#: 843

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Exhibit A

Case 1:25-cv-00039-JJM-PAS

Document 66-1 #: 844

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF RHODE ISLAND

STATE OF NEW YORK, et al.,

Plaintiffs,

v.

Civil Action No. 1:25-cv-00039-JJM

DECLARATION OF MAYA BEAL

DONALD TRUMP, et al.,

Defendants.

Declaration of Maya Beal

I, Maya Beal, declare as follows:

1. I am over the age of 18, competent to testify as to the matters herein, and make this declaration based on my personal knowledge.

2. I am the Director of Finance and Operations for the International Training and Education Center for Health (I-TECH) at the University of Washington. The Director of Finance and Operations provides direction and leadership for I-TECH's worldwide financial reporting and accountability, operations and award management. This position ensures all I-TECH systems follow standards established by the State Office of Financial Management, the Financial Accounting Standards Board, the Office of Management and Budget, and various funding sources (federal and private).

3. I-TECH is a center in the University of Washington's Department of Global Health within the School of Public Health and School of Medicine. I-TECH has activities in more than 25 countries and is committed to building long-term capacity through health systems strengthening; human resources for health; and targeted, data-driven interventions and research that are responsive to local needs. Our unique approach to sustainability and capacity building, through training and technical assistance, creates a strong foundation for contextually appropriate

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health programs. Our programs effectively tackle emerging health threats and address national health priorities to achieve high quality, compassionate, and equitable health care. I-TECH partners with country governments, universities, non-governmental organizations, civil society partners, and funders to design and implement locally relevant health programs within existing local systems and processes. I-TECH has led or supported programs in more than 30 countries in Africa, South America, Asia, Eastern Europe, and the Caribbean.

4. Since its founding in 2002, I-TECH's accomplishments are numerous and vital to the communities it serves. Between 2017 and 2023, I-TECH supported over 1,000 health care facilities and 120 laboratories. During this period, I-TECH supported 250,000 people being initiated on ART, more than 660,000 men circumcised, 5.3 million people tested for HIV, and more than 340,000 women tested for cervical cancer.

5. Moreover, I-TECH has created more than 400 training programs and products that have been adopted by ministries of health in Africa, Asia, and the Caribbean Region. I-TECH has trained more than 400,000 health care workers. I-TECH has also led national pre-service curriculum reform in five countries and led faculty development efforts to strengthen delivery of competency-based courses.

6. As a long-time U.S. President's Emergency Plan for AIDS Relief (PEPFAR) implementing partner, I-TECH has administered projects sponsored by the U.S. Centers for Disease Control and Prevention (CDC), the U.S. Health Resources and Services Administration (HRSA), the U.S. Department of Defense, the National Institutes of Health (NIH), and U.S. Agency for International Development (USAID). The majority of I-TECH's grants originate from PEPFAR and are awarded and administered by HRSA and CDC.

7. On September 9, 2024, HRSA awarded I-TECH a grant (FAIN # U9106801) that obligated \$8,129,869 for "Capacity Building for Sustainable HIV Services." The objective of this grant was to "[i]mprove health outcomes for PLHIV along the HIV care continuum by building sustainable health systems, including a global workforce with the right skills, mix and distribution to respond to HIV and other population health priorities." A true and correct copy of this September 9, 2024, Notice of Award, with a budget period between September 30, 2024, and September 29, 2025, is attached hereto as **Exhibit A**. As of January 22, 2025, UW has spent approximately \$2,442,036 of the \$8,129,869 obligated under this grant.

8. On September 10, 2024, HRSA awarded I-TECH a grant (FAIN # U1N45176) that obligated \$380,862 for "Quality Improvement Solutions for Sustained Epidemic Control Project." The objective of this grant was to further "[q]uality [i]mprovement for improved HIV services" in the Democratic Republic of Congo, including "[d]elivery of training and mentoring services by quality improvement coaches" and "[n]ational level support to DRC Ministry of Health for an improved HIV services framework." A true and correct copy of this September 10, 2024, Notice of Award, with a budget period between September 30, 2024, and September 29, 2025, is attached hereto as **Exhibit B**. As of January 22, 2025, UW has spent approximately \$200,207 of the \$380,862 obligated under this grant.

9. I-TECH also has received a significant number of grants from the CDC. The CDC has already awarded fourteen (14) PEPFAR grants to I-TECH as a prime recipient and sub-recipient, running to 2026-2028, obligating approximately \$12,733,706 in federal funds for various projects, including strengthening health services in clinics and other critical public health infrastructure in Namibia, Malawi, and Mozambique. As of January 22, 2025, I-TECH has spent at least \$3,942,071 pursuant to these CDC grants.

10. On January 27, 2025, I-TECH received from HRSA two stop-work orders for both its "Capacity Building" and "Quality Improvement" grants. These stop-work orders, which both took the form of subsequent "Notice[s] of Award," contained identical boilerplate language, stating that because of the "President's Executive Order on Reevaluating and Realigning United States Foreign Aid," UW and I-TECH must "immediately cease all activities on this award, which includes activities conducted under subawards and contracts." They directed that "[a]ctivities are suspended until further notice" and "further activities" would be subject to "additional guidance and the future availability of funds." Additionally, they directed that "[n]o additional costs may be incurred, however any costs incurred prior to January 24, 2025, may be allowable for payment." Finally, the stop-work orders did not give any additional reason for their cessation of payment obligations, but did make clear that "[t]his action is not subject to appeal." True and correct copies of these January 27, 2025, stop-work orders are attached hereto as **Exhibits C and D**.

11. On January 29, 2025, UW and I-TECH also received additional stop-work orders for its four prime awards funded by CDC grants under PEPFAR: (1) the \$965,932 grant for "Advancing Sustainable Implementation of Comprehensive HIV/TB Services for Epidemic Control in the Republic of Mozambique" (FAIN # NU2GGH002374); (2) the \$2,250,000 grant for "Human Resources for Health (HRH) to Achieve and Sustain HIV/TB Epidemic Control in Malawi" FAIN # NU2GGH002298); (3) the \$2,899,149 grant for "HIV Surveillance for Epidemic Control in Malawi" (FAIN # NU2GGH002423); and (4) the \$3,960,457 grant for "Namibia Mechanism for Public Health Assistance, Capacity, and Technical Support" (FAIN # NU2GGH002242). Each stop work order contained the same boilerplate language as the HRSA stop-work orders explaining that "in accordance with the President's Executive Order on Reevaluating and Realigning United States Foreign Aid," UW and I-TECH must "immediately cease all activities on this award, which includes activities under subawards and contracts. Activities are suspended until further notice. Further activities will be subject to additional guidance and the future availability of funds." The CDC stop-work orders further repeated the same directive from the HRSA stop-work orders that "[t]he grant funds on this award are restricted until further notice. No additional costs may be incurred. Any costs incurred prior to January 24, 2025, may be allowable for payment." True and correct copies of these four January 29, 2025, CDC stop-work orders are attached hereto as Exhibits E, F, G, and H.

12. On January 31, 2025, the Rhode Island District Court issued a temporary restraining order (TRO) prohibiting the federal financial assistance freeze against federal agencies, including CDC and HRSA.

13. On February 1, 2025, the CDC loaded a Notice of Court Order to our grant files in GrantSolutions. A true and correct copy of this Notice is attached hereto as **Exhibit I**. This Notice promised "federal agencies could not pause, freeze, impede, block, cancel, or terminate any awards

or obligations on the basis of the OMB Memo, or on the basis of the President's recently issued Executive Orders." Based on this Notice, I-TECH resumed its award activities.

14. On February 5, 2025, all I-TECH CDC PEPFAR prime grantees received Notices of Award, continuing to partially implement the President's Executive Order, *Reevaluating and Realigning United States Foreign Aid*. A true and correct copy of this notice is attached hereto as **Exhibit J**. It provided a "Limited Waiver to the Pause of U.S. Foreign Assistance for Life-Saving HIV Service Provision." This limited waiver does not cover "non-life saving assistance" including prevention of HIV transmission, outside of mother-to-child. For activities that fall under the waiver, CDC requires the University of Washington to use the manual payment method. This method adds a burden not contemplated by the terms and conditions of the cooperative agreements entered by I-TECH. This waiver, although facially is meant to cover life-saving services, does not necessarily effectuate its intent. For example, for one CDC program, I-TECH will need to lay off and pay severance for the employees that provide non-covered services. These closeout costs will likely exceed the funds that have been obligated, thus negating I-TECH's ability to continue to both provide life-saving care that falls under the waiver and adhere with labor regulations and the close out processes required under federal funding regulations.

15. On February 6, 2025, all HRSA I-TECH grantees received an email, continuing to partially implement the President's Executive Order, *Reevaluating and Realigning United States Foreign Aid*, and notifying grantees of a "Limited Waiver to the Pause of U.S. Foreign Assistance for Life-Saving HIV Service Provision." A true and correct copy of this email is attached hereto as **Exhibit K**. This limited waiver does not cover "non-life saving assistance" including prevention of HIV transmission, outside of mother-to-child. As a result, I-TECH will need to shut down one HRSA funded program entirely.

16. I-TECH staff and faculty were shocked and surprised to receive these stop-work orders, which appeared to conflict with the TRO.

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I declare under penalty of perjury under the laws of the State of Washington and the United

States of America that the foregoing is true and correct.

Executed this 7th day of February 2025, at Seattle, Washington.

MAY'A BEAL

Director of Finance and Operations I-TECH

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Exhibit A

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Department of Health and Human Services Health Resources and Services Administration

Notice of Award FAIN# U9106801 Federal Award Date: 09/09/2024

Recipient Information	Federal Award Information	
1. Recipient Name University of Washington Division Line: Office of Sponsored Programs PO BOX 359472 Seattle, WA 98104	 11. Award Number 5 U91HA06801-19-00 12. Unique Federal Award Identification Number (FAIN) U9106801 	
2. Congressional District of Recipient 07	13. Statutory Authority 42 USC § 242; §300ff-111 and 22 U.S.C. § 7601, et seq.	
3. Payment System Identifier (ID) 1916001537A1	14. Federal Award Project Title Capacity Building for Sustainable HIV Services	
4. Employer Identification Number (EIN) 916001537	15. Assistance Listing Number 93.266	
5. Data Universal Numbering System (DUNS) 605799469	16. Assistance Listing Program Title HIV Demonstration, Research, Public and Professional Education Project	ts
6. Recipient's Unique Entity Identifier HD1WMN6945W6	17. Award Action Type Noncompeting Continuation	
7. Project Director or Principal Investigator Lydia Chwastiak Principal Investigator	18. Is the Award R&D? Yes	
	Summary Federal Award Financial Infor	mation
8. Authorized Official	19. Budget Period Start Date 09/30/2024 - End Date 09/29/2025	
Carol Rhodes Director	20. Total Amount of Federal Funds Obligated by this Action	\$8,129,869.00
Director	20a. Direct Cost Amount	
	20b. Indirect Cost Amount	\$0.00
Federal Agency Information	21. Authorized Carryover	\$0.00
9. Awarding Agency Contact Information	22. Offset	\$0.00
Marie E Mehaffey	23. Total Amount of Federal Funds Obligated this budget period	\$8,129,869.00
Grants Management Specialist	24. Total Approved Cost Sharing or Matching, where applicable	\$0.00
Office of Federal Assistance Management (OFAM) Division of Grants Management Office (DGMO)	25. Total Federal and Non-Federal Approved this Budget Period	\$8,129,869.00
	26. Project Period Start Date 09/30/2021 - End Date 09/29/2026	<i>\$6,125,665.66</i>
10. Program Official Contact Information Jaclyn Perlman	27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$43,178,513.0
Office of the Administrator (OA)	28. Authorized Treatment of Program Income Addition	
	29. Grants Management Officer – Signature Karen Mayo on 09/09/2024	
0. Remarks		

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Notice of Award Award Number: 5 U91HA06801-19-00 Federal Award Date: 09/09/2024

Office of the Administrator (OA)

31. APPROVED BUDGET: (Excludes Direct Assistance)	
[X] Grant Funds Only	
[] Total project costs including grant funds and all other financia	l participation
a. Salaries and Wages:	\$0.00
b. Fringe Benefits:	\$0.00
c. Total Personnel Costs:	\$0.00
d. Consultant Costs:	\$0.00
e. Equipment:	\$0.00
f. Supplies:	\$0.00
g. Travel:	\$0.00
h. Construction/Alteration and Renovation:	\$0.00
i. Other:	\$0.00
j. Consortium/Contractual Costs:	\$0.00
k. Trainee Related Expenses:	\$0.00
I. Trainee Stipends:	\$0.00
m. Trainee Tuition and Fees:	\$0.00
n. Trainee Travel:	\$0.00
o. TOTAL DIRECT COSTS:	\$8,129,869.00
p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00
i. Indirect Cost Federal Share:	\$0.00
ii. Indirect Cost Non-Federal Share:	\$0.00
q. TOTAL APPROVED BUDGET:	\$8,129,869.00
i. Less Non-Federal Share:	\$0.00
ii. Federal Share:	\$8,129,869.00
32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:	
a. Authorized Financial Assistance This Period	\$8,129,869.00
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	\$0.00
ii. Offset	\$0.00
c. Unawarded Balance of Current Year's Funds	\$0.00
d. Less Cumulative Prior Award(s) This Budget Period	\$0.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$8,129,869.00

YEAR	TOTAL COSTS					
20 \$49,771,195.00						
34. APPROVED DIRECT	ASSISTANCE BUDGET: (In lieu of cash)					
a. Amount of Direct A	ssistance	\$0.0				
b. Less Unawarded Balance of Current Year's Funds \$0.0						
c. Less Cumulative Prior Award(s) This Budget Period \$0						
d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION \$0.00						
35. FORMER GRANT N	UMBER					
36. OBJECT CLASS						
41.21	41.21					
37. BHCMIS#						

38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:

a. The program authorizing statue and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.

39. ACCOUNTING CLASSIFICATION CODES

FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
24 - 3112312	93.266	21U91HA06801	\$688,887.00	\$0.00	N/A	21U91HA06801
24 - 3116957	93.266	21U91HA06801	\$418,456.00	\$0.00	N/A	21U91HA06801
24 - 3112315	93.266	21U91HA06801	\$640,861.00	\$0.00	N/A	21U91HA06801
24 - 3116958	93.266	21U91HA06801	\$1,322,212.00	\$0.00	N/A	21U91HA06801
24 - 3112303	93.266	21U91HA06801	\$745,223.00	\$0.00	N/A	21U91HA06801

NOTICE OF AWARD (Continuation Sheet) Case 1:25-CV-00039-JJM-PAS

Document 66-1 #: 853

6-1 Filed 02/07/25

Date Issued: 9/9/2024 3:10:14 PM Awar Number: 5 991 HA00301-19-00

			#. 895			
24 - 3116961	93.266	21U91HA06801	\$1,343,696.00	\$0.00	N/A	21U91HA06801
24 - 3112304	93.266	21U91HA06801	\$101,393.00	\$0.00	N/A	21U91HA06801
24 - 3116963	93.266	21U91HA06801	\$118,622.00	\$0.00	N/A	21U91HA06801
24 - 3112305	93.266	21U91HA06801	\$579,940.00	\$0.00	N/A	21U91HA06801
24 - 3116965	93.266	21U91HA06801	\$750,564.00	\$0.00	N/A	21U91HA06801
24 - 3113001	93.266	21U91HA06801	\$1,420,015.00	\$0.00	N/A	21U91HA06801

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e.,created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit

https://grants3.hrsa.gov/2010/WebEPSExternal/Interface/common/accesscontrol/login.aspx to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Condition(s)

1. Due Date: Within 30 Days of Award Issue Date

After consultation with your federal Project Officer (PO), submit the following documents for each country and year: 1) a Line Item Budget, 2) a Budget Justification/Narrative, and 3) an Annual Work Plan

All documents should reflect the full Country Operation Plan (COP) or Regional Operation Plan (ROP) approved amounts. The budget justification/narrative must detail the costs of each line item within the PEPFAR object class category. Under Personnel, you must include the following for each employee supported by funds from this award: name of employee, base salary, % FTE on the grant and amount of Federal funds (wages and % of fringe benefits) to be paid for the budget year.

2. Due Date: Within 30 Days of Award Issue Date

Submit updated SF424A, consult with HRSA Project Officer as needed.

3. Due Date: Within 30 Days of Award Issue Date

The M&E plan will include expected outcomes and targets to be measured. It should show alignment with relevant National plans of host governments and include baseline information to be collected and proposed methods for project evaluations.

4. Due Date: Within 30 Days of Award Issue Date

The projected annual travel plan should include justification for travel, description of activities related to approved scope of work, and estimated costs.

