November 19, 2021

The Honorable Rosa DeLauro
Chair
Committee on Appropriations
United States House of Representatives
Washington, DC 20515

The Honorable Kay Granger
Ranking Member
Committee on Appropriations
United States House of Representatives
Washington, DC 20515

The Honorable Patrick Leahy
Chair
Committee on Appropriations
United States House of Representatives
Washington, DC 20515

The Honorable Richard Shelby
Ranking Member
Committee on Appropriation
United States House of Representatives
Washington, DC 20515

Subject: Infectious Diseases Programs in FY2022 Appropriations Bill

Dear Chair DeLauro, Ranking Member Granger, Chair Leahy and Ranking Member Shelby:

On behalf of the Infectious Diseases Society of America (IDSA), we strongly urge you to finalize an FY2022 omnibus appropriations bill that provides full funding for domestic and global infectious diseases (ID) programs necessary to protect public health; prevent, prepare for and respond to outbreaks and other emergencies; spur biomedical research; and support early career ID scientists. We strongly urge you to avoid additional Continuing Resolutions that jeopardize the predictability that researchers and public health departments require and delay much needed increases in vital efforts to combat infectious diseases threats, including the COVID-19 pandemic, infections associated with opioid use and the growing crisis of antimicrobial resistance.

IDSA represents over 12,000 ID physicians, scientists and other healthcare and public health professionals devoted to patient care, prevention, public health, education, and research in the area of infectious diseases. Many of our members care for patients with serious infections, including influenza, HIV/AIDS, tuberculosis, viral hepatitis, infections associated with opioid use, infections associated with cancer and transplantation, as well as infections that are resistant to available antimicrobials. Our members are on the frontlines of the COVID-19 pandemic and also help combat other emerging infectious diseases.

Labor, Health, Human Services, and Related Agencies Appropriations (LHHS)

Centers for Disease Control and Prevention
Antibiotic Resistance Solutions Initiative

We urge at least $192 million in funding for the Antibiotic Resistance Solutions Initiative in FY2022, as provided in the Senate-released bill. IDSA members see the impact daily that antimicrobial resistance (AMR) has on patients, including individuals with COVID-19. A study published in August 2021 reviewed data from 148 hospitals across 17 states and that found that COVID-19 surges negatively impact rates of antibiotic resistant infections. Specifically, from
March-September 2020, the study found a 24% increase in hospital-onset multidrug resistant infections, including an additional 30% hospital-onset methicillin resistant *Staphylococcus aureus* (MRSA), 44% hospital-onset vancomycin resistant enterococci (VRE), and 27% hospital-onset multidrug resistant Gram-negative pathogens, that were associated with COVID-19 surges. If we do not act now, by 2050 antibiotic resistant infections are expected be the leading cause of death globally. Increased funding at the level provided in the Senate bill 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 Prevention Epicenters, and increase public and healthcare professional education and awareness activities.

**Advanced Molecular Detection**
AMD strengthens CDC’s epidemiologic and laboratory expertise to effectively detect and respond to the ever-expanding universe of emerging diseases and deadly pathogens. FY2022 funding of $40 million, as provided in the Senate LHHS bill is required to ensure AMD is able to 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 and preparedness for other viruses with pandemic potential. Increased funding would help CDC apply the work of the SARS-CoV-2 Sequencing for Public Health Emergency Response, Epidemiology, and Surveillance program (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 $26 million for the National Healthcare Safety Network (NHSN) as provided in the House LHHS bill will help enable CDC to expand data collection on antibiotic use and resistance in healthcare facilities as outlined in the 2020-2025 National Action Plan for Combating Antibiotic-Resistant Bacteria. In 2020, many additional healthcare facilities began reporting COVID-19 data to NHSN, and new funding will help expand that reporting to include antibiotic use and resistance data. The House funding level would help achieve the National Action Plan goal for 75 percent of acute care hospitals and 25 percent of critical access hospitals, reporting to the NHSN Antibiotic Resistance Option. Increased funding would also help achieve the National Action Plan goal of 100 percent of acute care and 50 percent of critical access hospitals reporting to the CDC NHSN Antibiotic Use Option. These data help measure and drive progress toward optimizing antibiotic use and preventing the development and spread of resistance. Additionally, increased funding would provide access to technical support for more than 65,000 users of NHSN.

**Center for Global Health**
IDSA urges the Subcommittee to provide at least $843 million in FY2022 funding as included in the House LHHS bill, including $448 million for CDC’s Division of Global Health Protection to prevent, detect and respond to infectious disease threats in the places they originate before they reach American soil. In light of the COVID-19 pandemic, increased resources for this vital CDC program are needed to improve global health capacity to stop threats before they reach domestic soil as well as address growing drug resistance in low- and middle-income countries. The CDC Division of Global Health Protection works to enhance infectious disease surveillance systems, strengthen laboratory capacity, train healthcare workers and disease detectives and support emergency operations centers. CDC experts provide technical assistance to 30 countries and work to detect resistant threats, prevent and
contain resistant germs and improve antibiotic use. Public health experts address more than 400 diseases and health threats in 60 countries.

