

113<sup>TH</sup> CONGRESS  
1<sup>ST</sup> SESSION

# S. 1545

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## AN ACT

To extend authorities related to global HIV/AIDS and to promote oversight of United States programs.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “PEPFAR Stewardship  
3 and Oversight Act of 2013”.

4 **SEC. 2. INSPECTOR GENERAL OVERSIGHT.**

5 Section 101(f)(1) of the United States Leadership  
6 Against HIV/AIDS, Tuberculosis, and Malaria Act of  
7 2003 (22 U.S.C. 7611(f)(1)) is amended—

8 (1) in subparagraph (A), by striking “5 coordi-  
9 nated annual plans for oversight activity in each of  
10 the fiscal years 2009 through 2013” and inserting  
11 “coordinated annual plans for oversight activity in  
12 each of the fiscal years 2009 through 2018”; and

13 (2) in subparagraph (C)—

14 (A) in clause (ii)—

15 (i) in the heading, by striking “SUB-  
16 SEQUENT” and inserting “2010 THROUGH  
17 2013”; and

18 (ii) by striking “the last four plans”  
19 and inserting “the plans for fiscal years  
20 2010 through 2013”; and

21 (B) by adding at the end the following new  
22 clause:

23 “(iii) 2014 PLAN.—The plan devel-  
24 oped under subparagraph (A) for fiscal  
25 year 2014 shall be completed not later  
26 than 60 days after the date of the enact-

1                   ment of the PEPFAR Stewardship and  
2                   Oversight Act of 2013.

3                   “(iv) SUBSEQUENT PLANS.—Each of  
4                   the last four plans developed under sub-  
5                   paragraph (A) shall be completed not later  
6                   than 30 days before each of the fiscal  
7                   years 2015 through 2018, respectively.”.

8 **SEC. 3. ANNUAL TREATMENT STUDY.**

9           (a) ANNUAL STUDY; MESSAGE.—Section 101(g) of  
10 the United States Leadership Against HIV/AIDS, Tuber-  
11 culosis, and Malaria Act of 2003 (22 U.S.C. 7611(g)) is  
12 amended—

13           (1) in paragraph (1), by striking “through Sep-  
14           tember 30, 2013” and inserting “through September  
15           30, 2019”;

16           (2) by redesignating paragraph (2) as para-  
17           graph (3);

18           (3) by inserting after paragraph (1) the fol-  
19           lowing new paragraph:

20           “(2) 2013 THROUGH 2018 STUDIES.—The stud-  
21           ies required to be submitted by September 30, 2014,  
22           and annually thereafter through September 30,  
23           2018, shall include, in addition to the elements set  
24           forth under paragraph (1), the following elements:

1           “(A) A plan for conducting cost studies of  
2           United States assistance under section 104A of  
3           the Foreign Assistance Act of 1961 (22 U.S.C.  
4           2151b–2) in partner countries, taking into ac-  
5           count the goal for more systematic collection of  
6           data, as well as the demands of such analysis  
7           on available human and fiscal resources.

8           “(B) A comprehensive and harmonized ex-  
9           penditure analysis by partner country, includ-  
10          ing—

11                 “(i) an analysis of Global Fund and  
12                 national partner spending and comparable  
13                 data across United States, Global Fund,  
14                 and national partner spending; or

15                 “(ii) where providing such comparable  
16                 data is not currently practicable, an expla-  
17                 nation of why it is not currently prac-  
18                 ticable, and when it will be practicable.”;  
19                 and

20           (4) by adding at the end the following new  
21          paragraph:

22                 “(4) PARTNER COUNTRY DEFINED.—In this  
23                 subsection, the term ‘partner country’ means a coun-  
24                 try with a minimum United States Government in-

1 vestment of HIV/AIDS assistance of at least  
2 \$5,000,000 in the prior fiscal year.”.

3 **SEC. 4. PARTICIPATION IN THE GLOBAL FUND TO FIGHT**  
4 **AIDS, TUBERCULOSIS, AND MALARIA.**

5 (a) LIMITATION.—Section 202(d)(4) of the United  
6 States Leadership Against HIV/AIDS, Tuberculosis, and  
7 Malaria Act of 2003 (22 U.S.C. 7622(d)(4)) is amended—

8 (1) in subparagraph (A)—

9 (A) in clause (i), by striking “2013” and  
10 inserting “2018”;

11 (B) in clause (ii)—

12 (i) by striking “2013” and inserting  
13 “2018”; and

14 (ii) by striking the last two sentences;

15 and

16 (C) in clause (vi), by striking “2013” and  
17 inserting “2018”; and

18 (2) in subparagraph (B)—

19 (A) by striking “under this subsection”  
20 each place it appears;

21 (B) in clause (ii), by striking “pursuant to  
22 the authorization of appropriations under sec-  
23 tion 401” and inserting “to carry out section  
24 104A of the Foreign Assistance Act of 1961”;

25 and

1 (C) in clause (iv), by striking “2013” and  
2 inserting “2018”.

