 12,500,000.00	P 12,500,000.00	P 12,500,000.00	37,500,000.00
	Activity 7:	Disposition of Philhealth OHAT reimbursement at the treatment hubs							
		- Revolving fund for delivery of services for drugs, supplies, laboratory reagents, equipment (including maintenance), site improvement, and referral fee, etc.)	Program administration costs	estimated PLHIV on ART enrolled to PHIC: 2018: 60% 2019: 70% 2020: 80%	33226	P 531,612,480.00	P 845,752,320.00	P 1,296,483,840.00	2,673,848,640.00

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	P 41,340,000.00	P 41,340,000.00	P 41,340,000.00	124,020,000.00
		- Professional fee for HACT and other staff (doctor, dentists, nurses, medical social workers, counselors, medical technology) directly providing services to PLHIV	Human Resources	estimated PLHIV on ART enrolled to PHIC: 2018: 60% 2019: 70% 2020: 80%	33226	P 132,903,120.00	P 211,438,080.00	P 324,120,960.00	668,462,160.00
	Activity 8:	Provision of Vaccines for PLHIV							
		1) Hepatitis B vaccine: Php30/dose assumption: ;	Health Products - Pharma	90% of new PLHIV will need Hep B vaccine	49,839	P 4,485,480.30	P 6,116,601.60	P 8,204,311.80	18,806,393.70
		2) Flu vaccine: Php170/dose;	Health Products - Pharma	assumption: 90% all PLHIV will need Flu vaccination yearly	49,839	P 25,417,721.70	P 34,660,742.40	P 46,491,090.00	106,569,554.10
		3) Pneumococcal	Health Products - Pharma	1 dose per 5 years assumption: 80% of PLHIV;	44,301	P 16,081,277.52	P 21,929,149.44	P 29,413,977.12	67,424,404.08
		4) HPV vaccine for female PLHIV	Health Products - Pharma	Based on the HIV AIDS Registry proportion	3,876	3876.341	P 23,786,784.00	P 23,786,784.00	47,577,444.34
	Activity 9:	Prophylaxis for PLHIV							
		Cotrimoxazole Preventive Therapy Package:	Health Products - Pharma	assumption: 15% of PLHIV will need CPT yearly	8,306	P 6,096,930.63	P 8,314,047.36	P 8,314,047.36	22,725,025.35
	Activity 1:	Provide uninterrupted supply of antiretroviral drugs							
		-Distribution of quality ARV to Treatment Hubs and Primary Care Facilities	Procurement and SCM Costs			P -	P -	P -	
	Activity 2:	Enhance engagement of private physicians	Travel Related Cost		1	P 122,400.00	P 122,400.00	P 122,400.00	367,200.00
		Provide augmentation nurses to treatment hubs	Human Resources		12	P 182,770,128.00	P 182,770,128.00	P 182,770,128.00	548,310,384.00
	Activity 2:	Provide manpower augmentation including partnership with CBOs	Human Resources	Total number of Treatment & Satellite Treatment Hub	161	P 28,980,000.00	P 28,980,000.00	P 28,980,000.00	86,940,000.00
	Activity 3:	Development of IEC materials on positive living	Travel Related Cost	# of stakeholders (NGOs, CBOs, Gas)	30 pax	P 54,000.00	P -	P -	54,000.00
	Activity 6:	Facility enhancement (space conducive for counseling)	Infrastructure		15	P 7,500,000.00	P 7,500,000.00	P 7,500,000.00	22,500,000.00
	Activity 7:	Disposition of Philhealth OHAT reimbursement at the treatment hubs							
	Activity 8:	Provision of Vaccines for PLHIV							
		2) Flu vaccine: Php170/dose;	Health Products - Pharma	assumption: 90% all PLHIV will need Flu vaccination yearly	49,839	P 25,417,890.00	P 25,417,890.00	P 46,491,090.00	97,326,870.00
		3) Pneumococcal	Health Products - Pharma	1 dose per 5 years assumption: 80% of PLHIV;	44,301	P 16,081,263.00	P 16,081,263.00	P 21,929,149.44	54,091,675.44
		4) HPV vaccine for female PLHIV	Health Products - Pharma	Based on the HIV AIDS Registry proportion	3,876		P 23,786,775.00	P 23,786,775.00	47,573,550.00
