

**Testimony of the Infectious Diseases Society of America (IDSA)
on the Fiscal Year 2023 Department of Health and Human Services (HHS) Budget
Prepared for the U.S. Senate Subcommittee on Labor, Health and Human Services,
Education, and Labor Appropriations
Submitted by Daniel P. McQuillen, MD, FIDSA, IDSA President, on May 26, 2022**

On behalf of the Infectious Diseases Society of America (IDSA), which represents more than 12,000 physicians, scientists, public health practitioners and other clinicians specializing in infectious diseases prevention, care, research and education, I urge the Subcommittee to provide robust FY2023 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 \$397 million for the Antibiotic Resistance Solutions Initiative (ARSI) at the Centers for Disease Control and Prevention (CDC), \$6.7 billion for the National Institute of Allergy and Infectious Diseases (NIAID), \$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.**

We must continue to provide resources to tackle the COVID-19 pandemic and 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, high levels of antibiotic use have exacerbated existing antimicrobial resistance (AMR), deepening the need for antimicrobial stewardship, surveillance and new antimicrobial drugs. From March-September 2020, there was a [24% increase in hospital-onset, multidrug-resistant infections](#) associated with COVID-19 surges. The COVID-19 pandemic has shown us the importance of expanding the infectious diseases workforce, public health infrastructure and biomedical research enterprise needed to confront global infectious threats.

CENTERS FOR DISEASE CONTROL AND PREVENTION
[Antibiotic Resistance Solutions Initiative \(ARSI\)](#)

We urge \$397 million in funding for the Antibiotic Resistance Solutions Initiative in FY2023,

the cornerstone of the nation's efforts to detect, prevent, and respond to AMR. The President's budget proposal includes \$197 million in discretionary funding and \$200 million each year in mandatory funding from FY2023-2028 (as part of the larger pandemic preparedness request), for a total of \$397 million in FY2023. 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. Infections are a primary or associated cause of death in [50% of patients with cancer](#), as AMR can make these infections difficult or impossible to treat. Tragically some patients may be cured of their cancer but succumb to a resistant infection which can occur as a result of the effects of chemotherapy. AMR has a [disproportionate impact](#) on certain communities due to variance in risk of exposure, susceptibility to infection or treatment received. Rates of several serious antibiotic-resistant infections, including community-associated methicillin-resistant *Staphylococcus aureus* (MRSA) infections, are higher in Black populations. [Globally](#), resistant infections directly caused 1.27 million deaths in 2019 and played a role in 4.95 million deaths. If we do not act now, antibiotic-resistant infections will be the leading cause of death by 2050 and could cost the world \$100 trillion.

Recommended funding would expand antibiotic stewardship across the continuum of care; double state and local grant awards; 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. The program is also a critical building block of CDC's public health infrastructure that directly supports broader agency activities, including COVID-19 first responders, foodborne illness pathogen detection, global AMR prevention and surveillance, and responses to sexually transmitted infections and health

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care-associated infections. Additional funding in FY2023 is needed to further expand ARSI program activities to effectively address current threats and prepare for future challenges

Advanced Molecular Detection (AMD)

FY2023 funding of \$175 million for the AMD program would ensure continued innovation in the detection and tracking of existing and emerging resistant pathogens. Funding would enable federal, state, and local public health laboratories to expand pathogen genomics, sustain partnerships with academic research institutions, and bolster training to ensure integration of genomics into AMR surveillance and response. CDC is in the process of establishing “Centers of Excellence,” linking public health agencies and private sector partnerships focused on pathogen genomics and molecular epidemiology. Funding would sustain the Centers of Excellence and support ongoing AMD activities.

National Healthcare Safety Network (NHSN)

FY2023 funding of \$100 million for the National Healthcare Safety Network (NHSN) will enable the program to meet its current and projected demands. Requested funding is needed to modernize NHSN to alleviate reporting burden and speed access to actionable data, which help measure and drive progress toward optimizing antibiotic use. Increased funding would also provide access to technical support for more than 65,000 staff at health care facilities who use NHSN. The FY2023 Inpatient Prospective Payment System (IPPS) rule included a requirement that hospitals begin reporting antibiotic use and resistance data, which will strengthen emerging resistance threats detection and provide data to evaluate stewardship interventions and inform best practices. Robust NHSN funding is essential to help hospitals comply with this initiative.

CDC Center for Global Health

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IDSA urges the Subcommittee to **provide \$991 million in FY2023 funding, including \$456.4 million for CDC's Division of Global Health Protection.** 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. 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, provide technical assistance to address AMR, and build and support emergency operations centers in countries with limited public health capacities so that we are less vulnerable.

ASSISTANT SECRETARY FOR PREPAREDNESS AND RESPONSE (ASPR) Biomedical Advanced Research and Development Authority (BARDA)

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. Despite this progress, the pipeline of new antibiotics in development is insufficient to meet patient needs, and \$300 million in funding is needed to accelerate basic and applied research for developing new antibiotics and other products. Additional funding will help prevent a post-antibiotic era in which we lose many modern medical advances that depend upon the availability of antibiotics.

[Project BioShield Special Reserve Fund \(SRF\), Broad Spectrum Antimicrobials](#)

The Project BioShield SRF is positioned to support the response to public health threats, including AMR. Efforts by BARDA and NIAID have been successful in helping companies bring new antibiotics to market, but those companies 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 and funding is needed to expand this approach to better support the antibiotics market.

NATIONAL INSTITUTES OF HEALTH

National Institute of Allergy and Infectious Diseases (NIAID)

\$6.7 billion for NIAID, including \$585 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 FY2023 funding would strengthen investment in the biomedical research workforce, including training and efforts to support early-career physician-scientists and promote diversity, and update the national clinical trials infrastructure to include community hospitals and enable access for underserved populations. With regard to AMR specifically, increased funding would support research on antimicrobial mechanisms of resistance, therapeutics, vaccines and diagnostics; development of a clinical trials network to reduce barriers to research on emerging and difficult-to-treat resistant infections; and support for training more physician scientists.

The COVID-19 pandemic has demonstrated the need to better prepare our biomedical research infrastructure to respond to emerging infectious diseases and future emergencies, including the need to strengthen and diversify the ID research workforce. In 2021, only 70% of ID physician training programs filled their slots, leaving us with an inadequate pipeline of ID physician-scientists necessary to lead clinical trials and additional research to strengthen our prevention and responses to ID threats. NIAID should use increased resources to provide additional K, T, and F awards, and Early Investigator Awards, and research opportunities for community-based ID physicians to enhance recruitment, training and diversity of the physician-scientist workforce.

CONCLUSION

Thank you for the opportunity to submit this statement. The nation's infectious diseases 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 lcox@idsociety.org or (202) 669-4826.