3 (b) WITHHOLDING FUNDS.—Section 202(d)(5) of the  
4 United States Leadership Against HIV/AIDS, Tuber-  
5 culosis, and Malaria Act of 2003 (22 U.S.C. 7622(d)) is  
6 amended by—

7 (1) in paragraph (5)—

8 (A) by striking “2013” and inserting  
9 “2018”;

10 (B) in subparagraph (C)—

11 (i) by inserting “in an open, machine  
12 readable format” after “site”;

13 (ii) by amending clause (v) to read as  
14 follows:

15 “(v) a regular collection, analysis, and  
16 reporting of performance data and funding  
17 of grants of the Global Fund, which covers  
18 all principal recipients and all subrecipi-  
19 ents on the fiscal cycle of each grant, and  
20 includes the distribution of resources, by  
21 grant and principal recipient and sub-  
22 recipient, for prevention, care, treatment,  
23 drugs, and commodities purchase, and  
24 other purposes as practicable;”;

1 (C) in subparagraph (D)(ii), by inserting  
2 “, in an open, machine readable format,” after  
3 “audits”;

4 (D) in subparagraph (E), by inserting “,  
5 in an open, machine readable format,” after  
6 “publicly”;

7 (E) in subparagraph (F)—

8 (i) in clause (i), by striking “; and”  
9 and inserting a semicolon; and

10 (ii) by striking clause (ii) and insert-  
11 ing the following new clauses:

12 “(ii) all principal recipients and sub-  
13 recipients and the amount of funds dis-  
14 bursed to each principal recipient and sub-  
15 recipient on the fiscal cycle of the grant;

16 “(iii) expenditure data—

17 “(I) tracked by principal recipi-  
18 ents and subrecipients by program  
19 area, where practicable, prevention,  
20 care, and treatment and reported in a  
21 format that allows comparison with  
22 other funding streams in each coun-  
23 try; or

24 “(II) if such expenditure data is  
25 not available, outlay or disbursement

1 data, and an explanation of progress  
2 made toward providing such expendi-  
3 ture data; and

4 “(iv) high-quality grant performance  
5 evaluations measuring inputs, outputs, and  
6 outcomes, as appropriate, with the goal of  
7 achieving outcome reporting;” and

8 (F) by amending subparagraph (G) to read  
9 as follows:

10 “(G) has published an annual report on a  
11 publicly available Web site in an open, machine  
12 readable format, that includes—

13 “(i) a list of all countries imposing  
14 import duties and internal taxes on any  
15 goods or services financed by the Global  
16 Fund;

17 “(ii) a description of the types of  
18 goods or services on which the import du-  
19 ties and internal taxes are levied;

20 “(iii) the total cost of the import du-  
21 ties and internal taxes;

22 “(iv) recovered import duties or inter-  
23 nal taxes; and

24 “(v) the status of country status-  
25 agreements;”.



1 **SEC. 5. ANNUAL REPORT.**

2 Section 104A(f) of the Foreign Assistance Act of  
3 1961 (22 U.S.C. 2151b–2(f)) is amended to read as fol-  
4 lows:

5 “(f) ANNUAL REPORT.—

6 “(1) IN GENERAL.—Not later than February  
7 15, 2014, and annually thereafter, the President  
8 shall submit to the Committee on Foreign Relations  
9 of the Senate and the Committee on Foreign Affairs  
10 of the House of Representatives a report in an open,  
11 machine readable format, on the implementation of  
12 this section for the prior fiscal year.

13 “(2) REPORT DUE IN 2014.—The report due not  
14 later than February 15, 2014, shall include the ele-  
15 ments required by law prior to the enactment of the  
16 PEPFAR Stewardship and Oversight Act of 2013.

17 “(3) REPORT ELEMENTS.—Each report sub-  
18 mitted after February 15, 2014, shall include the  
19 following:

20 “(A) A description based on internationally  
21 available data, and where practicable high-quality  
22 country-based data, of the total global bur-  
23 den and need for HIV/AIDS prevention, treat-  
24 ment, and care, including—

25 “(i) estimates by partner country of  
26 the global burden and need; and

1                   “(ii) HIV incidence, prevalence, and  
2                   AIDS deaths for the reporting period.