Grant Specific Term(s)

- 1. 45 CFR Part 75 applies to all federal funds associated with the award. Part 75 has been effective since December 26, 2014. All references to prior OMB Circulars for the administrative and audit requirements and the cost principles that govern Federal monies associated with this award are superseded by the Uniform Guidance 2 CFR Part 200 as codified by HHS at 45 CFR Part 75.
- 2. This Notice of Award is issued based on HRSA's approval of the Non-Competing Continuation (NCC) Progress Report. All post-award requests, such as significant budget revisions or a change in scope, must be submitted as a Prior Approval action via the Electronic Handbooks (EHBs) and approved by HRSA prior to implementation. Grantees under "Expanded Authority," as noted in the Remarks section of the Notice of Award, have different prior approval requirements. See "Prior-Approval Requirements" in the DHHS Grants Policy Statement: https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf.
- 3. Consistent with numerous United Nations Security Council resolutions, including UNSCR 1267 (1999), UNSCR 1368 (2001), UNSCR 1373 (2001), UNSCR 1989 (2011), and UNSCR 2253 (2015) [https://www.un.org/sc/suborg/en/sanctions/un-sc-consolidated-list], both HRSA and the recipient are firmly committed to the international fight against terrorism, and in particular, against the financing of terrorism. Award funds may not be used, directly or indirectly, to provide support to individuals or entities associated with terrorism. In accordance with this policy, the recipient agrees to use reasonable efforts to ensure that none of the HRSA funds provided under this award are used to provide support to individuals or entities associated with terrorism, including those identified on the U.S. Department of Treasury Office of Foreign Assets Control Specially Designated Nationals List (https://www.treasury.gov/resource-center/sanctions/SDN-List/Pages/default.aspx). This provision must be included in all subagreements, including contracts and subawards, issued under this award.
- 4. The Project Officer is to be notified of any changes to the previously submitted quarterly travel plan, including estimated or actual travel costs that exceed 25% of the original estimates. This information will be submitted prior to the travel occurring and needs to be reviewed and approved by HRSA OGH.
- 5. The recipient must comply with all PEPFAR reporting as required in the annual Country Operational Plan (COP) guidance and Reporting Requirements. Please consult your Project Officer for additional information. PEPFAR Reporting includes, but not limited to:

- 1. PEPFAR Monitoring, Evaluation, and Reporting (MER) Indicator Report
- 2. Annual PEPFAR Financial Classifications (Expenditure Reporting)
- 3. Site Improvement Through Monitoring System (SIMS)
- 4. Annual Work plan narratives and budget narratives
- 5. Annual submissions of HRH Inventory
- 6. Annual submissions of the Digital Health Inventory
- 6. This award is issued as a Cooperative Agreement, a financial assistance mechanism in which substantial HRSA programmatic involvement and collaboration with the recipient is anticipated as necessary in order to successfully achieve the aims of this project. This involvement will include project officers, country points of contact, technical and evaluation specialists, and other HRSA team members. HRSA program involvement will include:

Provide consultation and technical assistance in planning, implementing, and evaluating program activities, including reviewing and providing comments, and recommendations for documents, curricula, program work plans, budgets, contracts, personnel (including consultants and contractors), evaluation/implementation, science studies/protocols, monitoring & evaluation (M&E) Plan, etc., prior to printing, dissemination or implementation. In addition, HRSA will provide guidance on updated PEPFAR priorities and alignment of activities and work plans.

• Facilitate the coordination and collaboration among program partners, such as the Bureau of Global Health Security and Diplomacy (GHSD), PEPFAR in-country interagency team, foreign governments, and international and other key stakeholders.

- Participate, as appropriate, in the planning and coordination of any meetings or workgroups to be conducted during the project period.
 Facilitate access to the expertise of HRSA personnel and other relevant resources to the project.
- Collect and analyze data relative to unmet need, special populations, other key health indicators, and emerging priorities or policy shifts to guide current/future strategic planning, developmental efforts, and work plan activities.
- Participate in the dissemination of project findings, best practices and lessons learned across the initiative.

The cooperative agreement recipient's responsibilities will include:

• Collaborate with HRSA, the interagency PEPFAR team and technical leads, and key stakeholders as applicable, to achieve program objectives of integration and sustainability of HIV and TB testing, care, and prevention interventions supported by PEPFAR into host country health systems through evaluation and technical assistance. • Provide ongoing consultation with HRSA and field teams as applicable, on program implementation, and inform HRSA in a timely manner of barriers encountered.

• Develop and execute a final M&E plan in consultation with HRSA and key stakeholders, including establishing a final list of indicators, baseline data and performance targets for each indicator. The M&E plan will be revised as appropriate on an ongoing basis.

• Participate in monitoring activities including but not limited to Site Improvement Monitoring System (SIMS) and comprehensive site visits.

• Provide information on program and project progress, results, findings, best practices, lessons learned, and financial data/expenditure updates as requested by HRSA. The format of these information requests can include, but are not limited to presentations, reports, summarized data, etc.

7. The purpose of the Capacity Building for Sustainable HIV Services program, funded under the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), is to enhance the quality, effectiveness, efficiency, patient-centeredness, safety, accessibility, equity, and sustainability of HIV clinical services and related non-clinical supports in identified countries with PEPFAR programs.

Program awardees are expected to focus on:

- comprehensive and client-centered service delivery;
- quality improvement to address gaps in performance and inequities;
- transitioning to local partners and integration of HIV services into primary health care;
- strengthening Human Resources for Health (HRH);
- interventions to address other determinants of health, such as behavioral health;

• data management, telemedicine and e-learning, and health informatics/system solutions to identify and track patients, monitor results and progress; and

• improving diagnosis, linkage, treatment, retention and viral suppression rates.

The program also provides direct technical assistance to Ministries of Health and regional and local government entities, and supports institutional capacity building.

8. The Skills Sharing Program (SSP) is a specialized capacity-building program between U.S. based HRSA-funded providers and U.S. President's Emergency Plan for AIDS Relief (PEPFAR) supported-clinical sites aimed at to strengthening HIV service delivery and patient outcomes. The program provides onsite support and on-going virtual technical assistance (TA) in key gap areas with a focus on improving retention and viral load suppression. SSP also supports Ministry of Health national level quality improvement collaborative by focusing on improving outcomes in continuity of care and viral load suppression through client-centered interventions based on successful HRSA domestic programs. All PEPFAR-funded countries are eligible for SSP.

Program awardees are expected to ensure the following:

- Collaborate with HRSA Program staff for successful development and implementation activities.

- Enroll HRSA provider consultants with demonstrated expertise in HIV clinical management, case management, and quality

improvement. Sub-agreements will be amended as needed.

- SSP includes 2-3 site visits to each participating country accompanied by on-going virtual support between visits and to strengthen the new learning and practice improvement networks.

- Collaborate in data driven performance assessment activities.

9. Below are the initial funding amounts and the CANs for the different countries. There is also the COP/HOP24 funding ceiling amounts listed. When putting together your budget, use the total COP/HOP ceiling amounts.

					TOTAL COP24
		Amount in			Funding Ceilings
		Initial Funding			(BOF will be
Country	Activity Code	Memo Total	CAN	Amount	received later)
India	U91	\$ 1,107,343	3112312	688,887	
india	651	Υ 1,107, 3 43	3116957	418,456	\$ 1,407,278
Jamaica	U91	\$ 1,963,073	3112315	640,861	
	091	\$ 1,903,073	3116958	1,322,212	\$ 2,955,349
Mozambique	1101	\$ 2,088,919	3112303	745,223	
wozanisique	U91 \$	Ş 2,000,919	3116961	1,343,696	\$ 4,164,871
Trinidad & Tobago	U91	\$ 220,015	3112304	101,393	
	091	Ş 220,013	3116963	118,622	\$ 302,235
Ukraine	U91	\$ 1,330,504	3112305	579,940	
Okraine	091	ə 1,550,504	3116965	750,564	\$ 2,733,662
SSP (HOP)	U91	\$ 1,420,015	3113001	1,420,015	\$ 1,420,015
TOTAL for COP/HOP24		\$8,129,869			\$ 12,983,410

- 10. Monthly conference calls or meetings are to be held between the PI/PD, other members of the project team, and the HRSA Project Officer (PO). Relevant staff from HRSA and country/PEPFAR interagency teams can participate in these calls as necessary.
- 11. An organization, including a faith-based organization, that is otherwise eligible to receive funds under this award for HIV/AIDS prevention, treatment, or care 1. Shall not be required, as a condition of receiving such assistance (a) To endorse or utilize a multi sectoral or comprehensive approach to combating HIV/AIDS; or (b) To endorse, utilize, make a referral to, become integrated with, or otherwise participate in any program or activity to which the organization has a religious or moral objection; and 2. Shall not be discriminated against in the solicitation or issuance of grants, contracts, or cooperative agreements for refusing to meet any requirement described in paragraph (a) above.
- 12. The recipient is accountable for the performance of the project, the appropriate expenditure of grant funds by all parties, and all other obligations of the recipient, as specified in the HHS Grants Policy Statement (GPS). In general, the requirements that apply to the recipient also apply to subrecipients. As part of the workplan submission for the Notice of Award, include a detailed line-item budget, budget narrative, and workplan for all subrecipients. The recipient is responsible for including the applicable requirements of the HHS GPS in its subaward agreements.
- 13. Per 45 CFR §75.351 353, recipients must monitor the activities of their subrecipients as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, PEPFAR legislative requirements, regulations, and the terms and conditions of the subaward; and that subaward performance goals are achieved. Recipients must ensure that subrecipients track, appropriately use, and report program income generated by the subaward. Recipients must also ensure that subrecipient expenditures adhere to legislative mandates regarding the distribution of funds.
- 14. In coordination with the PO and POC, schedule a quarterly expenditure review call and report for each COP/ROP country and/or HOP activity, to go over the previous quarter's spending. This call and report should align with the submission of the O&E (Obligation & Expenditure) report (30 days after the end of the fiscal year quarter). The partner will review their spending by cost category and program area. The information should include the following, but not limited to: total funds approved for the fiscal year by PEPFAR and communicated by HRSA, which align to the NOA cost category lines; total funds expended to date in the fiscal year (both previous quarters and current quarter), by cost category and program area; and total un-expended funds for the rest of the fiscal year, by cost category and program area.
- 15. The funds for this award are in a sub-account in the Payment Management System (PMS). This type of account allows recipients to specifically identify the individual grant for which they are drawing funds and will assist HRSA in monitoring the award. Access to the PMS account number is provided to individuals at the organization who have permissions established within PMS. The PMS sub-account code can be found on the HRSA specific section of the NoA (Accounting Classification Codes). Both the PMS account number and sub-account

code are needed when requesting grant funds. Please note that for new and competing continuation awards issued after 10/1/2020, the sub-account code will be the document number.

You may use your existing PMS username and password to check your organizations' account access. If you do not have access, complete a PMS Access Form (PMS/FFR Form) found at: https://pmsapp.psc.gov/pms/app/userrequest. If you have any questions about accessing PMS, contact the PMS Liaison Accountant as identified at: https://pms.psc.gov/find-pms-liaison-accountant.html

16. This is the approved list of ITECH's subcontractors for FY25:

Country	Subcontractor	Observations
India	UW ITECH India PLC	
Jamaica	Caribbean Training and Education	
and SSP	Center for Health (C-TECH	
Ukraine	Public Mission of Health	
	Ukrainian Center of Family	
Ukraine	Medicine	
SSP	Health Research, Inc	Jamaica and Ethiopia
SSP	Community Health Centers	Jamaica and Ethiopia
SSP	Louisiana State University	Jamaica if needed and possibly Ethiopia
SSP	Unconditional Love, Inc	Jamaica if needed and possibly Ethiopia
SSP	JHPIEGO	Ethiopia

- 17. Recipients must comply with the requirement that U.S. flag air carriers be used by recipients to the maximum extent possible when commercial air transportation is the means of travel between the United States and a foreign country or between foreign countries. This requirement must not be influenced by factors of cost, convenience, or personal travel preference. The cost of travel under a ticket issued by a U.S. flag air carrier that leases space on a foreign air carrier under a code-sharing agreement is allowable if the purchase is in accordance with GSA regulations on U.S. flag air carriers and code shares (see Fly America Act | GSA). Airfare and other transportation costs may not exceed coach or economy class fares, unless otherwise necessary to accommodate a medical disability or other special need. When use of other than coach-class is necessary to accommodate a medical disability or other special need, the disability must be certified annually (or more frequently as required by recipient organization) in a written statement by a competent medical authority. The costs associated with all travel are to be reasonable and are not to comprise a disproportionate amount of the overall country budget. The travel plans submitted to HRSA for review must note when a fare other than coach or economy will be utilized.
- 18. PEPFAR implementing partners are required to adhere to the following guidelines:

Responsiveness: ?PEPFAR guidance changes regularly and recipients are expected to consistently monitor, adapt, and align program activities to current PEPFAR guidance in collaboration with HRSA. The PEPFAR guidance is the primary guiding document and technical considerations for all PEPFAR-funded programs in the world. The annual Country/Regional Operational Plan Guidance defines the contours of interventions and expected impact. Activities are expected to be informed by and responsive to the PEPFAR Guidance 2023 Country and Regional Operational Plan Guidance and Technical Considerations - United States Department of State

Successful Implementation: When applicable, work as an implementing partner(s) with?HRSA-supported countries and regions. Demonstrate?capacity to quickly pivot in response to changing PEPFAR?requirements?on a quarterly and annual basis,?including related adjustments?due to?direct role of?in-country?staff?with key government and local civil society stakeholders.

Data Driven: Activities are appropriately monitored, data and performance driven; approaches and strategies that are implemented should seek to explore and introduce new and innovative solutions to achieve sustainable impact based on evidence and guidance.

HRSA and its US government agency partners shall have access to all aggregate-level data generated under this award and may periodically review the data for program management purposes. The US Government may elect, following consultation with recipients, to publish summary results from program activities to fulfill its responsibility to evaluate programs, report on results, and disseminate lessons learned. It is the responsibility of the Principal Investigator or Project Director (PI/PD) to submit to the HRSA Project Officer(s) upon request, data and reports generated by the recipient organization or any of its members required for cross-filing purposes. HRSA's PO will provide guidance and direction on the frequency and structure for this, and resources for this should be included in the recipient's annual program plan and budget.

Sustainability/Local Partner Transition: Demonstrate collaborative relationships with Ministries of Health?and other?key stakeholders?in HRSA-supported countries?and reflect careful consideration of eventual?transition?to host governments. Program objectives and activities successfully build, manage, leverage, and engage in various types of partnerships to ensure enduring programs, replicability, and sustainability.

Branding and Communications Guidance: All PEPFAR-funded programs or activities must adhere to PEPFAR branding guidance, which includes guidance on the use of the PEPFAR logo and/or written attribution to PEPFAR. PEPFAR branding guidance can be found at: PEPFAR-Branding-Guidance-Apr2022_FLAT.pdf (state.gov)

Consult your assigned Project Officer (PO) if you need additional guidance and for the HRSA logo. Materials developed and published through this grant must acknowledge PEPFAR, HRSA, and other agencies as applicable. All subcontractors and/or trainees supported through this award must also adhere to this publication requirement. Grantees are to acknowledge the funder's full or partial support of program activities in the following materials: journal articles, oral or poster presentations, news releases, and other communications. Alert your HRSA PO if you have a paper accepted for publication, if your institution is planning a news release or if you have other reasons to expect media coverage of your work, and for any events where you have been asked to present your work.

Standard Term(s)

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1. Your organization must have policies, procedures, and financial controls to follow all the General Terms and Conditions. HRSA awards are based on the application submitted and approved by HRSA. All awards are subject to the General Terms and Conditions, in addition to those included in the Notice of Award or referenced in documents and attachments.

Reporting Requirement(s)

1. Due Date: Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 90 days after end of reporting period.

The recipient must submit, within 90 days after budget period end date, an annual Federal Financial Report (FFR). The report should reflect cumulative reporting within the project period of the document number. All FFRs must be submitted through the Payment Management System (PMS). Technical questions regarding the FFR, including system access should be directed to the PMS Help Desk by submitting a ticket through the self-service web portal (PMS Self-Service Web Portal), or calling 877-614-5533.

2. Due Date: Within 90 Days of Project End Date

A final report is due within 90 days after the project period ends. The final report collects information relevant to program-specific goals and progress on strategies; core performance measurement data; impact of the overall project; the degree to which the recipient achieved the mission, goal and strategies outlined in the program; recipient objectives and accomplishments; barriers encountered; and responses to summary questions regarding the recipient's overall experiences during the entire project period.

3. Due Date: Quarterly (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 30 days after end of reporting period.

Through the EHBs O&E submission task, submit to HRSA a quarterly financial report within 30 days after the end of the USG's first fiscal year quarter (January 30th), and quarterly thereafter (April 30th, July 30th, and October 30th). This quarterly financial report must include an entry for each funding source and country or project combination and will contain:

- Total approved PEPFAR funds for the fiscal year,
- Total funds awarded/obligated to date by HRSA
- Total funds expended in previous quarters
- Total funds expended in the current quarter by the recipient

• In the Comments section, include details on activities and commitments that occurred during the quarter, but that the expenditures are not yet reflected due to delayed invoicing, etc. and explain any overspending and underspending.

4. Due Date: 04/30/2025

Grantees must submit a semi-annual progress report and expenditure report. Reports will document programmatic activities and financial expenditures related to program goals and objectives, noting accomplishments, barriers and any significant deviations from the workplan. The reports should also indicate staff changes, progress, and challenges faced during the reporting period and any impact to the planned COP/ROP activities.

5. Due Date: Quarterly (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 60 days after end of reporting period.

Submit a quarterly travel plan containing all domestic, regional and international travel supported by grant funds, including travel by subrecipients, etc. for the subsequent quarter. The travel plan must include justification for travel, description of activities related to approved scope of work, who is traveling and role of person(s) traveling, and estimated costs. If the travel plan has not changed from the original budget submission, or from the previous quarterly submission, you may respond to this request with a statement "no changes have occurred". Quarterly travel plan must be reviewed and approved by HRSA OGH prior to travel occurring.

Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.

Contacts

Filed 02/07/25

NoA Email Address(es):

Name	Role	Email
Carol Rhodes	Authorizing Official	
Lydia Chwastiak	Point of Contact, Program Director	
Misti Mcdowell	Business Official	
Misti R Mcdowell	Business Official	
Note: NoA emailed to these address(es)		

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (https://pms.psc.gov/).