	Activity 9:	Prophylaxis for PLHIV							
		Cotrimoxazole Preventive Therapy Package:	Health Products - Pharma	assumption: 15% of PLHIV will need CPT yearly	8,306	P 6,096,604.00	P 8,314,018.00	P 8,314,018.00	22,724,640.00
Indicator 3.3: Median CD4 count of PLHIV within 6 months from diagnosis									
	Activity 1:	Procurement of CD4 reagents	Health Products - Non Pharma	ART enrollment	55,376	P 55,376,300.00	P 75,513,600.00	P 101,287,800.00	232,177,700.00
Indicator 3.4: Percentage of PLHIV alive and retained on ART (12 and 24 months)									
	Activity 1:	Ensure quality management systems in treatment hubs							
		- Meeting with ISO Audit Team	Travel Related Cost		15	P 172,800.00	P 172,800.00	P 172,800.00	518,400.00
		- Conduct of ISO Audit at Treatment Hubs	Travel Related Cost		3	P 82,140.00	P 82,140.00	P 82,140.00	246,420.00

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	P 41,340,000.00	P 41,340,000.00	P 41,340,000.00	124,020,000.00
		- Conduct of Regional Meeting on Feedback of Audit findings	Travel Related Cost		30	P 115,200.00	P 115,200.00	P 115,200.00	345,600.00
		- Conduct of National Meeting on Feedback of Audit Findings	Travel Related Cost		30	P 24,000.00	P 24,000.00	P 24,000.00	72,000.00
		- Monitoring of Non-ISO Treatment Hubs using Treatment Hub Compliance Monitoring Tool by Regional Offices	Travel Related Cost		5	P 336,000.00	P 336,000.00	P 336,000.00	1,008,000.00
		- Monitoring of Treatment Hubs using Treatment Hub Compliance Monitoring Tool by Regional Offices	Travel Related Cost		16	P 10,368,000.00	P 10,368,000.00	P 10,368,000.00	31,104,000.00
	Activity 2:	Implement case management approach (facility-based / community based care agents)	Travel Related Cost		277	P 830,644.50	P 1,132,704.00	P 1,519,317.00	3,482,665.50
	Activity 3:	Provide augmentation staff through care agents to treatment hubs and CBOs to support	Human Resources	Total number of Treatment & Satellite Treatment Hub	277	P 49,838,670.00	P 67,962,240.00	P 91,159,020.00	208,959,930.00
		Training of Care Agents in the conduct of LGS	Human Resources		5	P 2,750,134.73	P 3,750,206.75	P 5,030,222.25	11,530,563.72
		Conduct of LGS in treatment hubs	Travel Related Cost	1 Care agents : 10 PLHIV per LGS	277	P 830,644.50	P 1,132,704.00	P 1,519,317.00	3,482,665.50
	Activity 4:	Provision of Tents for Treatment hubs with no adequate venue for LGS	Infrastructure	# of pax per LGS	60	P 1,200,000.00	P 1,600,000.00	P 2,000,000.00	4,800,000.00
	Activity 1:	Ensure quality management systems in treatment hubs							
		- Meeting with ISO Audit Team	Travel Related Cost		15	P 172,800.00	P 172,800.00	P 23,040.00	368,640.00
		- Conduct of ISO Audit at Treatment Hubs	Travel Related Cost		3	P 82,140.00	P 82,140.00	P 6,660.00	170,940.00
		- Monitoring of Non-ISO Treatment Hubs using Treatment Hub Compliance Monitoring Tool by Regional Offices	Travel Related Cost		5	P 336,000.00	P 336,000.00	P 56,000.00	728,000.00
	Activity 2:	Implement case management approach (facility-based / community based care agents)	Travel Related Cost		277	P 831,000.00	P 1,134,000.00	P 1,518,000.00	3,483,000.00
	Activity 3:	Provide augmentation staff through care agents to treatment hubs and CBOs to support	Human Resources	Total number of Treatment & Satellite Treatment Hub	277	P 49,860,000.00	P 68,040,000.00	P 91,080,000.00	208,980,000.00
