Testimony of the Infectious Diseases Society of America (IDSA) on the Fiscal Year 2022 Department of Health and Human Services (HHS) Budget Prepared for the U.S. House Subcommittee on Labor-HHS-Education Appropriations Submitted by Barbara D. Alexander, MD, MHS, FIDSA, IDSA President on May 19, 2021

On behalf of the Infectious Diseases Society of America (IDSA), which represents more than 12,000 physicians, scientists, public health practitioners and other clinicians involved in infectious diseases prevention, care, research and education, I urge the Subcommittee to provide robust FY2022 funding for public health and biomedical research activities that save lives, contain health care costs and promote economic growth. **IDSA asks the Subcommittee to provide \$10 billion for the Centers for Disease Control and Prevention (CDC)**, \$46.111 billion for the National Institutes of Health (NIH), \$300 million for the Biomedical Advanced Research and Development Authority (BARDA) Broad Spectrum Antimicrobials and CARB-X programs and \$200 million for the Strategic National Stockpile Special Reserve Fund program.

While we must continue to direct substantial resources to tackle the COVID-19 pandemic, we must also address other domestic and global infectious diseases threats and epidemics, including those for which progress has stalled and/or worsened during the pandemic. For example, routine immunization rates have fallen, and access to care for diseases like HIV has been disrupted. In addition, high levels of antibiotic use likely exacerbated existing antibiotic resistance, deepening the need for antimicrobial stewardship, surveillance and new antimicrobial drugs. The COVID-19 pandemic has shown us all too clearly the fundamental importance of expanding the infectious diseases workforce, public health infrastructure and biomedical research enterprise necessary to successfully confront the panoply of infectious threats facing our increasingly interconnected world.

CENTERS FOR DISEASE CONTROL AND PREVENTION Antibiotic Resistance Solutions Initiative

We urge \$672 million in funding for the Antibiotic Resistance Solutions Initiative in FY2022.

IDSA members see the impact that antimicrobial resistance (AMR) has on patients daily. Antimicrobial resistance is one of the greatest public health threats of our time. Drug-resistant infections sicken at least 2.8 million each year and kill at least 35,000 people annually in the United States. Antibiotic resistance accounts for direct health-care costs of at least \$20 billion. If we do not act now, by 2050 antibiotic resistant infections are expected be the leading cause of death in the world. We therefore recommend \$672 million for the Antibiotic Resistance Solutions Initiative to achieve the goals outlined in the 2020-2025 National Action Plan for Combating Antibiotic-Resistant Bacteria. Increased funding would help expand antibiotic stewardship across the continuum of care; double grant awards at the state and local level; expand the AR Laboratory Network globally and domestically to strengthen the identification, tracking and containment of deadly pathogens; support AMR research and epicenters; and increase public and health care professional education and awareness activities. Since FY2016, funding for the initiative has improved antibiotic use, increased state and regional laboratory capacity to rapidly detect resistant infections and enhanced tracking of health careassociated infections. However, the program will be unable to effectively address current and newly emerging threats and prepare for future challenges without a significant increase in funding in FY2022. Increased funding is vital to achieving the plan's goals, including a 20 percent decrease in health careassociated antibiotic-resistant infections and a 10 percent drop in community-acquired antibioticresistant infections by 2025.

Advanced Molecular Detection

Advanced Molecular Detection (AMD) strengthens CDC's epidemiologic and laboratory expertise to effectively detect and track pathogens, including how they mutate, to inform responses and improve

clinical care of patients. Requested FY2022 funding of \$60 million would further enhance federal, state and local laboratory capabilities and spur innovation, including through further integration of genomics and other advanced laboratory technologies into AMR surveillance. Increased funding would help CDC apply the work of SPHERES, a national genomics consortium led by AMD that coordinates large-scale, rapid SARS-CoV-2 sequencing across the U.S., to bolster AMR surveillance, detection and response.