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Exhibit B

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Department of Health and Human Services Health Resources and Services Administration

Notice of Award FAIN# U1N45176 Federal Award Date: 09/10/2024

Recipient Information	Federal Award Information	
1. Recipient Name UNIVERSITY OF WASHINGTON 4333 Brooklyn Ave BOX 359472 Seattle, WA 98195-0001	 11. Award Number 5 U1NOA45176-04-00 12. Unique Federal Award Identification Number (FAIN) 	
2. Congressional District of Recipient	U1N45176	
07	13. Statutory Authority	
3. Payment System Identifier (ID)	42 U.S.C. sections 241 (a) and 242l; 22 U.S.C. 7601, et seq	
1916001537A1	14. Federal Award Project Title	
4. Employer Identification Number (EIN)	Quality Improvement Solutions for Sustained Epidemic Control Project (QISSEC)
916001537	15. Assistance Listing Number	
5. Data Universal Numbering System (DUNS)	93.266	
605799469	16. Assistance Listing Program Title	
6. Recipient's Unique Entity Identifier	HIV Demonstration, Research, Public and Professional Education Project	'S
HD1WMN6945W6	17. Award Action Type	
7. Project Director or Principal Investigator	Noncompeting Continuation	
Ivonne x Butler	18. Is the Award R&D?	
	Yes	
8. Authorized Official		
Carol A Rhodes	Summary Federal Award Financial Infor	mation
Director, Office of Sponsored Programs	19. Budget Period Start Date 09/30/2024 - End Date 09/29/2025	
	20. Total Amount of Federal Funds Obligated by this Action	\$380,862.00
	20a. Direct Cost Amount	
Federal Agency Information	20b. Indirect Cost Amount	\$0.00
9. Awarding Agency Contact Information	21. Authorized Carryover	\$0.00
Olusola Dada Grants Management Specialist	22. Offset	\$0.00
Office of Federal Assistance Management (OFAM)	23. Total Amount of Federal Funds Obligated this budget period	\$380,862.00
Division of Grants Management Office (DGMO)	24. Total Approved Cost Sharing or Matching, where applicable	\$0.00
	25. Total Federal and Non-Federal Approved this Budget Period	\$380,862.00
10. Program Official Contact Information	26. Project Period Start Date 09/30/2021 - End Date 09/29/2026	
Jaclyn Perlman		
Office of the Administrator (OA)	27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$3,549,766.00
	28. Authorized Treatment of Program Income Addition	
	29. Grants Management Officer – Signature Karen Mayo on 09/10/2024	

30. Remarks

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Notice of Award Award Number: 5 U1NOA45176-04-00 Federal Award Date: 09/10/2024

Office of the Administrator (OA)

31. APPROVED BUDGET: (Excludes Direct Assistance)	
[X] Grant Funds Only	
[] Total project costs including grant funds and all other financial	participation
a. Salaries and Wages:	\$0.00
b. Fringe Benefits:	\$0.00
c. Total Personnel Costs:	\$0.00
d. Consultant Costs:	\$0.00
e. Equipment:	\$0.00
f. Supplies:	\$0.00
g. Travel:	\$0.00
h. Construction/Alteration and Renovation:	\$0.00
i. Other:	\$380,862.00
j. Consortium/Contractual Costs:	\$0.00
k. Trainee Related Expenses:	\$0.00
I. Trainee Stipends:	\$0.00
m. Trainee Tuition and Fees:	\$0.00
n. Trainee Travel:	\$0.00
o. TOTAL DIRECT COSTS:	\$380,862.00
p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$0.00
i. Indirect Cost Federal Share:	\$0.00
ii. Indirect Cost Non-Federal Share:	\$0.00
q. TOTAL APPROVED BUDGET:	\$380,862.00
i. Less Non-Federal Share:	\$0.00
ii. Federal Share:	\$380,862.00
32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:	
a. Authorized Financial Assistance This Period	\$380,862.00
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	\$0.00
ii. Offset	\$0.00
c. Unawarded Balance of Current Year's Funds	\$0.00
d. Less Cumulative Prior Award(s) This Budget Period	\$0.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$380,862.00

YEAR	TOTAL COSTS					
05	05 \$19,913,644.00					
34. APPROVED DI	RECT ASSISTANCE BUDGET: (In lieu of cash)					
a. Amount of Dire	ect Assistance	\$0.0				
b. Less Unawarded Balance of Current Year's Funds						
c. Less Cumulative Prior Award(s) This Budget Period						
d. AMOUNT OF D	d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION					
35. FORMER GRAM	NT NUMBER					
36. OBJECT CLASS						
41.45						
37. BHCMIS#						

38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:

a. The program authorizing statue and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.

39. ACCOUNTING CLASSIFICATION CODES

FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
24 - 3116955	93.266	21U1NOA45176	\$380,862.00	\$0.00	N/A	21U1NOA45176

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e.,created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit

https://grants3.hrsa.gov/2010/WebEPSExternal/Interface/common/accesscontrol/login.aspx to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Condition(s)

1. Due Date: Within 30 Days of Award Issue Date

After consultation with your federal Project Officer (PO), submit the following documents for each country and year: 1) a Line Item Budget, 2) a Budget Justification/Narrative, and 3) an Annual Work Plan

All documents should reflect the full Country Operation Plan (COP) or Regional Operation Plan (ROP) amounts.

The budget justification/narrative must detail the costs of each line item within the PEPFAR object class category. Under Personnel, you must include the following for each employee supported by funds from this award: name of employee, base salary, % FTE on the grant and amount of Federal funds (wages and % of fringe benefits) to be paid for the budget year.

2. Due Date: Within 30 Days of Award Issue Date

Submit updated SF424A, consult with HRSA Project Officer as needed.

3. Due Date: Within 30 Days of Award Issue Date

The M&E plan will include expected outcomes and targets to be measured. It should show alignment with relevant National plans of host governments and include baseline information to be collected and proposed methods for project evaluations.

4. Due Date: Within 30 Days of Award Issue Date

The projected annual travel plan should include justification for travel, description of activities related to approved scope of work, and estimated costs.

Grant Specific Term(s)

- 1. Recipients must comply with the requirement that U.S. flag air carriers be used by recipients to the maximum extent possible when commercial air transportation is the means of travel between the United States and a foreign country or between foreign countries. This requirement must not be influenced by factors of cost, convenience, or personal travel preference. The cost of travel under a ticket issued by a U.S. flag air carrier that leases space on a foreign air carrier under a code-sharing agreement is allowable if the purchase is in accordance with GSA regulations on U.S. flag air carriers and code shares (see Fly America Act | GSA). Airfare and other transportation costs may not exceed coach or economy class fares, unless otherwise necessary to accommodate a medical disability or other special need. When use of other than coach-class is necessary to accommodate a medical disability or other special need, the disability must be certified annually (or more frequently as required by recipient organization) in a written statement by a competent medical authority. The costs associated with all travel are to be reasonable and are not to comprise a disproportionate amount of the overall country budget. The travel plans submitted to HRSA for review must note when a fare other than coach or economy will be utilized.
- 2. Monthly conference calls or meetings are to be held between the PI/PD, other members of the project team, and the HRSA Project Officer (PO). Relevant staff from HRSA and country/PEPFAR interagency teams can participate in these calls as necessary.
- 3. 45 CFR Part 75 applies to all federal funds associated with the award. Part 75 has been effective since December 26, 2014. All references to prior OMB Circulars for the administrative and audit requirements and the cost principles that govern Federal monies associated with this award are superseded by the Uniform Guidance 2 CFR Part 200 as codified by HHS at 45 CFR Part 75.
- 4. This Notice of Award is issued based on HRSA's approval of the Non-Competing Continuation (NCC) Progress Report. All post-award requests, such as significant budget revisions or a change in scope, must be submitted as a Prior Approval action via the Electronic Handbooks (EHBs) and approved by HRSA prior to implementation. Grantees under "Expanded Authority," as noted in the Remarks section of the Notice of Award, have different prior approval requirements. See "Prior-Approval Requirements" in the DHHS Grants Policy Statement: https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf.
- 5. ITECH sub-recipients:

NOTICE OF AWARD (Continuation Sheet) Case 1:25-CV-00039-JJM-PAS

Document 66-1

Fondation Ntombwe Veritas Village Reach

- 6. Consistent with numerous United Nations Security Council resolutions, including UNSCR 1267 (1999), UNSCR 1368 (2001), UNSCR 1373 (2001), UNSCR 1989 (2011), and UNSCR 2253 (2015) [https://www.un.org/sc/suborg/en/sanctions/un-sc-consolidated-list], both HRSA and the recipient are firmly committed to the international fight against terrorism, and in particular, against the financing of terrorism. Award funds may not be used, directly or indirectly, to provide support to individuals or entities associated with terrorism. In accordance with this policy, the recipient agrees to use reasonable efforts to ensure that none of the HRSA funds provided under this award are used to provide support to individuals or entities associated with terrorism, including those identified on the U.S. Department of Treasury Office of Foreign Assets Control Specially Designated Nationals List (https://www.treasury.gov/resource-center/sanctions/SDN-List/Pages/default.aspx). This provision must be included in all subagreements, including contracts and subawards, issued under this award.
- 7. The Project Officer is to be notified of any changes to the previously submitted quarterly travel plan, including estimated or actual travel costs that exceed 25% of the original estimates. This information will be submitted prior to the travel occurring and needs to be reviewed and approved by HRSA OGH.

8. PEPFAR implementing partners are required to adhere to the following guidelines:

Responsiveness: ?PEPFAR guidance changes regularly and recipients are expected to consistently monitor, adapt, and align program activities to current PEPFAR guidance in collaboration with HRSA. The PEPFAR guidance is the primary guiding document and technical considerations for all PEPFAR-funded programs in the world. The annual Country/Regional Operational Plan Guidance defines the contours of interventions and expected impact. Activities are expected to be informed by and responsive to the PEPFAR Guidance 2023 Country and Regional Operational Plan Guidance and Technical Considerations - United States Department of State

Successful Implementation: When applicable, work as an implementing partner(s) with?HRSA-supported countries and regions. Demonstrate?capacity to quickly pivot in response to changing PEPFAR?requirements?on a quarterly and annual basis,?including related adjustments?due to?direct role of?in-country?staff?with key government and local civil society stakeholders.

Data Driven: Activities are appropriately monitored, data and performance driven; approaches and strategies that are implemented should seek to explore and introduce new and innovative solutions to achieve sustainable impact based on evidence and guidance.

HRSA and its US government agency partners shall have access to all aggregate-level data generated under this award and may periodically review the data for program management purposes. The US Government may elect, following consultation with recipients, to publish summary results from program activities to fulfill its responsibility to evaluate programs, report on results, and disseminate lessons learned. It is the responsibility of the Principal Investigator or Project Director (PI/PD) to submit to the HRSA Project Officer(s) upon request, data and reports generated by the recipient organization or any of its members required for cross-filing purposes. HRSA's PO will provide guidance and direction on the frequency and structure for this, and resources for this should be included in the recipient's annual program plan and budget.

Sustainability/Local Partner Transition: Demonstrate collaborative relationships with Ministries of Health?and other?key stakeholders?in HRSA-supported countries?and reflect careful consideration of eventual?transition?to host governments. Program objectives and activities successfully build, manage, leverage, and engage in various types of partnerships to ensure enduring programs, replicability, and sustainability.

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Branding and Communications Guidance: All PEPFAR-funded programs or activities must adhere to PEPFAR branding guidance, which includes guidance on the use of the PEPFAR logo and/or written attribution to PEPFAR. PEPFAR branding guidance can be found at: PEPFAR-Branding-Guidance-Apr2022_FLAT.pdf (state.gov)

Consult your assigned Project Officer (PO) if you need additional guidance and for the HRSA logo. Materials developed and published through this grant must acknowledge PEPFAR, HRSA, and other agencies as applicable. All subcontractors and/or trainees supported through this award must also adhere to this publication requirement. Grantees are to acknowledge the funder's full or partial support of program activities in the following materials: journal articles, oral or poster presentations, news releases, and other communications. Alert your HRSA PO if you have a paper accepted for publication, if your institution is planning a news release or if you have other reasons to expect media coverage of your work, and for any events where you have been asked to present your work.

- 9. The recipient must comply with all PEPFAR reporting as required in the annual Country Operational Plan (COP) guidance and Reporting Requirements. Please consult your Project Officer for additional information. PEPFAR Reporting includes, but not limited to:
 - 1. PEPFAR Monitoring, Evaluation, and Reporting (MER) Indicator Report
 - 2. Annual PEPFAR Financial Classifications (Expenditure Reporting)
 - 3. Site Improvement Through Monitoring System (SIMS)

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- 4. Annual Work plan narratives and budget narratives
- 5. Annual submissions of HRH Inventory
- 6. Annual submissions of the Digital Health Inventory
- 10. This award is issued as a Cooperative Agreement, a financial assistance mechanism in which substantial HRSA programmatic involvement and collaboration with the recipient is anticipated as necessary in order to successfully achieve the aims of this project. This involvement will include project officers, country points of contact, technical and evaluation specialists, and other HRSA team members. HRSA program involvement will include:

• Provide consultation and technical assistance in planning, implementing, and evaluating program activities, including reviewing and providing comments, and recommendations for documents, curricula, program work plans, budgets, contracts, personnel (including consultants and contractors), evaluation/implementation, science studies/protocols, monitoring & evaluation (M&E) Plan, etc., prior to printing, dissemination or implementation. In addition, HRSA will provide guidance on updated PEPFAR priorities and alignment of activities and work plans.

• Facilitate the coordination and collaboration among program partners, such as the Bureau of Global Health Security and Diplomacy (GHSD), PEPFAR in-country interagency team, foreign governments, and international and other key stakeholders.

- Participate, as appropriate, in the planning and coordination of any meetings or workgroups to be conducted during the project period.
 Facilitate access to the expertise of HRSA personnel and other relevant resources to the project.
- Collect and analyze data relative to unmet need, special populations, other key health indicators, and emerging priorities or policy shifts to guide current/future strategic planning, developmental efforts, and work plan activities.
- Participate in the dissemination of project findings, best practices and lessons learned across the initiative.

The cooperative agreement recipient's responsibilities will include:

• Collaborate with HRSA, the interagency PEPFAR team and technical leads, and key stakeholders as applicable, to achieve program objectives of integration and sustainability of HIV and TB testing, care, and prevention interventions supported by PEPFAR into host country health systems through evaluation and technical assistance. • Provide ongoing consultation with HRSA and field teams as applicable, on program implementation, and inform HRSA in a timely manner of barriers encountered.

• Develop and execute a final M&E plan in consultation with HRSA and key stakeholders, including establishing a final list of indicators, baseline data and performance targets for each indicator. The M&E plan will be revised as appropriate on an ongoing basis.

• Participate in monitoring activities including but not limited to Site Improvement Monitoring System (SIMS) and comprehensive site visits.

• Provide information on program and project progress, results, findings, best practices, lessons learned, and financial data/expenditure updates as requested by HRSA. The format of these information requests can include, but are not limited to presentations, reports, summarized data, etc.

11. The purpose of the Quality Improvement Solutions for Sustained Epidemic Control Project (QISSEC) program is to facilitate improvements in quality across the HIV care continuum at the site level (defined as the location where persons diagnosed with HIV receive care and treatment) and within the community. The project attempts to improve the effectiveness, efficiency, patient-centeredness, safety, accessibility, and equity of the HIV services in low to middle-income countries (LMIC) as identified by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) program. QISSEC awardees are expected to:

Incorporate explicit quality management (QM) practices, including both quality assurance (QA) and quality improvement (QI) activities into service delivery. Focus on developing innovative strategies to improve the delivery of HIV quality care and treatment for use by facilities that serve the most vulnerable individuals in PEPFAR-supported LMICs. Using quality improvement methodologies, tools, and techniques, the project will identify gaps in service delivery, and develop culturally and medically appropriate, sustainable interventions targeted to PEPFAR-identified vulnerable and key populations.

Focus on building the capacity of countries to sustain and spread QI methodologies, improve documentation of efforts and continuously enhance staff knowledge to impact the delivery of quality HIV services, improve health outcomes and support HIV/AIDS epidemic control. Support of the PEPFAR focus on the management of evidence-informed interventions for scale-up and spread. The successful applicants will facilitate solutions for long-term change management approaches and sustainability of QA and QI activity.

12. This is the initial funding for COP/ROP24 (FY25) for ITECH DRC program:

*The total COP/ROP ceilings are listed, and the balance will be obligated at a later point.

Country	Activity Code	Amount in Initial Funding Memo Total	CAN	Amount	TOTAL COP24 Funding Ceilings (BOF will be received later)
DRC	U1N	\$ 380,862	3116955	380,862	\$577,064

13. An organization, including a faith-based organization, that is otherwise eligible to receive funds under this award for HIV/AIDS prevention, treatment, or care-

1. Shall not be required, as a condition of receiving such assistance-

(a) To endorse or utilize a multisectoral or comprehensive approach to combating HIV/AIDS; or

(b) To endorse, utilize, make a referral to, become integrated with, or otherwise participate in any program or activity to which the organization has a religious or moral objection; and

2. Shall not be discriminated against in the solicitation or issuance of grants, contracts, or cooperative agreements for refusing to meet any requirement described in paragraph (a) above.

- 14. The recipient is accountable for the performance of the project, the appropriate expenditure of grant funds by all parties, and all other obligations of the recipient, as specified in the HHS Grants Policy Statement (GPS). In general, the requirements that apply to the recipient also apply to subrecipients. As part of the workplan submission for the Notice of Award, include a detailed line-item budget, budget narrative, and workplan for all subrecipients. The recipient is responsible for including the applicable requirements of the HHS GPS in its subaward agreements.
- 15. Per 45 CFR §75.351 353, recipients must monitor the activities of their subrecipients as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, PEPFAR legislative requirements, regulations, and the terms and conditions of the subaward; and that subaward performance goals are achieved. Recipients must ensure that subrecipients track, appropriately use, and report program income generated by the subaward. Recipients must also ensure that subrecipient expenditures adhere to legislative mandates regarding the distribution of funds.
- 16. In coordination with the PO and POC, schedule a guarterly expenditure review call and report for each COP/ROP country and/or HOP activity, to go over the previous guarter's spending. This call and report should align with the submission of the O&E (Obligation & Expenditure) report (30 days after the end of the fiscal year quarter). The partner will review their spending by cost category and program area. The information should include the following, but not limited to: total funds approved for the fiscal year by PEPFAR and communicated by HRSA, which align to the NOA cost category lines; total funds expended to date in the fiscal year (both previous guarters and current quarter), by cost category and program area; and total un-expended funds for the rest of the fiscal year, by cost category and program area.
- 17. The funds for this award are in a sub-account in the Payment Management System (PMS). This type of account allows recipients to specifically identify the individual grant for which they are drawing funds and will assist HRSA in monitoring the award. Access to the PMS account number is provided to individuals at the organization who have permissions established within PMS. The PMS sub-account code can be found on the HRSA specific section of the NoA (Accounting Classification Codes). Both the PMS account number and sub-account code are needed when requesting grant funds. Please note that for new and competing continuation awards issued after 10/1/2020, the sub-account code will be the document number.