		Training of Care Agents in the conduct of LGS	Human Resources		6	P 2,979,600.00	P 3,972,800.00	P 4,966,000.00	11,918,400.00
		Conduct of LGS in treatment hubs	Travel Related Cost	1 Care agents : 10 PLHIV per LGS	277	P 831,000.00	P 1,134,000.00	P 1,518,000.00	3,483,000.00
	Activity 4:	Provision of Tents for Treatment hubs with no adequate venue for LGS	Infrastructure	# of pax per LGS	60	P 1,200,000.00	P 1,600,000.00	P 2,000,000.00	4,800,000.00
Indicator 3.5: Percentage of PLHIV on ART who are lost to follow up									
	Activity 1:	Training of Treatment Hubs, satellite treatment hubs, and primary care clinics on adherence counseling	Human Resources	Health Service Providers	50 pax	P 919,240.00	P 919,240.00	P 919,240.00	2,757,720.00
	Activity #2:	Develop system to remind clients on the timely pick up of ARV	Travel Related Cost	# of stakeholders (NGOs, CBOs, Gas)	50 pax	P 349,666.67	P 349,666.67	P 349,666.67	1,049,000.00
		1. Meeting with the community (PLHIV)	Travel Related Cost	# of stakeholders (NGOs, CBOs, Gas)	30 pax	P 54,000.00	P 54,000.00	P 54,000.00	162,000.00
		3. Use of technology (SMS, emails, social media, phone apps)	Communication materials and publications	All treatment hubs and satellite centers	60	P 864,000.00	P 1,152,000.00	P 1,440,000.00	3,456,000.00
	Activity 3:	Integrate/Strengthen PLHIV peer approach in the provision of psychosocial services and support to adherence and partner disclosure in the treatment hub (GIPA - MIPA)							
		a) HIV treatment and literacy training including ARV adherence	Human Resources	# of Care Agents	7	P 2,720,550.00	P 5,052,450.00	P 6,560,917.25	14,333,917.25

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	P 41,340,000.00	P 41,340,000.00	P 41,340,000.00	124,020,000.00
		c) Psychosocial and Mental Health Support for PLHIV	Human Resources	# of Care Agents	9	P 3,497,850.00	P 5,052,450.00	P 6,560,917.25	15,111,217.25
		3 Conduct regular meeting among TH staff with partner CBOs with TCS Care Agents	Travel Related Cost	No. of Treatment Hubs	60	P 108,000.00	P 144,000.00	P 180,000.00	432,000.00
	Activity 4:	Provision of Enablers fund for Treatment Hub / Satellite Treatment Hub and Primary Care facilities Care Staff to support home visits for lost to follow up PLHIV	Living support to client	10% of PLHIV in treatment hub	1,126	P 4,503,600.00	P 5,474,520.00	P 6,615,000.00	16,593,120.00
	Activity 1:	Training of Treatment Hubs, satellite treatment hubs, and primary care clinics on adherence counseling	Human Resources	Health Service Providers	50 pax	P 919,240.00	P 919,240.00	P 551,544.00	2,390,024.00
	Activity #2:	Develop system to remind clients on the timely pick up of ARV	Travel Related Cost	# of stakeholders (NGOs, CBOs, Gas)	50 pax	P 349,666.67	P 349,666.67	P 209,800.00	909,133.33
		1. Meeting with the community (PLHIV)	Travel Related Cost	# of stakeholders (NGOs, CBOs, Gas)	30 pax	P 54,000.00	P 54,000.00	P 54,000.00	162,000.00
		3. Use of technology (SMS, emails, social media, phone apps)	Communication materials and publications	All treatment hubs and satellite centers	60	P 864,000.00	P 1,152,000.00	P 1,440,000.00	3,456,000.00
	Activity 3:	Integrate/Strengthen PLHIV peer approach in the provision of psychosocial services and support to adherence and partner disclosure in the treatment hub (GIPA - MIPA)							
		a) HIV treatment and literacy training including ARV adherence	Human Resources	# of Care Agents	9	P 3,497,850.00	P 5,052,450.00	P 6,607,050.00	15,157,350.00
