Real-time Allotment Funding Fact Sheet

**Background**
Real-time Allotments (RTAs) are local assistance contracts awarded by the California Department of Public Health (CDPH) Tuberculosis Control Branch (TBCB) to local health jurisdictions that report less than 6 tuberculosis (TB) cases annually. The purpose of the funds is to augment local support for TB prevention, control and elimination activities. RTAs are comprised of both state funds and federal funds.

**How are RTA amounts determined?**
RTA awards for eligible jurisdictions are calculated using the California local assistance funding formula and the most recent TB case reporting information. The formula includes eight weighted variables that reflect the complexity of TB case management, contact investigation and TB B-1 notification evaluations. TB cases are reported electronically by local health departments on the Report of Verified Tuberculosis (RVCT) form within the California Reportable Disease Information Exchange (CalREDIE). TB B1-notification evaluations are submitted either through the Electronic Disease Notification (EDN) system or by fax to the CDPH TBCB.

**Example of RTA Calculation**

<table>
<thead>
<tr>
<th>Funding Formula Variable</th>
<th>Number Reported</th>
<th>Amount per Variable</th>
<th>Total per Variable</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incident Case</td>
<td>3</td>
<td>$2,000</td>
<td>$6,000</td>
</tr>
<tr>
<td>Homeless</td>
<td>1</td>
<td>$3,000</td>
<td>$3,000</td>
</tr>
<tr>
<td><strong>Total RTA Amount</strong></td>
<td></td>
<td></td>
<td><strong>$9,000</strong></td>
</tr>
</tbody>
</table>

Funds are issued for up to five TB cases and/or case characteristics reported each calendar year. There is no award limit for the number of TB B1-notification evaluations completed.

While the amount per case and/or case characteristic is based on calendar year reporting (January 1 through December 31), the timeframe for RTA fund expenditures is the fiscal year (July 1 through June 30).

**What can RTA funds be used for?**
RTA funds can be used for: salaries and benefits for staff conducting TB prevention control and elimination activities; food, shelter, incentives and enablers (FSIE) for TB patients and their contacts; TB-related travel, and TB-related supplies or equipment. RTA funds are not TB patient specific and can be used to support any allowable expenditure.

**When are local health jurisdictions informed that they will receive an RTA?**
RTAs are issued up to three times during the fiscal year. An award letter is sent by email to the Health Officer and copied to other jurisdiction designated staff members (e.g., program manager, fiscal contact). Subsequent RTA award letters in the same fiscal year will list the cumulative award total (amount awarded to date).
How do local health jurisdictions receive RTA funds?
Funds are provided after the fact as reimbursement for approved expenditures. Jurisdictions may invoice the CDPH TBCB following the end of each quarter during the fiscal year. Payment is issued for most approved invoices within 45 days of receipt.

Who (authorized representative) should sign the Acceptance of Award?
The authorized representative is designated by the local health jurisdiction and should be someone with the authority to agree to accepting the funds or in the case of an invoice, someone who has the authority to verify that the expenditures are correct.

Does a signed Acceptance of Allotment have to be returned for each RTA installment received during the fiscal year?
Yes. Each time a jurisdiction receives a Letter of Allotment, a signed Acceptance of Allotment must be returned to the CDPH TBCB before payment can be made.

Do the Certification and Disclosure forms need to be completed with each RTA?
No, certifications and disclosure forms (Darfur Contracting Act, Special Terms and Conditions and Drug-free Workplace Certification) need to be signed and submitted only once during a fiscal year.

Are other funds available?
Yes, two other types of funding are available. Additional FSIE funds may be requested by jurisdictions that exhaust their Real-time Allotment. The requests for additional FSIE funds should be primarily for providing housing for individuals with suspected or confirmed TB.

Jurisdictions that are experiencing acute and non-enduring TB control activities such as extended contact investigations, more cases of multidrug-resistant (MDR) TB than usual and outbreaks may request Special Needs Funds. Contact your CDPH TBCB fiscal analyst for more information.

Additional Information
Additional information about TB local assistance funding and RTA awards can be found in the current FY 2022-2023 Tuberculosis Control Local Assistance Funds Standards and Procedures Manual on the CDPH TBCB Resources for Local Health Departments webpage at URL: https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/TB-Resources-for-LHDs.aspx