You may use your existing PMS username and password to check your organizations' account access. If you do not have access, complete a PMS Access Form (PMS/FFR Form) found at: https://pmsapp.psc.gov/pms/app/userrequest. If you have any questions about accessing PMS, contact the PMS Liaison Accountant as identified at: http://pms.psc.gov/find-pms-liaison-accountant.html

Standard Term(s)

1. Your organization must have policies, procedures, and financial controls to follow all the General Terms and Conditions. HRSA awards are based on the application submitted and approved by HRSA. All awards are subject to the General Terms and Conditions, in addition to those included in the Notice of Award or referenced in documents and attachments.

Reporting Requirement(s)

1. Due Date: Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 90 days after end of reporting period.

The recipient must submit, within 90 days after budget period end date, an annual Federal Financial Report (FFR). The report should reflect cumulative reporting within the project period of the document number. All FFRs must be submitted through the Payment Management System (PMS). Technical questions regarding the FFR, including system access should be directed to the PMS Help Desk by submitting a ticket through the self-service web portal (PMS Self-Service Web Portal), or calling 877-614-5533.

2. Due Date: Within 90 Days of Project End Date

A final report is due within 90 days after the project period ends. The final report collects information relevant to program-specific goals and progress on strategies; core performance measurement data; impact of the overall project; the degree to which the recipient achieved the mission, goal and strategies outlined in the program; recipient objectives and accomplishments; barriers encountered; and responses to summary questions regarding the recipient's overall experiences during the entire project period.

3. Due Date: Quarterly (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 30 days after end of reporting period.

Through the EHBs O&E submission task, submit to HRSA a quarterly financial report within 30 days after the end of the USG's first fiscal year quarter (January 30th), and quarterly thereafter (April 30th, July 30th, and October 30th). This quarterly financial report must include an entry for each funding source and country or project combination and will contain: • Total approved PEPFAR funds for the fiscal year, • Total funds awarded/obligated to date by HRSA • Total funds expended in previous quarters • Total funds expended in the current quarter by the recipient • In the Comments section, include details on activities and commitments that occurred during the quarter, but that the expenditures are not yet reflected due to delayed invoicing, etc. and explain any overspending and underspending.

4. Due Date: Semi-Annually (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due Quarter End Date after 30 days of reporting period.

Grantees must submit a semi-annual progress report and expenditure report. Reports will document programmatic activities and financial expenditures related to program goals and objectives, noting accomplishments, barriers and any significant deviations from the workplan. The reports should also indicate staff changes, progress, and challenges faced during the reporting period and any impact to the planned COP/ROP activities.

5. Due Date: Quarterly (Budget Period) Beginning: Budget Start Date Ending: Budget End Date, due 60 days after end of reporting period.

Submit a quarterly travel plan containing all domestic, regional and international travel supported by grant funds, including travel by subrecipients, etc. for the subsequent quarter. The travel plan must include justification for travel, description of activities related to approved scope of work, who is traveling and role of person(s) traveling, and estimated costs. If the travel plan has not changed from the original budget submission, or from the previous quarterly submission, you may respond to this request with a statement "no changes have occurred". Quarterly travel plan must be reviewed and approved by HRSA OGH prior to travel occurring.

Failure to comply with these reporting requirements will result in deferral or additional restrictions of future funding decisions.

Contacts

NoA Email Address(es):

Name	Role	Email
Carol A Rhodes	Authorizing Official	
Carol Rhodes	Authorizing Official	
Ellen Maclachlan	Point of Contact	
Ivonne X Butler	Business Official, Program Director	
Note: NoA emailed to these address(es)		

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (https://pms.psc.gov/).

#: 868

Filed 02/07/25 Page 26 of 96 PageID

Exhibit C

Filed 02/07/25 Page 27 of 96 PageID



Department of Health and Human Services Health Resources and Services Administration

Notice of Award FAIN# U9106801 Federal Award Date: 01/27/2025

Recipient Information	Federal Award Information	
1. Recipient Name University of Washington Division Line: Office of Sponsored Programs PO BOX 359472	 11. Award Number 6 U91HA06801-19-05 12. Unique Federal Award Identification Number (FAIN) 	
Seattle, WA 98104	U9106801	
2. Congressional District of Recipient 07	13. Statutory Authority 42 USC § 242; §300ff-111 and 22 U.S.C. § 7601, et seq.	
3. Payment System Identifier (ID) 1916001537A1	14. Federal Award Project Title Capacity Building for Sustainable HIV Services	
4. Employer Identification Number (EIN) 916001537	15. Assistance Listing Number 93.266	
5. Data Universal Numbering System (DUNS) 605799469	16. Assistance Listing Program Title HIV Demonstration, Research, Public and Professional Education Project	ts
6. Recipient's Unique Entity Identifier HD1WMN6945W6	17. Award Action Type Administrative	
7. Project Director or Principal Investigator Lydia Chwastiak Principal Investigator	18. Is the Award R&D? Yes	
	Summary Federal Award Financial Info	mation
8. Authorized Official	19. Budget Period Start Date 09/30/2024 - End Date 09/29/2025	
Carol Rhodes Director	20. Total Amount of Federal Funds Obligated by this Action	\$0.00
	20a. Direct Cost Amount	
	20b. Indirect Cost Amount	\$739,598.00
Federal Agency Information	21. Authorized Carryover	\$0.00
). Awarding Agency Contact Information	22. Offset	\$0.00
Marie E Mehaffey	23. Total Amount of Federal Funds Obligated this budget period	\$8,129,869.00
Grants Management Specialist Office of Federal Assistance Management (OFAM)	24. Total Approved Cost Sharing or Matching, where applicable	\$0.00
Division of Grants Management Office (DGMO)	25. Total Federal and Non-Federal Approved this Budget Period	\$8,129,869.00
	26. Project Period Start Date 09/30/2021 - End Date 09/29/2026	
10. Program Official Contact Information Jaclyn Perlman	27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$43,178,513.00
Office of the Administrator (OA)	28. Authorized Treatment of Program Income Addition	
	29. Grants Management Officer – Signature Brad Barney on 01/27/2025	

31. APPROVED BUDGET: (Excludes Direct Assistance)

Document 66-1

Filed 02/07/25

Notice of Award



Office of the Administrator (OA)

Federal Award Date: 01/27/2025

Award Number: 6 U91HA06801-19-05

33. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project) YEAR **TOTAL COSTS** 20 \$49,771,195.00 34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash) \$0.00 a. Amount of Direct Assistance b. Less Unawarded Balance of Current Year's Funds \$0.00 \$0.00 c. Less Cumulative Prior Award(s) This Budget Period d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION \$0.00 **35. FORMER GRANT NUMBER 36. OBJECT CLASS** 41.21 37. BHCMIS#

[]	X] Grant Funds Only	
[[] Total project costs including grant funds and all other finance	ial participation
a.	Salaries and Wages:	\$257,522.00
b.	Fringe Benefits:	\$73,303.00
с.	Total Personnel Costs:	\$330,825.00
d.	Consultant Costs:	\$0.00
e.	Equipment:	\$0.00
f.	Supplies:	\$89,805.00
g.	Travel:	\$494,206.00
h.	Construction/Alteration and Renovation:	\$0.00
i.	Other:	\$934,924.00
j.	Consortium/Contractual Costs:	\$5,540,511.00
k.	Trainee Related Expenses:	\$0.00
Ι.	Trainee Stipends:	\$0.00
m.	Trainee Tuition and Fees:	\$0.00
n.	Trainee Travel:	\$0.00
о.	TOTAL DIRECT COSTS:	\$7,390,271.00
р.	INDIRECT COSTS (Rate: % of S&W/TADC):	\$739,598.00
	i. Indirect Cost Federal Share:	\$739,598.00
	ii. Indirect Cost Non-Federal Share:	\$0.00
q.	TOTAL APPROVED BUDGET:	\$8,129,869.00
	i. Less Non-Federal Share:	\$0.00
	ii. Federal Share:	\$8,129,869.00
32.	AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:	
a.	Authorized Financial Assistance This Period	\$8,129,869.00
b.	Less Unobligated Balance from Prior Budget Periods	
	i. Additional Authority	\$0.00
	ii. Offset	\$0.00
с.	Unawarded Balance of Current Year's Funds	\$0.00
d.	Less Cumulative Prior Award(s) This Budget Period	\$8,129,869.00
е.	AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$0.00

38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:

a. The program authorizing statue and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.

39. ACCOUNTING CLASSIFICATION CODES

FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
24 - 3112312	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801
24 - 3116957	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801
24 - 3112315	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801
24 - 3116958	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801
24 - 3112303	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801

NOTICE OF AWARD (Continuation Sheet) Case 1:25-CV-00039-JJM-PAS

Document 66-1

Filed 02/07/25

Date Issued: 1/27/2025 5:39:09 PM A water Namber: 6 991HA00509-19-05

			#: 8/1			
24 - 3116961	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801
24 - 3112304	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801
24 - 3116963	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801
24 - 3112305	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801
24 - 3116965	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801
24 - 3113001	93.266	21U91HA06801	\$0.00	\$0.00	N/A	21U91HA06801

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e.,created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit

https://grants3.hrsa.gov/2010/WebEPSExternal/Interface/common/accesscontrol/login.aspx to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

- 1. Notice: As a result of the President's Executive Order on Reevaluating and Realigning United States Foreign Aid, all drawdown of Federal funds from the Payment Management System (PMS) concerning this grant must have approval of the Grants Management Officer before funds are drawn. Beginning immediately, by the 20th of each month or a minimum of 10 days before funds are needed, an original signed SF 270 must be submitted and subsequently approved for anticipated expenditures, along with documentation to substantiate the request. This restriction is expected to be temporary, pending resolution of the above concerns by your organization. HRSA will determine when such resolution has occurred, and will notify the grantee in writing when the restriction has been lifted. Form SF 270 is available at: https://www.grants.gov/forms/forms-repository/post-award-reporting-forms
- 2. This HRSA award is funded in whole or in part with United States Government foreign assistance funds.

In accordance with the President's Executive Order on Reevaluating and Realigning United States Foreign Aid, you must immediately cease all activities on this award, which includes activities conducted under subawards and contracts. Activities are suspended until further notice. Further activities will be subject to additional guidance and the future availability of funds. No additional costs may be incurred, however any costs incurred prior to January 24, 2025 may be allowable for payment.

Due to Executive Orders regarding potentially unallowable grant payments, the Payment Management System (PMS) is taking additional measures to process payments, so payments could be delayed and defer to PMS on those matters.

This action is not subject to appeal

All prior terms and conditions remain in effect unless specifically removed.

Contacts

NoA Email Address(es):

Name	Role	Email			
Carol Rhodes	Authorizing Official				
Misti Mcdowell	Business Official				
Lydia Chwastiak	Program Director, Point of Contact				
Misti R Mcdowell	Business Official				
Note: NoA emailed to these address(es)					

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (https://pms.psc.gov/).

#: 873

Exhibit D

#: 874



Department of Health and Human Services Health Resources and Services Administration

Notice of Award FAIN# U1N45176 Federal Award Date: 01/27/2025



30. Remarks

Document 66-1

Filed 02/07/25



Office of the Administrator (OA)

Notice of Award Award Number: 6 U1NOA45176-04-03 Federal Award Date: 01/27/2025

31. APPROVED BUDGET: (Excludes Direct Assistance)

[X] Grant Funds Only	
[] Total project costs including grant funds and all other finance	cial participation
a. Salaries and Wages:	\$34,161.00
b. Fringe Benefits:	\$10,351.00
c. Total Personnel Costs:	\$44,512.00
d. Consultant Costs:	\$0.00
e. Equipment:	\$0.00
f. Supplies:	\$173.00
g. Travel:	\$12,907.00
h. Construction/Alteration and Renovation:	\$0.00
i. Other:	\$49,736.00
j. Consortium/Contractual Costs:	\$217,377.00
k. Trainee Related Expenses:	\$0.00
I. Trainee Stipends:	\$0.00
m. Trainee Tuition and Fees:	\$0.00
n. Trainee Travel:	\$0.00
o. TOTAL DIRECT COSTS:	\$324,705.00
p. INDIRECT COSTS (Rate: % of S&W/TADC):	\$56,157.00
i. Indirect Cost Federal Share:	\$56,157.00
ii. Indirect Cost Non-Federal Share:	\$0.00
q. TOTAL APPROVED BUDGET:	\$380,862.00
i. Less Non-Federal Share:	\$0.00
ii. Federal Share:	\$380,862.00
32. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:	
a. Authorized Financial Assistance This Period	\$380,862.00
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	\$0.00
ii. Offset	\$0.00
c. Unawarded Balance of Current Year's Funds	\$0.00
d. Less Cumulative Prior Award(s) This Budget Period	\$380,862.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	\$0.00

YEAR TOTAL COSTS						
05 \$19,913,644.00						
34. APPROVED DIRECT ASSISTANCE BUDGET: (In lieu of cash)						
a. Amount of Direct Assistance \$0.0						
b. Less Unawarded Balance of Current Year's Funds \$0.						
c. Less Cumulative Prior Award(s) This Budget Period \$0.						
d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION \$0.0						
35. FORMER GRANT NUMBER						
36. OBJECT CLASS 41.45						

38. THIS AWARD IS BASED ON THE APPLICATION APPROVED BY HRSA FOR THE PROJECT NAMED IN ITEM 14. FEDERAL AWARD PROJECT TITLE AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE AS:

a. The program authorizing statue and program regulation cited in this Notice of Award; b. Conditions on activities and expenditures of funds in certain other applicable statutory requirements, such as those included in appropriations restrictions applicable to HRSA funds; c. 45 CFR Part 75; d. National Policy Requirements and all other requirements described in the HHS Grants Policy Statement; e. Federal Award Performance Goals; and f. The Terms and Conditions cited in this Notice of Award. In the event there are conflicting or otherwise inconsistent policies applicable to the award, the above order of precedence shall prevail. Recipients indicate acceptance of the award, and terms and conditions by obtaining funds from the payment system.

39. ACCOUNTING CLASSIFICATION CODES

F			DOCUMENT				
	FY-CAN	CFDA	DOCUMENT NUMBER	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
	24 - 3116955	93.266	21U1NOA45176	\$0.00	\$0.00	N/A	21U1NOA45176

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e.,created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit

https://grants3.hrsa.gov/2010/WebEPSExternal/Interface/common/accesscontrol/login.aspx to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

- 1. Notice: As a result of the issuance of the Presiden't's Executive Order on Reevaluating and Realigning United States Foreign Aid, all drawdown of Federal funds from the Payment Management System (PMS) concerning this grant must have approval of the Grants Management Officer before funds are drawn. Beginning immediately, by the 20th of each month or a minimum of 10 days before funds are needed, an original signed SF 270 must be submitted and subsequently approved for anticipated expenditures, along with documentation to substantiate the request. This restriction is expected to be temporary, pending resolution of the above concerns by your organization. HRSA will determine when such resolution has occurred, and will notify the grantee in writing when the restriction has been lifted. Form SF 270 is available at: https://www.grants.gov/forms/forms-repository/post-award-reporting-forms
- 2. This HRSA award is funded in whole or in part with United States Government foreign assistance funds.

In accordance with the President's Executive Order on Reevaluating and Realigning United States Foreign Aid, you must immediately cease all activities on this award, which includes activities conducted under subawards and contracts. Activities are suspended until further notice. Further activities will be subject to additional guidance and the future availability of funds. No additional costs may be incurred, however any costs incurred prior to January 24, 2025 may be allowable for payment.

Due to Executive Orders regarding potentially unallowable grant payments, the Payment Management System (PMS) is taking additional measures to process payments, so payments could be delayed and defer to PMS on those matters.

This action is not subject to appeal.

All prior terms and conditions remain in effect unless specifically removed.

Contacts

NoA Email Address(es):

Name	Role	Email			
Carol Rhodes	Authorizing Official				
Ellen Maclachlan	Point of Contact				
Ivonne X Butler	Program Director, Business Official				
Carol A Rhodes	Authorizing Official				
Note: NoA emailed to these address(es)					

All submissions in response to conditions and reporting requirements (with the exception of the FFR) must be submitted via EHBs. Submissions for Federal Financial Reports (FFR) must be completed in the Payment Management System (https://pms.psc.gov/).

#: 877

Exhibit E

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 Page 36 of 96 PageID DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU2GGH002242-05-03 FAIN# NU2GGH002242 Federal Award Date: 01/29/2025

Recipient Information

1. Recipient Name UNIVERSITY OF WASHINGTON 4333 Brooklyn Ave NE Environmental & Forest Science Seattle, WA 98195-1016 [NoPhoneRecord]

- 2. Congressional District of Recipient 07
- 3. Payment System Identifier (ID) 1916001537A1
- 4. Employer Identification Number (EIN) 916001537
- 5. Data Universal Numbering System (DUNS) 605799469
- 6. Recipient's Unique Entity Identifier (UEI) HD1WMN6945W6
- 7. Project Director or Principal Investigator

Ms. Gabrielle OMalley

8. Authorized Official Ms. Lynette Arias Director

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Dr. Johnny McGrew Grant Management Specialist

10.Program Official Contact Information

Jillian Doss Walker

Program Officer

No Phone Provided

30. Remarks

Federal Award Information

11. Award Number

- 6 NU2GGH002242-05-03 12. Unique Federal Award Identification Number (FAIN) NU2GGH002242
- 13. Statutory Authority
 - 42 USC 287b 31 USC 6305 42 CFR 63a
- 14. Federal Award Project Title

Namibia Mechanism for Public Health Assistance, Capacity, and Technical Support II (NAM-PHACTS II) under the President's Emergency Plan for AIDS Relief (PEPFAR)

- **15. Assistance Listing Number**
- 93.067 16. Assistance Listing Program Title Global AIDS
- 17. Award Action Type
 - Administrative Action
- 18. Is the Award R&D?