		c) Psychosocial and Mental Health Support for PLHIV	Human Resources	# of Care Agents	9	P 3,497,850.00	P 5,052,450.00	P 6,607,050.00	15,157,350.00
		3 Conduct regular meeting among TH staff with partner CBOs with TCS Care Agents	Travel Related Cost	No. of Treatment Hubs	60	P 108,000.00	P 144,000.00	P 180,000.00	432,000.00
	Activity 4:	Provision of Enablers fund for Treatment Hub / Satellite Treatment Hub and Primary Care facilities Care Staff to support home visits for lost to follow up PLHIV	Living support to client	10% of PLHIV in treatment hub	1,126	P 4,503,600.00	P 5,474,520.00	P 6,615,000.00	16,593,120.00
Indicator 3.6: Percentage of PLHIV screened for TB during the last visit (within the reporting period)									
	Activity #1:	Collaboration with TB program	Travel Related Cost						
		TB Screening	Health Products - Non Pharma	estimated new HIV infection 2018: 70%	55,376.30	P 63,089,664.83	P 86,031,889.34	P 115,396,177.66	264,517,731.83
		Provision of support to transport specimen for GeneXpert	Procurement and SCM Costs	estimated new HIV infection 2018: 70%	15,140	P 6,056,000.00	P 7,203,600.00	P 8,667,600.00	21,927,200.00
	Activity #2:	Training on OI management including screening for OIs							
		a. Update and disseminate guidelines on management of Opportunistic Infections	Human Resources	16 regions to conduct training	16	P 384,000.00	P 384,000.00	P 384,000.00	1,152,000.00
	Activity # 3	Procurement of OI drugs other than for TB							
		Fluconazole 200mg, tablet or capsule	Health Products - Pharma	4 tabs x 50patients x 180 days	36,000	P 3,455,280.00	P 3,455,280.00	P 3,455,280.00	10,365,840.00
		Fluconazole 200mg, tablet or capsule	Health Products - Pharma	1 tabs x 800 patients x 7 days	5,600	P 537,488.00	P 537,488.00	P 537,488.00	1,612,464.00
		Amphotericin B	Health Products - Pharma		50 patient/s	P 2,100,000.00	P 2,100,000.00	P 2,100,000.00	6,300,000.00
		Clarithromycin 500 mg	Health Products - Pharma	2 times a day x 7 days	1126 patient/s	P 236,439.00	P 287,412.30	P 347,287.50	871,138.80
	Activity #1:	Collaboration with TB program	Travel Related Cost						
		TB Screening	Health Products - Non Pharma	estimated new HIV infection 2018: 70%	55,376.30	P 63,089,664.83	P 86,031,889.34	P 115,396,177.66	264,517,731.83

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	P 41,340,000.00	P 41,340,000.00	P 41,340,000.00	124,020,000.00
		Provision of support to transport specimen for GeneXpert	Procurement and SCM Costs	estimated new HIV infection 2018: 70%	15,140	P 6,056,000.00	P 7,203,600.00	P 8,667,600.00	21,927,200.00
	Activity #2:	Training on OI management including screening for OIs							
		a. Update and disseminate guidelines on management of Opportunistic Infections	Human Resources	16 regions to conduct training	16	P 384,000.00	P 384,000.00	P 384,000.00	1,152,000.00
		Procurement of valgancyclovir (induction)	Health Products - Pharma	50 patients per year x 84 tabs	4200 tab/s	P 51,397,500.00	P 51,397,500.00	P 51,397,500.00	154,192,500.00
		Procurement of Ganciclovir: Intravitreal Injection: 0.1 cc/injection (1 vial=10ml)	Health Products - Pharma		100	P 376,194.00	P 376,194.00	P 376,194.00	1,128,582.00
		Procurement of valgancyclovir (maintenance)	Health Products - Pharma	50 patients x 2 tabs x 6 mos	600 tab/s	P 7,342,500.00	P 7,342,500.00	P 7,342,500.00	22,027,500.00