National Healthcare Safety Network

FY2022 funding of \$100 million for the National Healthcare Safety Network (NHSN) will enable the program to meet its current and projected demands. Requested funding would expand data collection on antibiotic use and resistance in health care facilities as outlined in the 2020-2025 National Action Plan for Combating Antibiotic-Resistant Bacteria. In 2020, many additional health care facilities began reporting COVID-19 data to NHSN, and new funding will help expand that reporting to include antibiotic use and resistance data. FY2022 funding would help achieve the National Action Plan goals for 75 percent of acute care hospitals and 25 percent of critical access hospitals reporting to the NHSN Antibiotic Use Option. These data help measure and drive progress toward optimizing antibiotic use. Additionally, increased funding would provide access to technical support for more than 65,000 staff at health care facilities who use NHSN.

CDC Center for Global Health

IDSA urges the Subcommittee to **provide \$857.8 million in FY2022 funding, including \$456.4 million for CDC's Division of Global Health Protection.** Public health experts address more than 400 diseases and health threats in 60 countries, including SARS-CoV-2. An emerging infection in any

Infectious Diseases Society of America

part of the world is just a plane ride away from the U.S. (or any other location). As highlighted by the COVID-19 pandemic, increased resources for this vital CDC program are needed to improve global capacity to prevent, detect and respond to health threats at their source before international spread. As a key implementor of the Global Health Security Agenda, the division works to improve health emergency preparedness and response, enhance infectious disease surveillance systems, strengthen laboratory capacity, train health care workers and disease detectives and build and support emergency operations centers in countries with limited public health capacities. The current COVID-19 tragedy in India underscores the critical importance of global public health infrastructure. The program also works to address AMR by providing technical assistance to 30 countries, working to detect resistant threats; prevent and contain resistance pathogens; and improve antibiotic use. Other divisions in the CDC Center for Global Health are instrumental in providing technical assistance on HIV, tuberculosis (TB) and malaria and other parasitic diseases, and also ensuring access to essential immunization services for children in low- and middle-income countries. U.S. leadership of global health security efforts is essential, and the resources allocated to those efforts have been inadequate. Until all countries have laboratory monitoring and surveillance capacities and the trained staff and equipment necessary to detect and respond swiftly to emerging infectious threats, we all will remain vulnerable.

ASSISTANT SECRETARY FOR PREPAREDNESS AND RESPONSE (ASPR) Biomedical Advanced Research and Development Authority (BARDA), <u>Broad Spectrum</u> <u>Antimicrobials</u> and Combating Antibiotic-Resistant Bacteria Biopharmaceutical Accelerator (CARB-X)

The BARDA Broad Spectrum Antimicrobials program and CARB-X leverage public/private partnerships to develop products that directly support the government-wide National Action Plan for Combating Antibiotic-Resistant Bacteria and have been successful in developing new FDA-approved antibiotics. To help achieve the plan's goals to accelerate basic and applied research for developing new antibiotics and other products, \$300 million in FY2022 funding is needed. This funding will help

prevent a situation in which we lose many modern medical advances that depend upon the availability of antibiotics, such as cancer chemotherapy, organ transplantation and other surgeries.

Project BioShield Special Reserve Fund (SRF), Broad Spectrum Antimicrobials

We recommend \$200 million in funding for the Project BioShield SRF. The SRF is positioned to support the response to public health threats, including AMR. BARDA and National Institute of Allergy and Infectious Diseases efforts have helped companies bring new antibiotics to market, but those companies now struggle to stay in business and two filed for bankruptcy in 2019. In December 2019, SRF funds supported a contract for a company following approval of its antibiotic — a phase of drug development during which small biotech firms are particularly vulnerable. \$200 million in funding would expand this approach to better support the antibiotics market.

NATIONAL INSTITUTES OF HEALTH National Institute of Allergy and Infectious Diseases (NIAID)

\$6.520 billion for NIAID, including \$600 million for AMR research, would allow NIAID to address AMR while carrying out its broader role in supporting infectious diseases research, including emerging infectious diseases, HIV, TB and influenza. Increased FY2022 funding would strengthen investment in the biomedical research workforce, including training and efforts to support early-career physicianscientists and promote diversity, update the national clinical trials infrastructure to include community hospitals and enable access for underserved populations.

CONCLUSION

Thank you for the opportunity to submit this statement. The nation's ID physicians and scientists rely on strong federal partnerships to keep Americans healthy and urge you to support these efforts. Please forward any questions to Lisa Cox at local.