Summary Federal Award Financial Information		
19.	Budget Period Start Date 09/30/2024 - End Date 09/29/2025	
20.	Total Amount of Federal Funds Obligated by this Action 20a. Direct Cost Amount 20b. Indirect Cost Amount	\$0.00 \$0.00 \$0.00
21.	Authorized Carryover	\$471,643.00
22.	Offset	\$85,233.00
23.	Total Amount of Federal Funds Obligated this budget period	\$3,960,457.00
24.	Total Approved Cost Sharing or Matching, where applicable	\$0.00
25.	Total Federal and Non-Federal Approved this Budget Period	\$3,960,457.00
26.	Period of Performance Start Date 09/30/2020 - End Date 09/29/2025	
27.	Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance	\$37,934,929.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Mrs. Rhonda Latimer Grants Management Officer Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 , DEPARTMENT OF HEALTH AND HUMAN SERVICES

Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU2GGH002242-05-03 FAIN# NU2GGH002242 Federal Award Date: 01/29/2025

Page 37 of 96 PageID

Recipient Information	33. Approved Budget (Excludes Direct Assistance)		
Recipient Name UNIVERSITY OF WASHINGTON	 I. Financial Assistance from the Federal Awarding Agency Only II. Total project costs including grant funds and all other financial participation 		
4333 Brooklyn Ave NE Environmental & Forest Science Seattle, WA 98195-1016 [NoPhoneRecord]	 a. Salaries and Wages b. Fringe Benefits c. Total Personnel Costs 	\$2,018,340.00 \$632,954.00 \$2,651,294.00	
Congressional District of Recipient 07 Payment Account Number and Type 1916001537A1 Employer Identification Number (EIN) Data 916001537 Universal Numbering System (DUNS)	 d. Equipment e. Supplies f. Travel g. Construction h. Other i. Contractual 	\$0.00 \$72,843.00 \$229,595.00 \$0.00 \$898,089.00 \$11,541.00	
605799469 Recipient's Unique Entity Identifier (UEI) HD1WMN6945W6	j. TOTAL DIRECT COSTS k. INDIRECT COSTS	\$3,863,362.00 \$653,971.00	
31. Assistance Type Cooperative Agreement 32. Type of Award Other	1. TOTAL APPROVED BUDGET m. Federal Share n. Non-Federal Share	\$4,517,333.00 \$4,517,333.00 \$0.00	

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
0-9390DM3	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-1923-1031- 001
1-9390FKS	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-2024-1031- 001
1-93909A3	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-1721-1031- 001
1-9390FTM	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-2122-0955
2-9390HD0	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-2125-1031- 001
2-9390J6V	20NU2GGH00224222PEC6	CGH	41.51	93.067	\$0.00	75-72-2122-1037
2-9390FKS	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-2024-1031- 001
2-9390JA5	20NU2GGH00224222C6	CGH	41.51	93.067	\$0.00	75-X-0943
2-9390HN5	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-2223-0955
3-9390FKS	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-2024-1031- 001
3-9390HD0	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-2125-1031- 001
3-9390K81	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-2226-1031- 001
3-9390LYH	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-2327-1031- 001
4-9390LX8	20NU2GGH00224224LIFT	CGH	41.51	93.067	\$0.00	75-19-2327-1031- 001
4-9390LYH	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-2327-1031- 001
4-9390M2A	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-2425-0955
4-9390NML	20NU2GGH002242	CGH	41.51	93.067	\$0.00	75-19-2428-1031- 001

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 Page 38 of 96 PageID DEPARTMENT OF HEALTH AND HUNAN SERVICES Notice of Award

• Centers for Disease Control and Prevention

Award# 6 NU2GGH002242-05-03 FAIN# NU2GGH002242 Federal Award Date: 01/29/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Case 1:25-cv-00039-JJM-PAS

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#: 881

AWARD ATTACHMENTS

UNIVERSITY OF WASHINGTON

6 NU2GGH002242-05-03

1. Terms and Conditions

TERMS AND CONDITIONS OF AWARD

This Centers for Disease Control and Prevention (CDC) award is funded in whole or in part with United States Government foreign assistance funds.

In accordance with the President's Executive Order on Reevaluating and Realigning United States Foreign Aid, you must immediately cease all activities on this award, which includes activities conducted under subawards and contracts. Activities are suspended until further notice. Further activities will be subject to additional guidance and the future availability of funds.

The grant funds on this award are restricted until further notice. No additional costs may be incurred. Any costs incurred prior to January 24, 2025, may be allowable for payment.

Due to Executive Orders regarding potentially unallowable grant payments, the Payment Management System (PMS) is taking additional measures to process payments, so payments could be delayed and defer to PMS on those matters.

This action is not subject to appeal.

All questions should be directed to PRISM@cdc.gov

#: 883

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Exhibit F

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25

Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU2GGH002298-05-03 FAIN# NU2GGH002298 Federal Award Date: 01/29/2025

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Recipient Information

1. Recipient Name UNIVERSITY OF WASHINGTON 4333 BROOKLYN AVE NE BOX 359472 Office of Sponsored Programs SEATTLE, WA 98195-0001

[NoPhoneRecord]

- 2. Congressional District of Recipient 07
- 3. Payment System Identifier (ID) 1916001537A1
- 4. Employer Identification Number (EIN) 916001537
- 5. Data Universal Numbering System (DUNS) 605799469
- 6. Recipient's Unique Entity Identifier (UEI) HD1WMN6945W6
- 7. Project Director or Principal Investigator

Ms. Gabrielle OMalley



10.Program Official Contact Information

Howard Kress

Program Officer

Federal Award Information

11. Award Number

- 6 NU2GGH002298-05-03 12. Unique Federal Award Identification Number (FAIN)
- NU2GGH002298 13. Statutory Authority
 - 42 USC 287b 31 USC 6305 42 CFR 63a

42 030 2870 31 030 0303 42 CFR 03

14. Federal Award Project Title

GH20-2053 Human Resources for Health (HRH) to Achieve and Sustain HIV/TB Epidemic Control in Malawi under the President's Emergency Plan for AIDS Relief (PEPFAR)

- **15. Assistance Listing Number**
- 93.067 **16. Assistance Listing Program Title** Global AIDS
- 17. Award Action Type
 - Administrative Action
- 18. Is the Award R&D?

	Summary Federal Award Financial Informatio	n
19.	Budget Period Start Date 09/30/2024 - End Date 09/29/2025	
20.	Total Amount of Federal Funds Obligated by this Action	\$0.00
	20a. Direct Cost Amount	\$0.00
	20b. Indirect Cost Amount	\$0.00
21.	Authorized Carryover	\$0.00
22.	Offset	\$0.00
23.	Total Amount of Federal Funds Obligated this budget period	\$2,250,000.00
24.	Total Approved Cost Sharing or Matching, where applicable	\$0.00
25.	Total Federal and Non-Federal Approved this Budget Period	\$2,250,000.00
26.	Period of Performance Start Date 09/30/2020 - End Date 09/29/2025	
27.	Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance	\$15,793,898.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Jerrimica Moore Grants Management Specialist

30. Remarks

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25

, DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award Award# 6 NU2GGH002298-05-03 FAIN# NU2GGH002298

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Federal Award Date: 01/29/2025

Recipient Information	33. Approved Budget (Excludes Direct Assistance)		
Recipient Name UNIVERSITY OF WASHINGTON	 Financial Assistance from the Federal Awarding Agency Only Total project costs including grant funds and all other financial particip 		
4333 BROOKLYN AVE NE BOX 359472 Office of Sponsored Programs SEATTLE, WA 98195-0001 [NoPhoneRecord] Congressional District of Recipient 07 Payment Account Number and Type 1916001537A1 Employer Identification Number (EIN) Data 916001537 Universal Numbering System (DUNS) 605799469	 a. Salaries and Wages b. Fringe Benefits c. Total Personnel Costs d. Equipment e. Supplies f. Travel g. Construction h. Other i. Contractual 	\$1,201,059.00 \$300,723.00 \$1,501,782.00 \$0.00 \$13,389.00 \$84,966.00 \$0.00 \$285,302.00 \$12,577.00	
Recipient's Unique Entity Identifier (UEI) HD1WMN6945W6	j. TOTAL DIRECT COSTS k. INDIRECT COSTS	\$1,898,016.00 \$351,984.00	
31. Assistance Type Cooperative Agreement 32. Type of Award Demonstration	1. TOTAL APPROVED BUDGET m. Federal Share n. Non-Federal Share	\$2,250,000.00 \$2,250,000.00 \$0.00	

34. Accounting Classification Codes

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
3-9390K7X	20NU2GGH002298	CGH	41.51	93.067	\$0.00	75-19-2226-1031-001
4-9390LYK	20NU2GGH002298	CGH	41.51	93.067	\$0.00	75-19-2327-1031-001
4-9390M28	20NU2GGH002298	CGH	41.51	93.067	\$0.00	75-2425-0955

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 Page 44 of 96 PageID DEPARTMENT OF HEALTH AND HUNAN SERVICES Notice of Award

• Centers for Disease Control and Prevention

Award# 6 NU2GGH002298-05-03 FAIN# NU2GGH002298 Federal Award Date: 01/29/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Case 1:25-cv-00039-JJM-PAS

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#: 887

AWARD ATTACHMENTS

UNIVERSITY OF WASHINGTON

6 NU2GGH002298-05-03

1. Terms and Conditions

TERMS AND CONDITIONS OF AWARD

This Centers for Disease Control and Prevention (CDC) award is funded in whole or in part with United States Government foreign assistance funds.

In accordance with the President's Executive Order on Reevaluating and Realigning United States Foreign Aid, you must immediately cease all activities on this award, which includes activities conducted under subawards and contracts. Activities are suspended until further notice. Further activities will be subject to additional guidance and the future availability of funds.

The grant funds on this award are restricted until further notice. No additional costs may be incurred. Any costs incurred prior to January 24, 2025, may be allowable for payment.

Due to Executive Orders regarding potentially unallowable grant payments, the Payment Management System (PMS) is taking additional measures to process payments, so payments could be delayed and defer to PMS on those matters.

This action is not subject to appeal.

All questions should be directed to PRISM@cdc.gov

#: 889

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Exhibit G

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Award# 6 NU2GGH002374-04-03 FAIN# NU2GGH002374 Federal Award Date: 01/29/2025

Notice of Award

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Federal Award Information **Recipient Information 11. Award Number** 1. Recipient Name 6 NU2GGH002374-04-03 UNIVERSITY OF WASHINGTON 12. Unique Federal Award Identification Number (FAIN) 4333 Brooklyn Ave NE NU2GGH002374 Seattle, WA 98195-0001 13. Statutory Authority [NoPhoneRecord] 42 USC 287b 31 USC 6305 42 CFR 63a 14. Federal Award Project Title 2. Congressional District of Recipient Advancing Sustainable Implementation of Comprehensive HIV/TB Services for Epidemic Control in the Republic of Mozambique under the President's Emergency Plan for AIDS Relief (PEPFAR) 3. Payment System Identifier (ID) 15. Assistance Listing Number 1916001537A1 93.067 4. Employer Identification Number (EIN) 16. Assistance Listing Program Title 916001537 Global AIDS 5. Data Universal Numbering System (DUNS) 605799469 17. Award Action Type 6. Recipient's Unique Entity Identifier (UEI) Administrative Action HD1WMN6945W6 18. Is the Award R&D? 7. Project Director or Principal Investigator No Mr. Jeffrey P Lane JD, MPH Summary Federal Award Financial Information Professor 19. Budget Period Start Date 09/30/2024 - End Date 09/29/2025 20. Total Amount of Federal Funds Obligated by this Action 8. Authorized Official 20a. Direct Cost Amount Mr. Tim Mhyre 20b. Indirect Cost Amount Manager, Proposals & Awards - Team Gold 21. Authorized Carryover 22. Offset 23. Total Amount of Federal Funds Obligated this budget period **Federal Agency Information** 24. Total Approved Cost Sharing or Matching, where applicable CDC Office of Financial Resources 25. Total Federal and Non-Federal Approved this Budget Period 9. Awarding Agency Contact Information 26. Period of Performance Start Date 09/30/2021 - End Date 09/29/2026 Jenise Yawn 27. Total Amount of the Federal Award including Approved Grants Management Officer Cost Sharing or Matching this Period of Performance 28. Authorized Treatment of Program Income **10.Program Official Contact Information** ADDITIONAL COSTS Ms. Sherry Gilbert 29. Grants Management Officer - Signature Francis Muriithi Grants Management Officer

30. Remarks

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$965,932.00

\$965,932.00

\$5,566,457.00

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award Award# 6 NU2GGH002374-04-03

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FAIN# NU2GGH002374 Federal Award Date: 01/29/2025

Recipient Information	33. Approved Budget (Excludes Direct Assistance)		
Recipient Name UNIVERSITY OF WASHINGTON	 Financial Assistance from the Federal Awarding Ag Total project costs including grant funds and all of 		
4333 Brooklyn Ave NE Seattle, WA 98195-0001 [NoPhoneRecord]	 a. Salaries and Wages b. Fringe Benefits c. TotalPersonnelCosts 	\$402,032.00 \$74,701.00 \$476,733.00	
Congressional District of Recipient 07 Payment Account Number and Type 1916001537A1 Employer Identification Number (EIN) Data 916001537 Universal Numbering System (DUNS) 605799469	 d. Equipment e. Supplies f. Travel g. Construction h. Other i. Contractual 	\$0.00 \$51,514.00 \$129,638.00 \$0.00 \$71,466.00 \$95,776.00	
Recipient's Unique Entity Identifier (UEI) HD1WMN6945W6	j. TOTAL DIRECT COSTS k. INDIRECT COSTS	\$825,127.00 \$140,805.00	
31. Assistance Type Cooperative Agreement 32. Type of Award Other	1. TOTAL APPROVED BUDGET m. Federal Share n. Non-Federal Share	\$965,932.00 \$965,932.00 \$0.00	

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
4-9390NMK	21NU2GGH002374	CGH	41.51	93.067	\$0.00	75-19-2428-1031-001
4-9390LYJ	21NU2GGH002374	CGH	41.51	93.067	\$0.00	75-19-2327-1031-001

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 Page 50 of 96 PageID DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

• Centers for Disease Control and Prevention

Award# 6 NU2GGH002374-04-03 FAIN# NU2GGH002374 Federal Award Date: 01/29/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Case 1:25-cv-00039-JJM-PAS

Document 66-1 #: 893

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AWARD ATTACHMENTS

UNIVERSITY OF WASHINGTON

6 NU2GGH002374-04-03

1. Terms and Conditions

TERMS AND CONDITIONS OF AWARD

This Centers for Disease Control and Prevention (CDC) award is funded in whole or in part with United States Government foreign assistance funds.

In accordance with the President's Executive Order on Reevaluating and Realigning United States Foreign Aid, you must immediately cease all activities on this award, which includes activities conducted under subawards and contracts. Activities are suspended until further notice. Further activities will be subject to additional guidance and the future availability of funds.

The grant funds on this award are restricted until further notice. No additional costs may be incurred. Any costs incurred prior to January 24, 2025, may be allowable for payment.

Due to Executive Orders regarding potentially unallowable grant payments, the Payment Management System (PMS) is taking additional measures to process payments, so payments could be delayed and defer to PMS on those matters.

This action is not subject to appeal.