		Fluconazole 200mg, tablet or capsule	Health Products - Pharma	4 tabs x 50patients x 180 days	36,000	P 3,455,280.00	P 3,455,280.00	P 3,455,280.00	10,365,840.00
		Fluconazole 200mg, tablet or capsule	Health Products - Pharma	1 tabs x 800 patients x 7 days	5,600	P 537,488.00	P 537,488.00	P 537,488.00	1,612,464.00
		Amphotericin B	Health Products - Pharma		50 patient/s	P 2,100,000.00	P 2,100,000.00	P 2,100,000.00	6,300,000.00
Indicator 3.7: Percentage of PLHIV with incident TB									
		Diagnosis of TB among PLHIV	Health Products - Non Pharma		13435 patient/s	P 15,306,361.15	P 86,031,889.34	P 115,396,177.66	216,734,428.15
Indicator 3.8: Percentage of PLHIV with incident TB who received treatment for both TB and HIV									
		TB treatment	Health Products - Pharma	Assumption: 30% PLHIV will need TB treatment yearly	16,613	P 59,806,404.00	P 81,554,688.00	P 109,390,824.00	250,751,916.00
Indicator 3.9: Percentage of PLHIV with no active TB started on Isoniazid Preventive Therapy (IPT)									
	Activity #6:	Procurement of INH for IPT	Health Products - Pharma	60% of New PLHIV	33226	P 6,179,995.08	P 8,427,317.76	P 11,303,718.48	25,911,031.32
		IPT package:	Health Products - Pharma	40% PLHIV will need IPT yearly	22,151	P 3,987,093.60	P 5,436,979.20	P 5,436,979.20	14,861,052.00
Indicator 3.10: Percentage of HIV+ pregnant women on ART									
	Activity 2:	Development of IEC materials specific for HIV positive women on PMTCT	Human Resources	# of stakeholders (NGOs, CBOs, Gas)	50 pax	P 349,666.67	P -	P -	349,666.67
		Development of Policy and MOP on the role of CBOs in mother and child ARV access	External Professional Services			P 792,000.00			792,000.00
		Training of CBO on mother and child ARV access	Human Resources		1	P 493,110.00	P 493,110.00	P 493,110.00	1,479,330.00
		Provision of enablers fund to support access to services of HIV+ pregnant on ART	Living support to client		449	P 2,245,000.00	P 2,470,000.00	P 2,640,000.00	7,355,000.00
Indicator 3.11: Percentage of newborns of HIV+ women given ARV prophylaxis									
		Provision of enablers fund to support access to ARV prophylaxis of newborns of HIV+ women	Living support to client		449	P 2,245,000.00	P 2,470,000.00	P 2,640,000.00	7,355,000.00
Indicator 3.12: Percentage of infants born to HIV+ women tested for HIV within 2 months of birth									
		-Cobas Taqman HIV 1 Test (manual extraction)	Health Products - Non Pharma	2016 estimates	449	P 2,694,000.00	P 2,964,000.00	P 3,168,000.00	8,826,000.00
		- Hight pure viral nucleic acid kit	Health Products - Non Pharma	2016 estimates	449	P 449,000.00	P 494,000.00	P 528,000.00	1,471,000.00
		Conduct of TWG monitoring on cases of HIV-exposed infants diagnosed with HIV	Travel Related Cost		1	P 43,200.00	P 43,200.00	P 43,200.00	129,600.00
Indicator 3.13: Percentage of HIV-exposed infants born in the past 12 months who are infected with HIV									
		Conduct of TWG monitoring on cases of HIV-exposed infants diagnosed with HIV	Travel Related Cost		1	P 43,200.00	P 43,200.00	P 43,200.00	129,600.00
		Provision of ART to infants infected with HIV	Health Products - Pharma						
Indicator 4.1 Number of facilities that provide HIV testing per City									
Indicator 4.2. Percentage of HIV testing facilities that participate in EQAS									
	Activity # 1	Participation of HIV testing facilities in EQAS	Program administration costs		2	Php900,000.00	Php900,000.00	Php900,000.00	2,700,000.00