3                   “(B) Reporting on annual targets across  
4                   prevention, treatment, and care interventions in  
5                   partner countries, including—

6                   “(i) a description of how those targets  
7                   are designed to—

8                   “(I) ensure that the annual in-  
9                   crease in new patients on  
10                  antiretroviral treatment exceeds the  
11                  number of annual new HIV infections;

12                  “(II) reduce the number of new  
13                  HIV infections below the number of  
14                  deaths among persons infected with  
15                  HIV; and

16                  “(III) achieve an AIDS-free gen-  
17                  eration;

18                  “(ii) national targets across preven-  
19                  tion, treatment, and care that are—

20                  “(I) established by partner coun-  
21                  tries; or

22                  “(II) where such national partner  
23                  country-developed targets are unavail-  
24                  able, a description of progress towards

1 developing national partner country  
2 targets; and

3 “(iii) bilateral programmatic targets  
4 across prevention, treatment, and care, in-  
5 cluding—

6 “(I) the number of adults and  
7 children to be directly supported on  
8 HIV treatment under United States-  
9 funded programs;

10 “(II) the number of adults and  
11 children to be otherwise supported on  
12 HIV treatment under United States-  
13 funded programs; and

14 “(III) other programmatic tar-  
15 gets for activities directly and other-  
16 wise supported by United States-fund-  
17 ed programs.

18 “(C) A description, by partner country, of  
19 HIV/AIDS funding from all sources, including  
20 funding levels from partner countries, other do-  
21 nors, and the private sector, as practicable.

22 “(D) A description of how United States-  
23 funded programs, in conjunction with the Glob-  
24 al Fund, other donors, and partner countries,

1 together set targets, measure progress, and  
2 achieve positive outcomes in partner countries.

3 “(E) An annual assessment of outcome in-  
4 dicator development, dissemination, and per-  
5 formance for programs supported under this  
6 section, including ongoing corrective actions to  
7 improve reporting.

8 “(F) A description and explanation of  
9 changes in related guidance or policies related  
10 to implementation of programs supported under  
11 this section.

12 “(G) An assessment and quantification of  
13 progress over the reporting period toward  
14 achieving the targets set forth in subparagraph  
15 (B), including—

16 “(i) the number, by partner country,  
17 of persons on HIV treatment, including  
18 specifically—

19 “(I) the number of adults and  
20 children on HIV treatment directly  
21 supported by United States-funded  
22 programs; and

23 “(II) the number of adults and  
24 children on HIV treatment otherwise

1 supported by United States-funded  
2 programs;

3 “(ii) HIV treatment coverage rates by  
4 partner country;

5 “(iii) the net increase in persons on  
6 HIV treatment by partner country;

7 “(iv) new infections of HIV by part-  
8 ner country;

9 “(v) the number of HIV infections  
10 averted;

11 “(vi) antiretroviral treatment program  
12 retention rates by partner country, includ-  
13 ing—

14 “(I) performance against annual  
15 targets for program retention; and

16 “(II) the retention rate of per-  
17 sons on HIV treatment directly sup-  
18 ported by United States-funded pro-  
19 grams; and

20 “(vii) a description of supportive care.

21 “(H) A description of partner country and  
22 United States-funded HIV/AIDS prevention  
23 programs and policies, including—

24 “(i) an assessment by country of  
25 progress towards targets set forth in sub-

1 paragraph (B), with a detailed description  
2 of the metrics used to assess—

3 “(I) programs to prevent mother  
4 to child transmission of HIV/AIDS,  
5 including coverage rates;

6 “(II) programs to provide or pro-  
7 mote voluntary medical male circumci-  
8 sion, including coverage rates;

9 “(III) programs for behavior-  
10 change; and

11 “(IV) other programmatic activi-  
12 ties to prevent the transmission of  
13 HIV;

14 “(ii) antiretroviral treatment as pre-  
15 vention; and

16 “(iii) a description of any new pre-  
17 ventative interventions or methodologies.

18 “(I) A description of the goals, scope, and  
19 measurement of program efforts aimed at  
20 women and girls.

21 “(J) A description of the goals, scope, and  
22 measurement of program efforts aimed at or-  
23 phans, vulnerable children, and youth.

24 “(K) A description of the indicators and  
25 milestones used to assess effective, strategic,

1 and appropriately timed country ownership, in-  
2 cluding—

3 “(i) an explanation of the metrics  
4 used to determine whether the pace of any  
5 transition to such ownership is appropriate  
6 for that country, given that country’s level  
7 of readiness for such transition;

8 “(ii) an analysis of governmental and  
9 local nongovernmental capacity to sustain  
10 positive outcomes;

11 “(iii) a description of measures taken  
12 to improve partner country capacity to sus-  
13 tain positive outcomes where needed; and

14 “(iv) for countries undergoing a tran-  
15 sition to greater country ownership, a de-  
16 scription of strategies to assess and miti-  
17 gate programmatic and financial risk and  
18 to ensure continued quality of care for es-  
19 sential services.