All questions should be directed to PRISM@cdc.gov

#: 895

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Exhibit H

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU2GGH002423-03-03 FAIN# NU2GGH002423 Federal Award Date: 01/29/2025

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Recipient Information

1. Recipient Name UNIVERSITY OF WASHINGTON 4101 15th Ave NE School of Social Work Seattle, WA 98105-6250 [NoPhoneRecord]

- 2. Congressional District of Recipient
- 3. Payment System Identifier (ID) 1916001537A1
- 4. Employer Identification Number (EIN) 916001537
- 5. Data Universal Numbering System (DUNS) 605799469
- 6. Recipient's Unique Entity Identifier (UEI) HD1WMN6945W6
- 7. Project Director or Principal Investigator

Ms. Gabrielle OMalley

8. Authorized Official Ms. CAROL RHODES BUSINESS OFFICIAL

Federal Agency Information CDC Office of Financial Resources

9. Awarding Agency Contact Information Kristal Thompson-Black GMS

10.Program Official Contact Information

Alinune Kabaghe

Epidemiologist

Federal Award Information

11. Award Number

- 6 NU2GGH002423-03-03 12. Unique Federal Award Identification Number (FAIN) NU2GGH002423
- 13. Statutory Authority

42 USC 287b 31 USC 6305 42 CFR 63a

14. Federal Award Project Title

HIV Surveillance for Epidemic Control in Malawi under the President's Emergency Plan for AIDS Relief (PEPFAR)

- 15. Assistance Listing Number
- 93.067 16. Assistance Listing Program Title Global AIDS
- 17. Award Action Type
 - Administrative Action
- 18. Is the Award R&D? No

	Summary Federal Award Financial Informatio	n
19.	Budget Period Start Date 09/30/2024 - End Date 09/29/2025	
20.	Total Amount of Federal Funds Obligated by this Action	\$0.00
	20a. Direct Cost Amount	\$0.00
	20b. Indirect Cost Amount	\$0.00
21.	Authorized Carryover	\$0.00
22.	Offset	\$100,841.00
23.	Total Amount of Federal Funds Obligated this budget period	\$2,899,159.00
24.	Total Approved Cost Sharing or Matching, where applicable	\$0.00
25.	Total Federal and Non-Federal Approved this Budget Period	\$2,899,159.00
26.	Period of Performance Start Date 09/30/2022 - End Date 09/29/2027	
27.	Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance	\$13,160,467.00

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Francis Muriithi Grants Management Officer

30. Remarks

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 DEPARTMENT OF HEALTH AND HUMAN SERVICES N

S Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU2GGH002423-03-03 FAIN# NU2GGH002423 Federal Award Date: 01/29/2025

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Recipient Information	33. Approved Budget (Excludes Direct Assistance)		
Recipient Name UNIVERSITY OF WASHINGTON	 Financial Assistance from the Federal Awarding Agency Only Total project costs including grant funds and all other financial participation 		
4101 15th Ave NE School of Social Work Seattle, WA 98105-6250 [NoPhoneRecord]	 a. Salaries and Wages b. Fringe Benefits c. TotalPersonnelCosts 	\$1,066,860.00 \$280,044.00 \$1,346,904.00	
Congressional District of Recipient 07 Payment Account Number and Type 1916001537A1 Employer Identification Number (EIN) Data 916001537 Universal Numbering System (DUNS) 605799469	 d. Equipment e. Supplies f. Travel g. Construction h. Other i. Contractual 	\$0.00 \$251,521.00 \$160,979.00 \$0.00 \$634,653.00 \$59,793.00	
Recipient's Unique Entity Identifier (UEI) HD1WMN6945W6	j. TOTAL DIRECT COSTS k. INDIRECT COSTS	\$2,453,850.00 \$546,150.00	
31. Assistance Type Cooperative Agreement 32. Type of Award Other	1. TOTAL APPROVED BUDGET m. Federal Share n. Non-Federal Share	\$3,000,000.00 \$3,000,000.00 \$0.00	

ADMINISTRATIVE CODE AMT ACTION FINANCIAL ASSISTANCE FY-ACCOUNT NO. APPROPRIATION DOCUMENT NO. OBJECT CLASS ASSISTANCE LISTING 75-19-2226-1031-001 2-9390K7X 22NU2GGH002423 CGH 41.51 93.067 \$0.00 3-9390JA5 NU2GGH00242323C6 CGH 41.51 93.067 \$0.00 75-X-0943 3-9390K7X 22NU2GGH002423 CGH 41.51 93.067 \$0.00 75-19-2226-1031-001 75-19-2327-1031-001 4-9390LYK 22NU2GGH002423 CGH 41.51 93.067 \$0.00

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 Page 56 of 96 PageID DEPARTMENT OF HEALTH AND HUNAN SERVICES Notice of Award

• Centers for Disease Control and Prevention

Award# 6 NU2GGH002423-03-03 FAIN# NU2GGH002423 Federal Award Date: 01/29/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Case 1:25-cv-00039-JJM-PAS

Document 66-1 Filed 02/07/25

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#: 899

AWARD ATTACHMENTS

UNIVERSITY OF WASHINGTON

6 NU2GGH002423-03-03

1. Terms and Conditions

TERMS AND CONDITIONS OF AWARD

This Centers for Disease Control and Prevention (CDC) award is funded in whole or in part with United States Government foreign assistance funds.

In accordance with the President's Executive Order on Reevaluating and Realigning United States Foreign Aid, you must immediately cease all activities on this award, which includes activities conducted under subawards and contracts. Activities are suspended until further notice. Further activities will be subject to additional guidance and the future availability of funds.

The grant funds on this award are restricted until further notice. No additional costs may be incurred. Any costs incurred prior to January 24, 2025, may be allowable for payment.

Due to Executive Orders regarding potentially unallowable grant payments, the Payment Management System (PMS) is taking additional measures to process payments, so payments could be delayed and defer to PMS on those matters.

This action is not subject to appeal.

All questions should be directed to PRISM@cdc.gov

Document 66-1 #: 901

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Exhibit I

NOTICE OF COURT ORDER

You are hereby advised that a temporary restraining order has been entered in the case of *New York et al. v. Trump*, No. 25-cv-39-JJM-PAS (D.R.I.), ECF No. 50 (Jan. 31, 2025). You are receiving this Notice pursuant to the Court's directive that notice of the order be provided "to all Defendants and agencies and their employees, contractors, and grantees by Monday, February 3, 2025, at 9 a.m." A copy of the Court's Order is attached for reference.

This case challenges an alleged "pause" of certain Federal financial assistance, related to OMB Memorandum M-25-13, *Temporary Pause of Agency Grant, Loan, and Other Financial Assistance Programs* (Jan. 27, 2025) ("OMB Memo"). Although that OMB Memo was rescinded on January 29, 2025, the plaintiffs in the above-referenced case allege that the funding pause directed by the OMB Memo is still in effect, including because of recently issued Executive Orders by the President.

In response, the Court has entered a temporary restraining order prohibiting certain actions by the Defendants in the case, which is effective immediately. All Defendants—including their employees, contractors, and grantees—must immediately comply with the Court's Order. For complete details and terms of the Court's Order, please refer to pages 11 and 12 of the enclosed Order.

To assist in your compliance, here is a summary of the key terms:

- 1. Federal agencies cannot pause, freeze, impede, block, cancel, or terminate any awards or obligations on the basis of the OMB Memo, or on the basis of the President's recently issued Executive Orders.
- 2. This prohibition applies to all awards or obligations—not just those involving the Plaintiff States in the above-referenced case—and also applies to future assistance (not just current or existing awards or obligations).
- 3. Agencies may exercise their own authority to pause awards or obligations, provided agencies do so purely based on their own discretion—not as a result of the OMB Memo or the President's Executive Orders—and provided the pause complies with all notice and procedural requirements in the award, agreement, or other instrument relating to such a pause.
 - a. On pages 11 and 12 of the Order, the Court prohibits agencies from pausing funding "except on the basis of the applicable authorizing statutes, regulations, and terms." Thus, agencies remain free to exercise their own discretion under their "authorizing statutes, regulations, and terms," including any exercise of discretion to pause certain funding. Additionally, agencies remain free to take action pursuant to the terms of the relevant award or obligation, such as in cases of grantee noncompliance.
 - b. Any exercise of agency discretion, however, cannot be based on the OMB Memo or the President's Executive Orders, given that the Court has prohibited agencies from "implementing or giving effect to the OMB [Memo] under any other name

or title[.]" (Order, pg.12). Additionally, any decision to pause, stop, delay, or otherwise withhold federal financial assistance programs must comply with all notice and procedural requirements in the award, agreement, or other instrument setting forth the terms of the award or obligation.

4. Out of an abundance of caution, all federal agencies (even those not named as defendants in the case) should comply with the above-referenced terms.

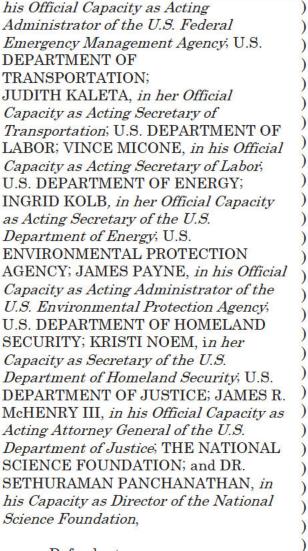
As the Court's Order reflects, the above terms are temporary as litigation in the case is ongoing. At present, however, the Court's Order is in effect and must be complied with.

If you have any questions about the scope or effect of the Court's Order, please contact your agency's Office of General Counsel or your grant officer, as appropriate. Thank you for your attention to this matter.

UNITED STATES DISTRICT COURT FOR THE DISTRICT OF RHODE ISLAND

STATE OF NEW YORK; STATE OF CALIFORNIA; STATE OF ILLINOIS; STATE OF RHODE ISLAND; STATE OF NEW JERSEY; COMMONWEALTH OF MASSACHUSETTS; STATE OF ARIZONA; STATE OF COLORADO; STATE OF CONNECTICUT; STATE OF DELAWARE; THE DISTRICT OF COLUMBIA; STATE OF HAWAI'I; STATE OF MAINE; STATE OF MARYLAND; STATE OF MICHIGAN; STATE OF MINNESOTA; STATE OF NEVADA; STATE OF NORTH CAROLINA; STATE OF NEW MEXICO; STATE OF OREGON; STATE OF VERMONT; STATE OF WASHINGTON; and STATE OF WISCONSIN, Plaintiffs, v. DONALD TRUMP, in his Official Capacity as President of the United States; U.S. OFFICE OF MANAGEMENT AND BUDGET; MATTHEW J. VAETH, in his Official Capacity as Acting Director of the U.S.) Office of Management and Budget, U.S. DEPARTMENT OF THE TREASURY; SCOTT BESSENT, in his Official Capacity as Secretary of the Treasury; PATRICIA COLLINS, in her Official Capacity as Treasurer of the U.S.; U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES; DOROTHY A. FINK, M.D., in her Official Capacity As) Acting Secretary Of Health And Human) Services; U.S. DEPARTMENT OF) EDUCATION; DENISE CARTER, in her) Official Capacity as Acting Secretary of Education; U.S. FEDERAL EMERGENCY MANAGEMENT) AGENCY; CAMERON HAMILTON, in

C.A. No. 25-cv-39-JJM-PAS



Defendants.

TEMPORARY RESTRAINING ORDER

The legal standard for a Temporary Restraining Order ("TRO") mirrors that of

a preliminary injunction. The Plaintiff States must show that weighing these four

factors favors granting a TRO:

- 1. likelihood of success on the merits;
- 2. potential for irreparable injury;
- 3. balance of the relevant equities; and

4. effect on the public interest if the Court grants or denies the TRO.

Planned Parenthood League v. Bellotti, 641 F.2d 1006, 1009 (1st Cir. 1981). The traditional equity doctrine that preliminary injunctive relief is an extraordinary and drastic remedy that is never awarded as of right guides the Court. *Id.* The Court is also fully aware of the judiciary's role as one of the three independent branches of government, and that the doctrine of separation of powers restricts its reach into the Executive Branch. The Court now turns to the four factors.

Likelihood of Success on the Merits

We begin with what courts have called a key factor—a consideration of the movant's likelihood of success on the merits.

In <u>Count I</u>, the States allege that the Executive's actions by the Office of Management and Budget ("OMB")¹ violate the Administrative Procedure Act ("APA")² because Congress has not delegated any unilateral authority to the Executive to indefinitely pause all federal financial assistance without considering the statutory and contractual terms governing these billions of dollars of grants.

In <u>**Count II**</u>, the States allege that the Executive's actions violate the APA because the failure to spend funds appropriated by Congress is arbitrary and capricious in multiple respects.

¹ See *supra* for discussion of mootness.

² 5 U.S.C. § 551 et seq.

In <u>Count III</u>, the States allege that the failure to spend funds appropriated by Congress violates the separation of powers because the Executive has overridden Congress' judgments by refusing to disburse already-allocated funding for many federal grant programs.

In <u>Count IV</u>, the States allege a violation of the Spending Clause of the U.S. Constitution. U.S. Const. art. I, § 8, cl. law 1.

And in <u>Count V</u>, the States allege a violation of the presentment (U.S. Const. art. I, § 7, cl. 2), appropriations (U.S. Const. art. I, § 7), and take care clauses (U.S. Const. art. II, § 3, cl. 3) (the Executive must "take care that the laws be faithfully executed . . .").

Because of the breadth and ambiguity of the "pause," the Court must consider the States' TRO motion today based on the effect it will have on many—but perhaps not all—grants and programs it is intended to cover. Are there some aspects of the pause that might be legal and appropriate constitutionally for the Executive to take? The Court imagines there are, but it is equally sure that there are many instances in the Executive Orders' wide-ranging, all-encompassing, and ambiguous "pause" of critical funding that are not. The Court must act in these early stages of the litigation under the "worst case scenario" because the breadth and ambiguity of the Executive's action makes it impossible to do otherwise.

The Court finds that, based on the evidence before it now, some of which is set forth below, the States are likely to succeed on the merits of some, if not all, their claims. The reasons are as follows:

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- The Executive's action unilaterally suspends the payment of federal funds to the States and others simply by choosing to do so, no matter the authorizing or appropriating statute, the regulatory regime, or the terms of the grant itself. The Executive cites no legal authority allowing it to do so; indeed, no federal law would authorize the Executive's unilateral action here.
- Congress has instructed the Executive to provide funding to States based on stated statutory factors—for example, population or the expenditure of qualifying State funds. By trying to impose certain conditions on this funding, the Executive has acted contrary to law and in violation of the APA.
- The Executive Orders threaten the States' ability to conduct essential activities and gave the States and others less than 24 hours' notice of this arbitrary pause, preventing them from making other plans or strategizing how they would continue to function without these promised funds.
- Congress appropriated many of these funds, and the Executive's refusal to disburse them is contrary to congressional intent and directive and thus arbitrary and capricious.
- Congress has not given the Executive limitless power to broadly and indefinitely pause all funds that it has expressly directed to specific recipients and purposes and therefore the Executive's actions violate the separation of powers.

Judge Bruce M. Selya of the First Circuit succinctly set out the black letter law about appropriated funds and Executive powers:

When an executive agency administers a federal statute, the agency's power to act is "authoritatively prescribed by Congress." *City of Arlington v. FCC*, 569 U.S. 290, 297, 133 S. Ct. 1863, 185 L. Ed. 2d 941 (2013). It is no exaggeration to say that "an agency literally has no power to act ... unless and until Congress confers power upon it." *La. Pub. Serv. Comm'n v. FCC*, 476 U.S. 355, 374, 106 S. Ct. 1890, 90 L. Ed. 2d 369 (1986). Any action that an agency takes outside the bounds of its statutory authority is ultra vires, see *City of Arlington*, 569 U.S. at 297, 133 S. Ct. 1863, and violates the Administrative Procedure Act, see 5 U.S.C. § 706(2)(C).

City of Providence v. Barr, 954 F.3d 23, 31 (1st Cir. 2020).

The Executive's statement that the Executive Branch has a duty "to align Federal spending and action with the will of the American people as expressed through Presidential priorities," (ECF No. 48-1 at 11) (emphasis added) is a constitutionally flawed statement. The Executive Branch has a duty to align federal spending and action with the will of the people as expressed through congressional appropriations, not through "Presidential priorities." U.S. Const. art. II, § 3, cl. 3 (establishing that the Executive must "take care that the laws be faithfully executed . . ."). Federal law specifies how the Executive should act if it believes that appropriations are inconsistent with the President's priorities—it must ask Congress, not act unilaterally. The Impoundment Control Act of 1974 specifies that the President may ask that Congress rescind appropriated funds.³ Here, there is no evidence that the Executive has followed the law by notifying Congress and thereby effectuating a potentially legally permitted so-called "pause."

³ If both the Senate and the House of Representatives have not approved a rescission proposal (by passing legislation) within forty-five days of continuous session, any funds the Executive is withholding must be made available for obligation.

Justice Brett Kavanaugh wrote when he was on the D.C. Circuit:

Like the Commission here, a President sometimes has policy reasons (as distinct from constitutional reasons, cf. infra note 3) for wanting to spend less than the full amount appropriated by Congress for a particular project or program. But in those circumstances, even the President does not have unilateral authority to refuse to spend the funds. Instead, the President must propose the rescission of funds, and Congress then may decide whether to approve a rescission bill. See 2 U.S.C. § 683; see also Train v. City of New York, 420 U.S. 35, 95 S. Ct. 839, 43 L. Ed. 2d 1 (1975); Memorandum from William H. Rehnquist, Assistant Attorney General, Office of Legal Counsel, to Edward L. Morgan, Deputy Counsel to the President (Dec. 1, 1969), reprinted in Executive Impoundment of Appropriated Funds: Hearings Before the Subcomm. on Separation of Powers of the S. Comm. on the Judiciary, 92d Cong. 279, 282 (1971) ("With respect to the suggestion that the President has a constitutional power to decline to spend appropriated funds, we must conclude that existence of such a broad power is supported by neither reason nor precedent.")

In re Aiken Cnty., 725 F.3d 255, 261, n.1 (D.C. Cir. 2013).

The Court finds that the record now before it substantiates the likelihood of a

successful claim that the Executive's actions violate the Constitution and statutes of

the United States.

The Court now moves on to the remaining three injunction considerations.

Irreparable Harm

The States have put forth sufficient evidence at this stage that they will likely suffer severe and irreparable harm if the Court denies their request to enjoin enforcement of the funding pause.

• All the States rely on federal funds to provide and maintain vital programs and services and have introduced evidence that the withholding of federal funds

will cause severe disruption in their ability to administer such vital services– even if it is for a brief time.

- The States detail many examples of where the Executive's overarching pause on funding that Congress has allocated will harm them and their citizens. These programs range from highway planning and construction, childcare, veteran nursing care funding, special education grants, and state health departments, who receive billions of dollars to run programs that maintain functional health systems. *See, e.g.*, ECF No. 3-1 at 56 (highway construction programs in Delaware), at 73 (childcare programs in Michigan), at 113 (veterans nursing care funding in Washington state), at 77 (special education programs in Minnesota), and at 100–01 (health care programs in New Mexico).
- The pause in federal funding will also hurt current disaster relief efforts. The States assert that the pause applies to federal actions directing federal financial assistance to North Carolina to address the damage inflicted by Hurricane Helene and to any Federal Emergency Management Agency grant money not yet disbursed, including key support for California's ongoing response to the fires. ECF No. 1 ¶¶ 80-81.
- A January 28, 2025, email from Shannon Kelly, the Director of the National High Intensity Drug Case Trafficking Areas (HIDTA) program, who aids law enforcement in high drug-trafficking areas, shows that payments to statebased HIDTA programs have been paused, putting the public's safety at risk. *Id.* ¶ 83.

The States have set forth facts showing that the Executive's abrupt "pause" in potentially trillions of dollars of federal funding will cause a ripple effect that would directly impact the States and other's ability to provide and administer vital services and relief to their citizens. Thus, the federal grants to States and others that are impounded through the Executive's pause in disbursement will cause irreparable harm.