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	₱ 41,340,000.00	₱ 41,340,000.00	₱ 41,340,000.00	124,020,000.00
	Activity # 2	Monitoring and supervision of testing facilities	Travel Related Cost		4	Php2,515,200.00	Php2,515,200.00	Php2,515,200.00	7,545,600.00
Indicator 4.3. Number of treatment hubs, satellite treatment and Primary Care									
Indicator 4.4 Percentage of cities and municipalities with Social Hygiene Clinics or STI clinics									
	Activity # 1	Advocacy to LGU to set up additional SHCs/STI clinics	Travel Related Cost		3	Php72,000.00	Php72,000.00	Php72,000.00	216,000.00
	Activity # 2	Capacity building of service provider (MD, RN, RMT)	Human Resources		2	Php476,400.00	Php476,400.00	Php476,400.00	1,429,200.00
Indicator 4.5 Percentage of treatment hubs and Satellite Treatment Hubs with access to CD4 testing									
	Activity # 1	Monitoring of treatment hubs and Satelline treatment Hubs	Travel Related Cost		4	Php603,840.00	Php603,840.00	Php603,840.00	1,811,520.00
Indicator 4.6 Percentage of HIV testing facilities with HIV proficient Med Tech									
	Activity # 1	Conduct of HIV Proficiency Training for Med Tech (Full Course)	Human Resources		10	₱ 3,600,000.00	₱ 3,600,000.00	Php3,600,000.00	10,800,000.00
Indicator 4.7 Percentage of HIV testing facilities with staff trained on HIV Testing Service									
	Activity # 1	Capacity building on HTS	Human Resources		2	Php476,400.00	Php476,400.00	Php476,400.00	1,429,200.00
	Activity # 2	Monitoring of testing facilities	Travel Related Cost		4	Php3,772,800.00	Php3,772,800.00	Php3,772,800.00	11,318,400.00
Indicator 4.8 Percentage of Social Hygiene Clinics with trained Community Health Worker (CHOWs) in Cat A and B sites									
	Activity # 1	Capacity building of CHOW	Human Resources		2	Php476,400.00	Php476,400.00	Php476,400.00	1,429,200.00
Indicator 4.9 Percentage of hospitals with trained and functioning HIV AIDS Core Team									
	Activity # 1	Capacity building of HACT	Human Resources		2	Php476,400.00	Php476,400.00	Php476,400.00	1,429,200.00
	Activity # 2	Monitoring of hospitals	Travel Related Cost		4	Php2,515,200.00	Php2,515,200.00	Php2,515,200.00	7,545,600.00
Indicator 4.11 Percentage of treatment hubs and satellite treatment hubs with ARV stock out Indicator									
	Activity # 1	Monitoring of stock outs (inventory and requisition tool)	Travel Related Cost		4	Php71,040.00	Php71,040.00	Php71,040.00	213,120.00
Indicator 4.10 Percentage of SHCs with stock-out or expiry of HIV test kits within 3 months 4.11 Percentage of SHCs with stock-out or expiry of condoms within 3 months 4.12 Percentage of SHCs with stock-out or expiry of lubricants within 3 m									
	Activity # 1	Monitoring of stock outs (inventory and requisition tool)	Travel Related Cost		4	Php71,040.00	Php71,040.00	Php71,040.00	213,120.00
	Activity # 2	Capacity building on Inventory Supply Inventory Management	Human Resources		1	Php928,980.00	Php928,980.00	Php928,980.00	2,786,940.00
Strategy 2: Reduce out of pocket expenses of PLHIV									
Indicator 4.14 Percentage of treatment hubs that received OHAT package reimbursement Indicator 4.15 Percentage of PLHIV on ART who avail OHAT package Indicator 4.16 Percentage of PLHIV on ART in Treatment Hubs enrolled on PHIC									
	Activity # 1	Monitoring of treatment hubs and Satelline Treatment Hubs on OHAT utilization c/o PHIC	Communication materials and publications		3	Php2,829,600.00	Php2,829,600.00	Php2,829,600.00	8,488,800.00