Infectious Diseases and Opioids
IDSA urges $69.5 million in funding in FY2022 as provided in the House LHHS bill to address infections associated with opioid use. Support systems for individuals with substance use disorders are suffering disruptions due to the COVID-19 pandemic, which may be worsening the opioid epidemic and associated infectious diseases. CDC has found steep increases in multiple viral, bacterial and fungal infections due to injection drug use, and CDC estimates that individuals who inject drugs are 16 times more likely to develop an invasive MRSA infection. Funding would allow CDC to expand surveillance for infectious diseases commonly associated with injection drug use, including HIV, viral hepatitis and endocarditis.

Assistant Secretary for Preparedness and Response (ASPR)
Biomedical Advanced Research and Development Authority
IDSA urges $832 million as provided in the House LHHS bill for BARDA, which will help support increased funding for BARDA’s broad spectrum antimicrobials program and CARB-X. These programs leverage public/private partnerships to develop products to combat AMR and have supported the development of new FDA approved antibiotics. Despite the progress made, the pipeline of new antibiotics in development is insufficient to meet patient needs, and increased funding is needed to help prevent a post-antibiotic era in which we lose many modern medical advances that depend upon the availability of antibiotics, such as cancer chemotherapy, organ transplants and other surgeries.

Increased overall funding for BARDA also bolsters the Project BioShield Special Reserve Fund (SRF), which is positioned to support the response to public health threats, including AMR. BARDA and NIAID efforts have been successful in helping 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 in which small biotech companies that develop new antibiotics are particularly vulnerable. Additional funding at the House level is needed to expand this approach to better support the antibiotics market.

National Institutes of Health
National Institute of Allergy and Infectious Diseases
Within NIH, NIAID should be funded at $6.342 billion, including $550 million for antimicrobial resistance research, as included in the Senate LHHS bill. NIAID plays a leading role in research for new rapid ID diagnostics, vaccines, and therapeutics. Funding of $6.342 billion for NIAID, including $550 million for AMR research would allow NIAID to address AMR while carrying out its broader role in supporting infectious diseases research. Increased FY2022 funding and Senate LHHS report language would support the training of new investigators to improve AMR research capacity; enhance basic, translational and clinical research on mechanisms of resistance, therapeutics, vaccines and diagnostics; and support the development of a clinical trials network to reduce barriers to research on difficult-to-treat infections as outlined in the 2025 National Action Plan.

John C. Fogarty Center
Additionally, we urge $96 million in FY2022 funding as provided in the Senate legislation, for the Fogarty Center to improve global health security and strengthen our ability to detect and respond to
pandemics. Fogarty-funded breakthroughs have directly contributed to advances in such infections as HIV, tuberculosis and malaria.

State and Foreign Operations Appropriations (SFOPs)

Department of State
President’s Emergency Plan for AIDS Relief
We urge $4.520 billion in FY2022 funding for the President’s Emergency Plan for AIDS Relief, as provided in the House bill. This funding level will help enable PEPFAR to scale up HIV treatment, help partner countries meet new HIV treatment guidelines as well as expand other critical HIV services such as testing and counselling, prevention of mother-to-child-transmission activities and other efforts to prevent transmission and save lives in resource-limited settings. Additional funding is necessary for PEPFAR to recover from the COVID-19 pandemic’s impacts on global HIV response efforts and build more resilient systems to better prepare for future infectious disease threats. PEPFAR currently supports 17.2 million adults and children on lifesaving antiretroviral therapy to treat and prevent the spread of HIV/AIDS, however without additional funding, PEPFAR will not be able to expand access to treatment and other essential HIV prevention and care services. Despite global efforts, nearly 12 million people living with HIV still require immediate treatment, and in 2019, there were 1.7 million new HIV infections worldwide. Failure to fast-track investments and efforts today will result in a dramatic spike in new HIV infections and the AIDS response will no longer be able to keep pace with the epidemic.

U.S. Agency for International Development
Global Health Security
$1 billion is needed in FY2022 for Global Health Security, as provided in the House bill. USAID’s global health security program provides technical assistance to partner countries to prevent and respond to rising rates of AMR in resource-limited settings, and requires increased resources to strengthen efforts to address the impacts of COVID-19 on AMR.

Tuberculosis Program and the Global Fund to Fight AIDS, TB and Malaria
IDSA urges FY 2022 funding of $460 million for USAID’s TB program as provided in the House bill, and $1.56 billion for the Global Fund as provided in both the House and Senate bills. Recommended funding for USAID’s TB program and the Global Fund will not only allow continued reductions in malaria and TB, but help staunch the growth of drug-resistant forms of these infections, particularly of drug-resistant forms of tuberculosis, which is the only airborne drug resistant disease and the second biggest infectious disease killer globally, just behind COVID-19. Drug-resistant forms of TB drive rising rates of antimicrobial resistance in many parts of the world, particularly in resource-limited countries with underdeveloped healthcare infrastructure, and poses a significant threat to health security in the U.S. and globally.

Conclusion
Thank you for the attention given to infectious diseases. We urge you to enact an omnibus appropriations package before the end of 2021 that provides increased funding for infectious diseases programs in FY2022. Now more than ever, patients, public health and our nation’s security all depend on your leadership and funding. If we can serve as a resource for your efforts, please have your staff contact Lisa Cox, IDSA Director of Government Relations, at leox@idsociety.org.
Sincerely,

Daniel McQuillen, MD, FIDSA
President, IDSA

cc: The Honorable Patty Murray
    The Honorable Roy Blunt
    The Honorable Tom Cole
    The Honorable Barbara Lee
    The Honorable Hal Rogers
    The Honorable Chris Coons
    The Honorable Lindsey Graham