And it is more than monetary harm that is at stake here. As Justice Anthony Kennedy reminds us, "Liberty is always at stake when one or more of the branches seek to transgress the separation of powers." *Clinton v. City of New York*, 524 U.S. 417, 449–50 (1998) (Kennedy, J. concurring)

Balance of the Equities and Public Interest

As the Court considers the final two factors, the record shows that the balance of equities weighs heavily in favor of granting the States' TRO.

- If the Defendants are prevented from enforcing the directive contained in the OMB Directive, they merely would have to disburse funds that Congress has appropriated to the States and others.
- On the other hand, if the Court denies the TRO, the funding that the States and others are presumably due under law is in an indefinite limbo—a hardship worsened by the fact that the States had less than 24 hours' notice to act in anticipation of the funding shortfall.
- The fact that the States have shown a likelihood of success on the merits strongly suggests that a TRO would serve the public interest. Moreover, the

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public interest further favors a TRO because absent such an order, there is a substantial risk that the States and its citizens will face a significant disruption in health, education, and other public services that are integral to their daily lives due to this pause in federal funding.

The evidence in the record at this point shows that, despite the rescission of the OMB Directive, the Executive's decision to pause appropriated federal funds "remains in full force and effect." ECF No. 44.

<u>Mootness</u>

The Defendants now claim that this matter is moot because it rescinded the OMB Directive. But the evidence shows that the alleged rescission of the OMB Directive was in name-only and may have been issued simply to defeat the jurisdiction of the courts. The substantive effect of the directive carries on.

Messaging from the White House and agencies proves the point. At 2:04 EST, less than an hour before the Court's hearing on the States' motion on Wednesday, the Defendants filed a Notice saying, "OMB elected to rescind that challenged Memorandum. *See* OMB Mem. M-25-14, *Rescission of M-25-13* (Jan. 28, 2025) ('OMB Memorandum M-25-13 is rescinded.')." ECF No. 43. Yet about twenty minutes before the Defendants filed the Notice, the President's Press Secretary sent a statement via the X platform that said: "The President's [Executive Orders] EO's on federal funding remain in full force and effect and will be rigorously implemented." ECF No. 44. And then the following day (January 30, 2025 at 7:50 MST and again at 5:27 p.m. EST) after the so-called rescission, the Environmental Protection Agency, in an email to

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federal grant recipients, said that the awarded money could not be disbursed while it worked "diligently to implement the [OMB] Memorandum, Temporary Pause of Agency Grant, Loan, and Other Financial Assistance Programs, to align Federal spending and action with the will of the American people as expressed through President Trump's priorities. The agency is temporarily pausing all activities related to the obligation or disbursement of EPA Federal financial assistance at this time. EPA is continuing to work with OMB as they review processes, policies, and programs, as required by the memorandum." ECF No. 48-1 at 6, 11.

Based on the Press Secretary's unequivocal statement and the continued actions of Executive agencies, the Court finds that the policies in the OMB Directive that the States challenge here are still in full force and effect and thus the issues presented in the States' TRO motion are not moot.

Conclusion

Consistent with the findings above, and to keep the status quo, the Court hereby ORDERS that a TEMPORARY RESTRAINING ORDER is entered in this case until this Court rules on the States' forthcoming motion for a preliminary injunction, which the States shall file expeditiously.

During the pendency of the Temporary Restraining Order, Defendants shall not pause, freeze, impede, block, cancel, or terminate Defendants' compliance with awards and obligations to provide federal financial assistance to the States, and Defendants shall not impede the States' access to such awards and obligations, except on the basis of the applicable authorizing statutes, regulations, and terms.

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If Defendants engage in the "identif[ication] and review" of federal financial assistance programs, as identified in the OMB Directive, such exercise shall not affect a pause, freeze, impediment, block, cancellation, or termination of Defendants' compliance with such awards and obligations, except on the basis of the applicable authorizing statutes, regulations, and terms.

Defendants shall also be restrained and prohibited from reissuing, adopting, implementing, or otherwise giving effect to the OMB Directive under any other name or title or through any other Defendants (or agency supervised, administered, or controlled by any Defendant), such as the continued implementation identified by the White House Press Secretary's statement of January 29, 2025. ECF No. 44.

Defendants' attorneys shall provide written notice of this Order to all Defendants and agencies and their employees, contractors, and grantees by Monday, February 3, 2025, at 9 a.m. Defendants shall file a copy of the notice on the docket at the same time.

Defendants shall comply with all notice and procedural requirements in the award, agreement, or other instrument relating to decisions to stop, delay, or otherwise withhold federal financial assistance programs.

The TRO shall be in effect until further Order of this Court. A preliminary hearing, at which time the States will have to produce specific evidence in support of a preliminary injunction, will be set shortly at a day and time that is convenient to the parties and the Court.

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IT IS SO ORDERED.

s/John J. McConnell, Jr.

John J. McConnell, Jr. Chief Judge United States District Court for the District of Rhode Island

January 31, 2025

#: 917

Exhibit J

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU2GGH002374-04-04 FAIN# NU2GGH002374 Federal Award Date: 02/05/2025

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Federal Award Information **Recipient Information 11. Award Number** 1. Recipient Name 6 NU2GGH002374-04-04 UNIVERSITY OF WASHINGTON 12. Unique Federal Award Identification Number (FAIN) 4333 Brooklyn Ave NE NU2GGH002374 Seattle, WA 98195-0001 13. Statutory Authority [NoPhoneRecord] 42 USC 287b 31 USC 6305 42 CFR 63a **14. Federal Award Project Title** 2. Congressional District of Recipient Advancing Sustainable Implementation of Comprehensive HIV/TB Services for Epidemic Control in the Republic of Mozambique under the President's Emergency Plan for AIDS Relief (PEPFAR) 3. Payment System Identifier (ID) 15. Assistance Listing Number 1916001537A1 93.067 4. Employer Identification Number (EIN) 16. Assistance Listing Program Title 916001537 Global AIDS 5. Data Universal Numbering System (DUNS) 605799469 17. Award Action Type 6. Recipient's Unique Entity Identifier (UEI) Administrative Action HD1WMN6945W6 18. Is the Award R&D? 7. Project Director or Principal Investigator No Mr. Jeffrey P Lane JD, MPH Summary Federal Award Financial Information Professor 19. Budget Period Start Date 09/30/2024 - End Date 09/29/2025 20. Total Amount of Federal Funds Obligated by this Action 8. Authorized Official 20a. Direct Cost Amount Mr. Tim Mhyre 20b. Indirect Cost Amount Manager, Proposals & Awards - Team Gold 21. Authorized Carryover 22. Offset 23. Total Amount of Federal Funds Obligated this budget period **Federal Agency Information** 24. Total Approved Cost Sharing or Matching, where applicable CDC Office of Financial Resources 25. Total Federal and Non-Federal Approved this Budget Period 9. Awarding Agency Contact Information 26. Period of Performance Start Date 09/30/2021 - End Date 09/29/2026 Jenise Yawn 27. Total Amount of the Federal Award including Approved Grants Management Officer Cost Sharing or Matching this Period of Performance \$5,566,457.00 28. Authorized Treatment of Program Income **10.Program Official Contact Information** ADDITIONAL COSTS Ms. Sherry Gilbert 29. Grants Management Officer - Signature Francis Muriithi Grants Management Officer

30. Remarks

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$965,932.00

\$965,932.00

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 Page 77 of 96 PageID Notice of Award

DEPARTMENT OF HEALTH AND HUMAN SERVICES



Award# 6 NU2GGH002374-04-04 FAIN# NU2GGH002374

Federal Award Date: 02/05/2025

Recipient Information	33. Approved Budget (Excludes Direct Assistance)	
Recipient Name UNIVERSITY OF WASHINGTON	 Financial Assistance from the Federal Awarding A I. Total project costs including grant funds and all 	
4333 Brooklyn Ave NE Seattle, WA 98195-0001 [NoPhoneRecord]	 a. Salaries and Wages b. Fringe Benefits c. TotalPersonnelCosts 	\$402,032.00 \$74,701.00 \$476,733.00
Congressional District of Recipient 07 Payment Account Number and Type 1916001537A1 Employer Identification Number (EIN) Data 916001537 Universal Numbering System (DUNS) 605799469 Recipient's Unique Entity Identifier (UEI) HD1WMN6945W6	 d. Equipment e. Supplies f. Travel g. Construction h. Other i. Contractual 	\$0.00 \$51,514.00 \$129,638.00 \$0.00 \$71,466.00 \$95,776.00
	j. TOTAL DIRECT COSTS k. INDIRECT COSTS	\$825,127.00 \$140,805.00
31. Assistance Type Cooperative Agreement 32. Type of Award Other	1. TOTAL APPROVED BUDGET m. Federal Share n. Non-Federal Share	\$965,932.00 \$965,932.00 \$0.00

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	ASSISTANCE LISTING	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
4-9390NMK	21NU2GGH002374	CGH	41.51	93.067	\$0.00	75-19-2428-1031-001
4-9390LYJ	21NU2GGH002374	CGH	41.51	93.067	\$0.00	75-19-2327-1031-001

Case 1:25-cv-00039-JJM-PAS Document 66-1 Filed 02/07/25 Page 78 of 96 PageID DEPARTMENT OF HEALTH AND HUNAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 6 NU2GGH002374-04-04 FAIN# NU2GGH002374 Federal Award Date: 02/05/2025

Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

Case 1:25-cv-00039-JJM-PAS

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#: 921

AWARD ATTACHMENTS

UNIVERSITY OF WASHINGTON

6 NU2GGH002374-04-04

1. Terms and Conditions

ocument 66-1 #: 922

TERMS & CONDITIONS

As noted in previous communications regarding this cooperative agreement, in accordance with the *President's Executive Order on Reevaluating and Realigning United States Foreign Aid*, all activities involving PEPFAR funds were paused, including activities conducted under subawards and subcontracts, during the 90-day review called for in this executive order.

Pursuant to a **Limited Waiver to the Pause of U.S. Foreign Assistance for Life-Saving HIV Service Provision**, CDC is permitting that this pause be partially lifted (i.e., that work may be partially resumed) for activities under this agreement **ONLY as they pertain to the permitted activities described in the attachments to this letter.** All other activities remain paused until further notice.

To proceed, recipients must review their previously-approved work plan and determine which activities, if any, can resume in accordance with the limited waiver guidance listed in the attachments. Recipients should reduce their proposed budget to reflect the adjustment of their workplan through April 19, 2025. Recipients must continue to minimize costs during this period of partial award resumption, and maintain records of reasonable, allocable, and allowable costs incurred to implement activities implemented under this waiver for CDC's review.

For the period from receipt of this notice to CDC's approval of a revised work plan and revised budget, recipients may only incur costs related directly to activities in their previously approved work plan that are permitted to resume under the limited waiver and described in Attachment 1.

Please submit the following 3 documents as an amendment in GrantSolutions by 5pm Eastern Time on Tuesday, February 11, 2025:

- 1) A limited scope workplan and rescoped budget clearly identifying the activities covered under the partial waiver and what activities must remain suspended. This revised budget should cover activities through April 19, 2025. No new activities can be proposed at this time. Your revised submission must align with the original workplan and budget under this cooperative agreement and must maintain activities at either previous or reduced levels. No new activities may be proposed, and no significant shifts in budget may be made for positions or activities from activities that will remain suspended to activities that are permitted under this limited waiver.
- An interim Federal Financial Report (FFR) for the current budget period, reflecting all unliquidated obligations for activities that occurred before January 24, 2025 and incurred costs associated with the stop-work order.
- 3) A separate written certification on official letterhead that confirms:
 - a. Your organization will only undertake activities within the scope of the limited waiver (described in this notification in Attachment 1) under this cooperative agreement, AND
 - b. Your organization will not implement activities related to abortion services, family planning, conferences, administrative costs outside the scope of the limited waiver, gender ideology or diversity, equity, and inclusion (DEI) ideology programs, transgender surgeries, or other forms of non-lifesaving assistance.
 - c. Written certification of your compliance with the limited waiver will be due on a monthly basis, on a schedule and submission mechanism to be shared by CDC.

CDC will review your workplan and budget submission and confirm the activities that may resume under the partial waiver and the activities that must remain suspended. An updated Notice of Award will be issued and will confirm the activities approved to move forward and when work may resume.

Redirection requests to move funds from excluded activities to approved activities will not be approved.

No submission is required if your cooperative agreement does not implement any of the activities currently permitted under the waiver as set out in the attachments. Activities not approved through this limited waiver are not permitted.

All existing terms and conditions of the Award remain unchanged and are in full force and effect.

If you have questions or need additional clarification about this notice, including regarding your work plan or budget revision, please contact your CDC Project Officer, Grants Management Officer, or Grants Management Specialist.

Manual Drawdown

Payment under this award will be on the manual payment method. For recipients placed on manual drawdown, the GMO/GMS will monitor and control all payment advances for the award. The recipient must submit the following documentation to the GMO/GMS of record for payment: a Standard Form (SF) 270 - Request for Advance or Reimbursement, a disbursement plan that reflects costs associated with this award, and any additional documentation to support the request (i.e. planned programmatic expenses, invoices, credit card statements, travel documents, proof of payment, etc.). It is imperative for the recipient to ensure all submitted documentation is signed and dated by someone in the organization authorized to request and approve funds. All of the required documentation must be emailed to your assigned CDC GMO or GMS.

For additional information and/or to obtain your agency point of contact at the PMS, see, https://pms.psc.gov/find-pms-liaison-accountant.html

For Activities that Remain Suspended

Activities not permitted under the limited waiver must remain suspended. The costs associated with suspension of activities and stoppage of work, including reasonable and legitimate costs of compliance with local labor laws, existing contractual obligations that cannot be legally paused, and costs associated with the security of assets – may be incurred during the duration of the suspension and may be allowable for payment, until further guidance is provided by CDC. Any costs incurred prior to January 24, 2025, may be allowable for payment.

#: 924

Attachment 1

For purposes of this limited waiver, life-saving humanitarian assistance applies only to:

- Delivery of life-saving HIV care and treatment services through support for health workers (doctors, nurses, and other clinical and community health workers, etc.) delivering or monitoring HIV care and treatment to ensure continuity of service provision. These workers deliver care at hospitals, primary healthcare clinics, faith-based clinics, and community settings.
 - Provision of HIV **testing** for adults and children in community and facility settings.
 - Provision of HIV drugs and support to prevent treatment interruptions for adults and children in community and facility settings.
 - Provision of care for advanced HIV disease, including CD4 testing (immune function test), prevention and treatment of opportunistic infections, and HIV treatment adherence support.
 - Provision of HIV viral load testing, which allows patient monitoring to ensure that HIV drug treatments are effective.
 - Provision of tuberculosis preventive therapy (TPT) and Tuberculosis Treatment, as TB is the largest killer of people living with HIV.
- Support for transportation, storage, distribution, and management of HIV care and treatment commodity supply chain to ensure timely provision of medications and tests to patients
- Procurement of HIV medicines and other commodities required for provision of HIV care and _ treatment services to prevent stockouts in national HIV programs (e.g., HIV drugs, HIV test kits, early infant HIV tests, viral load tests and lab equipment for clinical monitoring, TB prevention and treatment drugs, opportunistic infection medicines for advanced HIV disease).
- Prevention of Mother-to-Child Transmission of HIV, which consists of testing and re-testing pregnant and breastfeeding women, providing HIV prevention services for [pregnant] women who are HIV negative including Pre-exposure Prophylaxis (PrEP) and HIV treatment drugs for [pregnant] women who are positive, HIV testing for partners, early infant diagnosis tests, and comprehensive care for infants.
- Support for transportation, storage, distribution and management of HIV commodity supply chain to ensure timely provision of medications for PMTCT.
- Focused data and systems maintenance activities in support of the above areas. _
- Reasonable administrative costs as necessary to deliver such assistance and provide oversight and compliance.

This limited waiver excludes any activities that involve abortions, family planning, conferences, gender or DEI ideology programs, transgender surgeries, and administrative costs other than those listed in #3 above, or other non-life saving assistance.

Attachment 2

Confirmation of Termination of DEIA Activities

On January 24, 2025, all CDC recipients received a formal letter implementing the Executive Order entitled Ending Radical and Wasteful Government DEI Programs and Preferencing and Initial Recissions of Harmful Executive Orders and Action. This letter required the immediate termination of all programs, personnel, activities, or contracts promoting "diversity, equity, and inclusion" (DEI) at every level and activity, regardless of location or the citizenship of employees or contractors. The letter also stated that no additional costs can be incurred to support any DEI programs, personnel, or activities.

By Monday, January 27, 2025, recipients were required to email ski.org with their CDC award number in the subject line, confirming that any and all DEI programs, personnel, or activities funded with CDC resources were terminated or closed. Compliance is required for each individual cooperative agreement funded with PEPFAR funding.

Termination of Gender Ideology Activities

As directed in the limited waiver provided for the use of funds under this award, recipients of PEPFAR funding from CDC are required to terminate all programs, personnel, activities, or contracts promoting or inculcating gender ideology.

#: 926

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Exhibit K

From:	Lydia Chwastiak
To:	Jeff Lane; Ivonne X Butler; Christopher B. Behrens; Matthew Golden; Range, Ellen (ATG); Misti McDowell
Subject:	FW: Update on Limited Waiver
Date:	Thursday, February 6, 2025 8:35:53 AM
Attachments:	image001.png
	image002.jpg
	image003.jpg
	image004.jpg
	image005.jpg
	image006.jpg
	GHSD_PEPFAR_Limited Waiver - Approved Activities_02062025.pdf

[EXTERNAL]

ACP
From: Perlman, Jaclyn (HRSA)
Date: Thursday, February 6, 2025 at 8:18 AM
To: Misti McDowell Lydia Chwastiak
Cc: Khalaf, Mohammad (HRSA) Foradori, Laura (HRSA)
Hall, Carolyn (HRSA)
Subject: Update on Limited Waiver

Hi Misti and Lydia,

As noted in previous communications regarding this cooperative agreement, in accordance with the *President's Executive Order on Reevaluating and Realigning United States Foreign Aid*, all activities involving PEPFAR funds were paused, including activities conducted under subawards and subcontracts, during the 90-day review called for in this executive order.