	Activity # 2	Coordination with PHIC c/o DOH	Travel Related Cost					Php0.00	
Strategy 3: Improve health information and surveillance system									
Indicator 4.17 Percentage of HIV testing facilities and blood banks reporting to the HIV Laboratory Surveillance									
	Activity # 1	Monitoring of HIV testing facilities and blood banks	Travel Related Cost		51	Php48,103,200.00	Php48,103,200.00	Php48,103,200.00	144,309,600.00
Indicator 4.18 Percentage of SHC reporting using the Social Hygiene Clinic Reporting									
	Activity # 1	Monitoring of SHC Reporting system	Travel Related Cost		117	Php3,580,200.00	Php3,580,200.00	Php3,580,200.00	10,740,600.00
	Activity	Implementation of Social Hygiene Clinic Reporting System							

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		> Updating and maintenance of SHC reporting system	Travel Related Cost		1	Php500,000.00			500,000.00
		b) Roll out of SHC reporting system	Travel Related Cost		1	Php0.00			
		> Procurement of computers for SHC reporting system	Travel Related Cost		1	Php1,550,000.00			1,550,000.00
		> Maintenance of internet connection SHC reporting system	Communication materials and publications		1	Php63,000.00	Php1,134,000.00	Php1,827,000.00	3,024,000.00
		> Training of SHC on SHC reporting system	Human Resources		1	P 32,000.00	P 32,000.00	Php32,000.00	96,000.00
Indicator 4.19 Percentage of HIV testing facilities submitting HARP Form A to DOH									
	Activity # 1	Monitoring of HIV testing facilities and blood banks	Communication materials and publications		1124	Php34,394,400.00	Php34,394,400.00	Php34,394,400.00	103,183,200.00
Indicator 4.20 Percentage of treatment hub and satellite treatment HARP Forms to the DOH									
	Activity # 1	Monitoring of treatment hubs and satellite treatment hubs	Communication materials and publications		51	Php1,560,600.00	Php1,560,600.00	Php1,560,600.00	4,681,800.00
Indicator 4.21 Percentage of Regional Offices that conducted HIV impact activities									
	Activity # 1	Monitoring of HIV impact activities	Communication materials and publications		80	Php2,448,000.00	Php2,448,000.00	Php2,448,000.00	7,344,000.00
Number of testing facilities, treatment hub and satellite treatment hub used eHARP system									
		Implementation of e-HARP							
		> Updating and maintenance of e-HARP software	External Professional Services		1	P 500,000.00			500,000.00
		b) Roll out of e-HARP	Travel Related Cost		1	Php0.00			
		> Procurement of computers for treatment hubs	Non-health equipment		1	Php1,550,000.00			1,550,000.00
		> Maintenance of internet connection per treatment hub	Communication materials and publications		1	Php129,500.00			129,500.00
		> Training of treatment hub staff on e-HARP	Human Resources		1	P 32,000.00	P 32,000.00	P 32,000.00	96,000.00
		c) Evaluation of e-HARP system	Travel Related Cost			Php0.00			
		> Hiring of Consultant to evaluate e-HARP system for 3 months	External Professional Services		1	P 792,000.00			792,000.00
		> Desk Review and Workshop to Evaluate the e-HARP system	External Professional Services		1	P 642,500.00			642,500.00
BCC and Communication Plan (Quad media)									
		Development, implementation and Monitoring	Communication materials and publications		1	Php28,200,000.00	Php28,200,000.00	Php28,200,000.00	84,600,000.00
		Stigma and discrimination reduction							
		Proxy consent for YKAP							

