Exhibit A
Letter of Award

June 25, 2026

TO: CALIFORNIA PHASE I LOCAL HEALTH JURISDICTIONS ASSIGNED TO CALIFORNIA DEPARTMENT OF HEALTH, CENTER FOR INFECTIOUS DISEASES, OFFICE OF AIDS (PS24-0047)

SUBJECT: **AWARD LETTER** FY 2026-27 HIGH-IMPACT HIV PREVENTION & SURVEILLANCE PROGRAMS FOR HEALTH DEPARTMENTS – ENDING THE HIV EPIDEMICS (EHE).

The California Department of Public Health (CDPH), Office of AIDS (OA) is pleased to announce the availability of $8,977,024 million in Centers for Disease Control and Prevention (CDC) Federal Funds (PS24-0047) in fiscal year (FY) 2026-2027 for integrated high impact HIV prevention and surveillance programs at the local level to support ending the HIV epidemic in the United States. Ending the HIV epidemic (EHE) local program activities focus on extending the following goals:

Diagnose

- Increase HIV diagnoses by expanding routine opt-out HIV screening in healthcare settings.
- Develop and/or expand locally-tailored HIV testing programs to reach persons in non-healthcare settings.
- Increase at least yearly re-screening of persons at elevated risk for HIV in healthcare and non-healthcare settings.

Treat

- Ensure rapid linkage to HIV medical care and antiretroviral therapy initiation for all persons with newly diagnosed HIV.
- Support re-engagement and retention in HIV medical care and treatment adherence.

Prevent

- Accelerate efforts to increase pre-exposure prophylaxis (PrEP) use.

Respond

- Develop partnerships, processes, data systems, and policies for cluster detection and response.
- Investigate and intervene in networks with active transmission.
- Identify and address gaps in programs and services by cluster detection and response.

Continued Provisions

- Maximize recent innovations within each pillar and targeting efforts where they will have the greatest impact. To include strategies like expanding self-testing programs, ensuring routine screening in key settings with high prevalence, using telehealth, and leveraging real-time pharmacy data to support treatment adherence and re-engagement in care.
- Ensure resources are aligned with the geographic burden of HIV infections in each area and expanding local area specific planning to other affected communities.
- Expand the use of syndemic approaches to whole-person care by increasing the proportion of funds that award recipients can use to address intersecting epidemics from 5% to 10%.

The funding amount for PS24-0047, FY 2026 – 2027 (Year 3) will include funding for 12 months. Funding availability in subsequent fiscal years will be determined by satisfactory recipient performance and is subject to the availability of appropriated funds and federal award. These funds will be made available to support ending the EHE local programs on a yearly basis from June 1, 2026 – May 31, 2027. The amount of funding allocated is on an annual basis through a non-competitive formula.

This allocation table reflects the total funding across the entire grant award period contingent on the availability of appropriated funds and federal award.

GRANTEE	ALLOCATION AMOUNT					TOTAL
	FY 24/25	FY 25/26	FY 26/27	FY 27/28	FY 28/29	
Alameda	$635,267	$761,799	$761,799	$761,799	$761,799	$3,682,463
Orange	$875,252	$1,049,585	$1,049,585	$1,049,585	$1,049,585	$5,073,592
Riverside	$1,006,085	$1,206,476	$1,206,476	$1,206,476	$1,206,476	$5,831,989
Sacramento	$575,519	$690,151	$690,151	$690,151	$690,151	$3,336,123
San Bernardino	$771,921	$925,672	$925,672	$925,672	$925,672	$4,474,609
San Diego	$1,525,854	$1,829,774	$1,829,774	$1,829,774	$1,829,774	$8,844,950
TOTAL	$5,389,898	$6,463,457	$6,463,457	$6,463,457	$6,463,457	$31,243,726

The funds must be used to provide allowable EHE program activities at the local level. In addition, carryover of funds will not be allowed. All Grantees must adhere to the continuation of the existing EHE Scope of Work, and any subsequent revisions, along with all instructions, policy memorandums, or directives issued by CDPH/OA. CDPH/OA will make any changes and/or additions to these guidelines in writing and, whenever possible, notification of such changes shall be made 30 days prior to implementation.

To receive these funds, you must return the required budget documents by July 16, 2026. The documents should be e-mailed to Angelique.Skinner@cdph.ca.gov and cc: LeRoy.Blea@cdph.ca.gov and Jessica.Heskin@cdph.ca.gov.

We look forward to collaborating with you to support ending the HIV epidemic in the United States. If you have any questions, please contact LeRoy Blea at LeRoy.Blea@cdph.ca.gov.

Sincerely,

Marisa Ramos, Ph.D.
Chief, Office of AIDS
California Department of Public Health

cc: LeRoy Blea, MSW
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