Pursuant to a Limited Waiver to the Pause of U.S. Foreign Assistance for Life-Saving HIV Service Provision, this pause may be partially lifted (i.e., that work may be partially resumed) for activities under this agreement ONLY as they pertain to the permitted activities described in the attachments to this letter. All other activities remain paused until further notice.

To proceed, recipients must review their previously approved work plan and determine which activities and associated costs, if any, can resume in accordance with the limited waiver guidance listed in the attachments. Please submit a list of activities, justification, and associated costs from your work plan that you have identified as qualifying under the limited waiver.

HRSA will review your workplan and proposed budget submission and confirm the activities that may resume under the partial waiver and the activities that must remain suspended.

An updated Notice of Award will be issued and will confirm the activities approved to move forward and when work may resume.

No submission is required if your cooperative agreement does not implement any of the activities currently permitted under the waiver as set out in the attachments. Activities not approved through this limited waiver are not permitted.

If you have questions or need additional clarification about this notice, including regarding your work plan or budget revision, please contact your HRSA Project Officer.

Please send your submissions to your Project Officer by Monday, February 10, 2025.

Many thanks, Jaclyn

Jaclyn Perlman, MPH Senior Public Health Analyst



Document 66-1



Global Health Security and Diplomacy U.S. DEPARTMENT of STATE

HIV Care & Treatment and Prevention of Mother to Child Transmission Activities **Approved Under PEPFAR Limited Waiver**

February 6, 2025

PEPFAR-supported life-saving HIV Care & Treatment and Prevention of Mother to Child Transmission (PMTCT) services should be resumed as soon as possible. PEPFAR implementing agencies should take necessary actions to expedite resumption of these services.

This document is intended to provide additional clarification of activities approved under the PEPFAR 90-Day Limited Waiver. Activities not specifically listed should not be resumed. If further clarification is needed, send an email to ghsd_pq@state.gov. Resumption of activities approved under the PEPFAR 90-day waiver is limited to activities within previously approved PEPFAR Country and Regional Operational Plans.

"For purposes of this limited waiver, life-saving humanitarian assistance applies only to: Delivery of life-saving HIV care and treatment services through support for health workers (doctors, nurses, and other clinical and community health workers, etc.) delivering or monitoring HIV care and treatment to ensure continuity of service provision. These workers deliver care at hospitals, primary healthcare clinics, faith-based clinics, and community settings."

Salaries for health workers, laboratory, and supply chain staff necessary to carry out the specific activities described in this document are included in this waiver.

HIV Testing Services for All Populations [For HIV Case Finding, Re-entry in Care, and PMTCT]

- "Provision of HIV testing in community and facility settings" – To identify people living with HIV
 - Referral and navigation to confirmatory HIV testing (including for those who screen positive with an HIV self-test)
 - Referral and navigation to antiretroviral treatment (ART) for those with a positive HIV test
 - Referral and navigation as appropriate to PMTCT services
- HIV screening for people diagnosed with TB: All individuals who are either diagnosed with or presenting with pulmonary or extrapulmonary symptoms of tuberculosis should be tested for HIV
- All PMTCT and HIV exposed infant (HEI)-related testing, inclusive of:

- ANC1 testing
- Retesting during pregnancy and breastfeeding (Post ANC1 testing)
- o Testing at all maternal and child health (MNCH)/PMTCT points of entry
- Testing for PrEP initiation and continuation for pregnant and breastfeeding women
- o Partner Testing
- Early Infant Diagnosis (EID)
- EID (before 2 months and 12 months) at postnatal, well-child/immunization, and other pediatric entry points
- Broader EID coverage at <8 weeks of age, including HIV birth testing and linkage to treatment <4 weeks
- Procurement and distribution of HIV test kits, including HIV self-test kits, and referral/follow-up for confirmatory testing and ART for those who test positive
- Supply chain support for HIV testing commodities and lab commodities needed to support HIV testing

HIV Care and Treatment Services for All PLHIV

- "Provision of HIV drugs and support to prevent treatment interruptions for adults and children in community and facility settings."
- "Provision of care for advanced HIV disease, including CD4 testing (immune function test), prevention and treatment of opportunistic infections, and HIV treatment adherence support."
- "Provision of HIV viral load testing, which allows patient monitoring to ensure that HIV drug treatments are effective."
- Specific components of HIV care and treatment that should be supported:
 - Care and treatment services provided in stand-alone programs; HIV testing and treatment in community settings – including locations where individuals can access HIV care and treatment services outside of a hospital or clinic, such as mobile clinics and drop-in centers for provision of services to persons at high risk for or living with HIV.
 - Linkage to ART, including counseling and treatment literacy
 - Differentiated service delivery models, including community ART and multimonth dispensing (MMD)
 - ART optimization for PLHIV
 - Nutrition support for malnourished PLHIV
 - Tracing and returning to care individuals who have missed appointments or had treatment interruption
 - Adherence counseling, peer support, and follow-up to promote continuity of treatment, including facility- or community-based peer support groups
 - Rapid HIV testing, counseling and provision of HIV post-exposure prophylaxis for individuals with HIV exposure, STI screening and presumptive treatment, and referrals for survivors of sexual violence as necessary
 - Viral Load: Facility and community-based viral load sample collection

Laboratory support

- Quality control/quality assurance/proficiency testing and quality indicator monitoring required to ensure accurate and valid test results
- Sample collection, processing, transport, and result return
- Laboratory and point of care testing site equipment service/repair and preventive maintenance/calibration required for biosafety/biosecurity and provision of accurate test results
- Use of laboratory information systems

Supply Chain Management

- "Procurement of HIV medicines and other commodities required for provision of HIV care and treatment services to prevent stockouts in national HIV programs (e.g., HIV drugs, HIV test kits, early infant HIV tests, viral load tests and lab equipment for clinical monitoring, TB prevention and treatment drugs, opportunistic infection medicines for advanced HIV disease)."
- "Support for transport, storage, distribution, and management of HIV care and treatment commodity supply chain to ensure timely provision of medications and tests to patients"

Pediatric and Adolescent Specific Considerations

- Pediatric or adolescent specific case finding and care and treatment activities
- Family-based differentiated service delivery models that deliver HIV treatment, continuity of treatment, and adherence support such as MMD for children, familycentered models of care, Mentor Mothers, and peer support programs
- Optimizing CLHIV to DTG-based regimens and transition to pALD from pDTG-based ART when pALD is available in country. Provision of appropriate counseling and adherence support to children and their caregivers to support this transition.
- Care & Treatment services for PLHIV and CLHIV delivered through the orphans and vulnerable children (OVC) program that directly impact clinical outcomes as listed above. These include:
 - Referring children with an unknown HIV Status for HIV testing
 - Linkage of the caregiver living with HIV or CLHIV to ART, adherence counseling and VL testing
 - Routine home visits and follow ups for CLHIV who have had an interruption in treatment
 - Nutritional assistance for malnourished CLHIV
 - Support for early infant diagnostic testing of HIV-exposed infants
- Supportive models for adolescents living with HIV may include mobile units, hybrid models and adolescent-friendly provider treatment services

PMTCT and HIV-Exposed Infants (HEI) Specific Considerations

"Prevention of Mother-to-Child Transmission of HIV, which consists of testing and re-testing pregnant and breastfeeding women, providing HIV prevention services for [pregnant and breastfeeding] women who are HIV negative including Pre-exposure Prophylaxis (PrEP) and HIV treatment drugs for pregnant and breastfeeding women who are positive, HIV testing for partners, early infant diagnosis tests, and comprehensive care for infants."

"Support for procurement, transportation, storage, distribution and management of HIV commodity supply chain to ensure timely provision of medicines and medical commodities for PMTCT."

- Services to address early identification, treatment linkage/continuity, and viral load suppression for pregnant and breastfeeding women:
 - Community case workers to perform household risk-assessments to identify support services needed for exposed mother-baby pairs
 - Joint OVC partner and PMTCT cadre/mentor mothers visits to provide peer support for ART adherence
 - Community and facility adherence support groups
 - Longitudinal tracking for mother-baby pairs by facility and community health workers until final outcome
- Services to prevent HIV incident infections among pregnant and breastfeeding women and their infants:
 - Pre-exposure prophylaxis (PrEP) should be offered only to pregnant and breastfeeding women (PBFW). PBFW may receive either oral or long-acting PrEP.
 - Partner testing and distribution of condoms to PBFW and their partners as part of PMTCT services.
- Services for infants exposed to HIV:
 - Registration of HIV-exposed infants (HEI) in birth cohort
 - Timely initiation of appropriate infant postnatal prophylaxis (PNP) regimens for high-risk infants born to mothers living with HIV and comprehensive HEI services

Advanced HIV Disease – [Prevention and Treatment of Opportunistic Infections]

"Life-saving HIV care and treatment services, inclusive of HIV testing and counseling, prevention and treatment of opportunistic infections including TB, laboratory services, and procurement and supply chain for commodities/medicines."

Included in waiver:

- Advanced HIV Disease (AHD) Diagnostics and Treatment
 - o LF-LAM
 - o Molecular diagnostic tests for TB
 - o Cryptococcal antigen testing (CrAg)
 - o Lumbar puncture and testing of spinal fluid
 - o CD4 testing

- o Diagnosis of Histoplasmosis and talaromycosis where applicable
- Prevention of OIs: per normative guidance
 - o Cotrimoxazole
 - o Fluconazole
 - o TB preventive treatment
- Treatment of Ols
 - o Fluconazole
 - o Flucytosine
 - o Liposomal amphotericin B
- Testing for OIs (laboratory services)
 - o Laboratory services as necessary
 - o Imaging services as necessary
- Laboratory support for AHD activities including:
 - o Sample collection, processing, transport, and result return
 - o Quality control/quality assurance/proficiency testing and quality indicator monitoring required to ensure accurate and valid test results.
 - Laboratory and point of care testing site equipment service/repair and preventative maintenance/calibration required for biosafety/biosecurity and provision of accurate test results
 - o Use of laboratory information systems

Life-threatening opportunistic Infection: TB Activities

- TB screening and TB diagnosis of People Living with HIV (PLHIV)
 - Facilities that provide care to people living with HIV should screen all PLHIV for TB using available methods, which may include molecular diagnostic tests, chest X-ray, stool-based testing, LF-LAM assay and symptom screening per normative guidance
- Referral for Tuberculosis Treatment
 - o Any person living with HIV who has active TB disease should be referred for treatment using anti-TB medications per routine protocols and following normative guidance
- TB Preventive Therapy
 - All people living with HIV who do not have active TB disease should be provided a full course of TB Preventive Therapy for TB prevention
- Laboratory Support for TB activities, including:
 - o Sample collection, processing, transport, and result return
 - o Quality control/quality assurance/proficiency testing and quality indicator monitoring required to ensure accurate and valid test results.
 - Laboratory and point of care testing site equipment service/repair and preventative maintenance/calibration required for biosafety/biosecurity and provision of accurate test results
 - o Use of laboratory information systems

Life-threatening Cervical Cancer among Women living with HIV (WLHIV)

- Given that Cervical Cancer is an opportunistic cancer, all Women living with HIV (WLHIV) should be screened for cervical cancer in the 12 Go Further Countries (Botswana, Eswaitini, Ethiopia, Kenya, Lesotho, Mozambique, Malawi, Namibia, Tanzania, Uganda, Zambia, Zimbabwe).
- Use of "screen and treat" or "screen, triage, and treat" approach followed by immediate treatment of precancerous lesions for WLHIV
 - Cervical pre-cancer can be treated with cryotherapy, thermo-coagulation, LEEP or cold knife conization (for eligible lesions).
 - Sites providing cervical cancer screening that do not provide precancerous lesion treatment should establish a referral system for WLHIV needing treatment or a more definitive diagnosis.
- Additional evaluation and treatment at the same facility or referral to established treatment referral sites for WLHIV with suspected invasive cervical cancer.

HIV Pre-exposure Prophylaxis (PrEP)

Pre-exposure prophylaxis (PrEP) should be offered <u>only</u> to pregnant and breastfeeding women (PBFW; see section above) during this pause of U.S. Foreign Assistance. PBFW may receive either oral or long-acting PrEP.

• Note: People other than PBFW who may be at high risk of HIV infection or were previously initiated on a PrEP option <u>can not</u> be offered PEPFAR-funded PrEP during this pause of U.S. Foreign Assistance or until further notice.

Administrative Costs:

The waiver in State ALDAC 25 STATE 6828 "for salaries and related administrative expenses, including travel, for U.S. direct hire employees, personal services contractors, and locally employed staff," continues to allow for expenses required to operate U.S. Government offices responsible for oversight and management of the PEPFAR program including but not limited to: staff communications devices, IT support and services, software licenses, rent, ICASS, office supplies as well as indirect costs that are operating expenses including payroll systems, accounting and financial management utilities, security, facility lease, and building maintenance.

The PEPFAR limited waiver also allows for administrative expenses to include other contract and grant related administrative expenses at headquarters and in country, including third party contract support, reasonably necessary to provide the care and treatment and PMTCT activities listed above. Agencies and implementing partners should be judicious in ensuring that any administrative costs are necessary for the performance and oversight/management of the care and treatment and PMTCT activities listed above.

Data and Systems Activities Approved Under PEPFAR Waiver to Support HIV Care & Treatment and PMTCT Activities

Overview: This document clarifies elements of monitoring, data, and systems related activities covered under the PEPFAR limited waiver.

Timeline for Reporting: We do not currently expect FY25Q1 reporting to proceed as scheduled given reporting period occurred during the pause, disrupting operation of country and central data systems and their support teams. We anticipate a resumption of reporting according to **new guidelines** in time for FY25Q2 reporting with specific guidance forthcoming.

Covered under the Waiver

"Reasonable implementing agency and implementing partner administrative costs strictly necessary to deliver and provide oversight of this assistance, including related countrybased data activities and portions of PEPFAR's central data platform used for clinical monitoring and program management"

Country-Level Health Information Systems Support that is allowed:

- Support for the operations, maintenance, and use of current facility and community, and national data systems (including paper and electronic record systems) necessary for patient management and program monitoring in the provision of the services covered in the waiver. This includes:
 - Clinical systems, Electronic medical records, community-based information systems for testing and treatment delivery (not community led monitoring), DHIS2 systems, central data repositories, warehouse management systems, case-based surveillance systems, laboratory information systems, logistics management information systems, commodity systems, procurement systems, stock out systems, pharmacy information systems supply chain systems, contact tracing systems essential for index testing, and all other systems required to support the activities covered in the waiver and provide necessary oversight and compliance.
- Support to other country-data systems necessary to provide the services covered in the waiver to ensure program oversight and compliance, including routine program monitoring and reporting. This includes:
 - Data & IT workforce necessary to operate, maintain and secure the systems and data for PEPFAR program monitoring, oversight, reporting, and compliance.

Headquarters-Level Information Systems (Including PEPFAR Centrally Supported Systems) that is allowed:

- To support the activities covered in the waiver and provide necessary oversight and compliance; systems support, and activities covered include:
 - Support for data collection and ingestion systems; including system operations, cybersecurity compliance, and end user support
 - Support for data management and infrastructure system updates to facilitate streamlined data submission processes.
 - Support for enterprise analytics systems including data engineering and management activities as well as help desk and systems administration.
 - Support for knowledge management and collaboration systems; including restoring PEPFAR SharePoint platform in the in short term and simultaneously investigating alternative platforms that can provide cost savings and better integration
 - Activities including webinars and/or support calls to provide instructions and support for developing data submissions and import files.

Staff:

• All data and systems related staff required to enter, operate, manage, secure, analyze, and otherwise make function the data and systems to support the provision of activities covered by the waiver in country and at HQ.

Indicators:

These include quarterly, semi-annual, and annual indicators. Data for the following indicators should be collected, as best as possible given constraints on feasibility both in country and centrally, even though the indicators reported annually are not expected to be reported during the waiver period.

- 1. HTS_TST
- 2. HTS_INDEX
- 3. HTS_SELF
- 4. CXCA_SCRN
- 5. CXCA_TX
- 6. PMTCT_EID
- 7. PMTCT_FO (reported at Q4)
- 8. PMTCT_HEI
- 9. PMTCT_STAT
- 10. PrEP_CT for Pregnant and Breastfeeding women only
- $11.\, \rm PrEP_NEW$ for Pregnant and Breastfeeding women only
- 12. TB_STAT
- 13. PMTCT_ART
- 14. TB_ART
- $15. \text{TB}_{\text{PREV}}$

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- 16.TX_CURR
- 17.TX ML
- 18.TX NEW
- 19. TX TB
- 20. TX RTT
- 21.TX_PVLS
- 22. LAB PTCQI (reported at Q4)

Not Covered under the Waiver:

Systems support that is not allowed:

- Support for the operations, maintenance, and use of data systems designed exclusively for services not covered in the waiver
- Expanding current data systems or developing new data systems
- DREAMS information systems
- OVC information systems that focus exclusively on elements not focused on care and treatment

Activities that are not allowed:

- Population-based HIV surveys (PHIA and BBS)
- Violence against children (VACs) surveys
- Program-based HIV surveillance (e.g., case surveillance, recent infection surveillance, HIV drug resistance surveillance, ANC surveillance, mortality surveillance, etc.)
- Community-led monitoring information systems
- Implementation science projects
- Planning and targeting for FY2026

Staff:

Staff associated with activities not covered under the waiver

Indicators:

- 1. AGYW_PREV
- 2. GEND_GBV
- 3. KP_PREV
- 4. OVC_SERV
- 5. OVC_HIVSTAT
- 6. PrEP_CT (for all populations except Pregnant and Breastfeeding Women)
- 7. PrEP_NEW (for all populations except Pregnant and Breastfeeding Women)
- 8. VMMC_CIRC
- 9. SC_ARVDISP (optional under MER 2.8)

Disaggregates:

The KP disaggregates are removed from the indicators covered under the indicator. They are also removed from the MER guidance, data entry screens, and from the data model.