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

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		Community mobilization and sensitization on HIV-related stigma and discrimination							
		Public engagement of people living with HIV and HIV/TB, religious and community leaders and celebrities							
		Inclusion of anti-discrimination programs and policies in work, health and education settings							
		Rollout of HIV Stigma Index							
		Expansion and promotion of "Aid for AIDS"							
		Sensitization of lawmakers and law enforcement agents Information and sensitization programs for parliamentarians, ministries of justice, judges, prosecutors, police and traditional and religious leaders on legal, health and human rights aspects of HIV and HIV/TB and on violence prevention, including intimate-partner violence and their relation to HIV							
		Improving laws, regulations and policies relating to HIV and HIV/TB							
		Documenting violence and other human rights violations;							
		Facilitation of discussions among service providers and law enforcement to gain police support for health programs HIV and HIV/TB in the Workplace programs for law-makers and enforcers							
		Training of prison personnel on public health, human rights and HIV and HIV/TB responses							
		Social re-integration (IDUcare model)							
		Policy, planning, coordination and management of national disease control programs							
		1. Oversight, technical assistance and supervision from national to subnational levels							
		2. Human resource planning/ staffing and training (linked to the national human resources for health plan) and other human resources for health costs related to the strengthening of national disease plans and programs							
		3. Coordination with district and local authorities							
		4. Quarterly meetings							
		5. Office/IT equipment							

HIV Prevention and Control Operational Plan 2018 - 2020 Indicative Cost

	Activity 2	Outreach activities by CHOW for MSM & TG	Travel Related Cost	530CHOW x 90 MSM per qtr x 4 times a year (Yr 1=90; Yr 2-100; Yr 3 120) 530CHOW*90KP*4quarter	12	₱ 41,340,000.00	₱ 41,340,000.00	₱ 41,340,000.00	124,020,000.00
		6. Partnering process, including advocacy and public awareness and communication carried out by partners and the national program							
		7. Mobilizing leaders to support implementation and sustainability of the program, etc							
		8. Cross-sector policy and planning (for example on social determinants and protection related to justice, housing, labor, poverty and social welfare) and involvement of key populations in planning							
		Activities related to the development of national health sector strategic plans and the alignment with the disease-specific plans should be included under RSSH module "Strengthen national health strategies, and links to disease-specific plans".							
Human Resource Complement									
		EB	Human Resources			Php4,384,800.00	Php4,384,800.00	Php4,384,800.00	13,154,400.00
		EB	Human Resources			Php19,656,000.00	Php19,656,000.00	Php19,656,000.00	58,968,000.00
		NASPCP Staff	Human Resources			Php780,000.00	Php780,000.00	Php780,000.00	2,340,000.00
		Augmentation staff for NASCP & EB	Human Resources			Php5,616,000.00	Php5,616,000.00	Php5,616,000.00	16,848,000.00
GRAND TOTAL INDICATIVE BUDGET						₱ 4,358,223,523.61	₱ 4,953,394,052.60	₱ 6,567,638,295.18	₱ 15,879,255,871.39