20 “(L) A description, globally and by partner  
21 country, of specific efforts to achieve and  
22 incentivize greater programmatic and cost effec-  
23 tiveness, including—

24 “(i) progress toward establishing com-  
25 mon economic metrics across prevention,

1 care and treatment with partner countries  
2 and the Global Fund;

3 “(ii) average costs, by country and by  
4 core intervention;

5 “(iii) expenditure reporting in all pro-  
6 gram areas, supplemented with targeted  
7 analyses of the cost-effectiveness of specific  
8 interventions; and

9 “(iv) import duties and internal taxes  
10 imposed on program commodities and serv-  
11 ices, by country.

12 “(M) A description of partnership frame-  
13 work agreements with countries, and regions  
14 where applicable, including—

15 “(i) the objectives and structure of  
16 partnership framework agreements with  
17 countries, including—

18 “(I) how these agreements are  
19 aligned with national HIV/AIDS plans  
20 and public health strategies and com-  
21 mitments of such countries; and

22 “(II) how these agreements in-  
23 corporate a role for civil society; and

24 “(ii) a description of what has been  
25 learned in advancing partnership frame-



1 work agreements with countries, and re-  
2 gions as applicable, in terms of improved  
3 coordination and collaboration, definition  
4 of clear roles and responsibilities of partici-  
5 pants and signers, and implications for  
6 how to further strengthen these agree-  
7 ments with mutually accountable measures  
8 of progress.

9 “(N) A description of efforts and activities  
10 to engage new partners, including faith-based,  
11 locally-based, and United States minority-serv-  
12 ing institutions.

13 “(O) A definition and description of the  
14 differentiation between directly and otherwise  
15 supported activities, including specific efforts to  
16 clarify programmatic attribution and contribu-  
17 tion, as well as timelines for dissemination and  
18 implementation.

19 “(P) A description, globally and by coun-  
20 try, of specific efforts to address co-infections  
21 and co-morbidities of HIV/AIDS, including—

22 “(i) the number and percent of people  
23 in HIV care or treatment who started tu-  
24 berculosis treatment; and

1           “(ii) the number and percentage of el-  
2           igible HIV positive patients starting iso-  
3           niazid preventative therapy.

4           “(Q) A description of efforts by partner  
5           countries to train, employ, and retain health  
6           care workers, including efforts to address work-  
7           force shortages.

8           “(R) A description of program evaluations  
9           completed during the reporting period, includ-  
10          ing whether all completed evaluations have been  
11          published on a publically available Internet  
12          website and whether any completed evaluations  
13          did not adhere to the common evaluation stand-  
14          ards of practice published under paragraph (4).

15          “(4) COMMON EVALUATION STANDARDS.—Not  
16          later than February 1, 2014, the Global AIDS Coor-  
17          dinator shall publish on a publically available Inter-  
18          net website the common evaluation standards of  
19          practice referred to in paragraph (3)(R).

20          “(5) PARTNER COUNTRY DEFINED.—In this  
21          subsection, the term ‘partner country’ means a coun-  
22          try with a minimum United States Government in-  
23          vestment of HIV/AIDS assistance of at least  
24          \$5,000,000 in the prior fiscal year.”.

1 **SEC. 6. ALLOCATION OF FUNDING.**

2 (a) ORPHANS AND VULNERABLE CHILDREN.—Sec-  
3 tion 403(b) of the United States Leadership Against HIV/  
4 AIDS, Tuberculosis, and Malaria Act of 2003 (22 U.S.C.  
5 7673(b)) is amended—

6 (1) by striking “2013” and inserting “2018”;

7 and

8 (2) by striking “amounts appropriated pursuant  
9 to the authorization of appropriations under section  
10 401” and inserting “amounts appropriated or other-  
11 wise made available to carry out the provisions of  
12 section 104A of the Foreign Assistance Act of 1961  
13 (22 U.S.C. 2151b-2)”.

14 (b) FUNDING ALLOCATION.—Section 403(c) of the  
15 United States Leadership Against HIV/AIDS, Tuber-  
16 culosis, and Malaria Act of 2003 (22 U.S.C. 7673(c)) is  
17 amended—

18 (1) by striking “2013” and inserting “2018”;

19 and

20 (2) by striking “amounts appropriated for bilat-  
21 eral global HIV/AIDS assistance pursuant to section  
22 401” and inserting “amounts appropriated or other-  
23 wise made available to carry out the provisions of

1 section 104A of the Foreign Assistance Act of 1961  
2 (22 U.S.C. 2151b-2)”.  
Passed the Senate November 18, 2013.

Attest:

*Secretary.*



113<sup>TH</sup> CONGRESS  
1<sup>ST</sup> SESSION

**S. 1545**

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**AN ACT**

To extend authorities related to global HIV/AIDS  
and to promote oversight of United States pro-  
grams.