Infectious Diseases Society of America
Priorities for the FY2022 Budget

Centers for Disease Control and Prevention
Antibiotic Resistance Solutions Initiative
IDSA urges the Biden Administration to include increased funding for the Initiative in its FY2022 Budget Proposal. The growing antimicrobial resistance crisis threatens modern medical advances, including cancer chemotherapy, transplants and other surgeries, and care of complex patients. The Administration should devote increased resources as an initial investment in a multiyear strategy 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, expand the Antibiotic Resistance Laboratory Network to strengthen the identification, tracking, and containment of deadly pathogens, and increase public and health care professional education and awareness activities. This funding is vital to achieving the Plan’s goals, including a 20% decrease in healthcare-associated antibiotic-resistant infections, and a 10% drop in community-acquired antibiotic-resistant infections by 2025.

Advanced Molecular Detection (AMD)
AMD strengthens antimicrobial stewardship to reduce antimicrobial resistance (AMR) and improve patient outcomes, and strengthens CDC’s epidemiologic and laboratory expertise to detect and respond to deadly pathogens. IDSA urges the Biden Administration to support increased funding for AMD in its FY2022 Budget Proposal. Over the past six years, AMD has invested in federal, state, and local public health laboratories to expand the use of pathogen genomics and other advanced laboratory technologies to strengthen infectious disease surveillance and outbreak response. Increased investment in AMD would enhance laboratory capabilities and spur innovation, including through further integration of genomics into AMR surveillance. Increased funding would help CDC apply the work of SARS-CoV-2 Sequencing for Public Health Emergency Response, Epidemiology, and Surveillance (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. Advances in AMD will have a significant impact on improving patient outcomes and reducing cost by providing more rapid identification of pathogens, thereby facilitating earlier targeted antimicrobial therapy.

National Healthcare Safety Network (NHSN)
IDSA urges the Biden Administration to support increased FY2022 funding for the NHSN to expand data collection on antibiotic use and resistance in healthcare facilities as outlined in the National Action Plan for Combating Antibiotic-Resistant Bacteria 2020-2025. In 2020, many more health care facilities, particularly long term care facilities, began reporting COVID-19 data to NHSN, and new FY2022 funding will help expand that reporting to include antibiotic use and resistance data. FY2022 funding would help achieve the National Action Plan goal for 75% of acute care hospitals and 25% of critical access hospitals,
reporting antibiotic resistance data to NHSN. Increased funding would also help achieve the National Action Plan goal of 100% of acute care and 50% of critical access hospitals reporting antibiotic use data to NHSN. These data help measure and drive progress toward optimizing antibiotic use.

Immunization Program
While significant new resources are needed immediately to support transparent, effective, and equitable allocation, administration and uptake of COVID-19 vaccines, the President’s Budget Proposal must also include strong funding for our national vaccine infrastructure to improve our approach to all vaccine preventable diseases, including influenza, measles, pneumonia, shingles, and hepatitis A and B. Even before COVID-19, adult immunization rates lagged far below CDC’s recommended targets, and during the pandemic, childhood immunization rates have dropped considerably due to fears of contracting the virus. During the week of April 5, the administration of MMR vaccines dropped 50%; diphtheria and pertussis vaccines dropped 42%; and HPV vaccines dropped 73%. We must fund an ongoing adult immunization infrastructure program that corresponds with the successful Vaccines for Children Program, as recommended by the National Academies of Medicine. Such a program should boost and electronically track adult immunizations across health care systems. Vaccine hesitancy was already on the rise, even before the pandemic, as evidenced by historic measles outbreaks in 2019. New funding is needed to track vaccine hesitancy, target outreach, and support partnerships with community-based organizations with longstanding public trust to build vaccine confidence.

Center for Global Health
IDSA urges the Biden Administration to provide additional resources to help ensure all countries can respond effectively to COVID-19 and implement and evaluate vaccination and therapeutic programs in resource-limited countries, and sustain funding to strengthen global capacities to prevent, detect and respond to infectious diseases threats. The Center is one of our first lines of defense against global infectious disease threats, including HIV, TB, malaria, parasitic infections and emerging health threats, including SARS-CoV-2, and Ebola. While the Center received some funding through COVID-19 emergency supplemental packages, it has received four times that amount in requests for assistance from partner countries hit hard by the pandemic. The Center mobilized rapidly to help partner countries prepare for and respond to the COVID-19 pandemic, including strengthening capacities to get timelier and more accurate data to inform public health decision-making and build the public health workforce globally. Additionally, sustained funding for the Division of HIV and TB, a key implementer of the President’s Emergency Plan for AIDS Relief (PEPFAR), is needed to facilitate access to life-saving antiretroviral treatment for millions, including to pregnant women living with HIV to prevent transmission to their children. The Center works to find, cure, and prevent TB, eliminate the global burden of malaria, stop poliovirus transmission, and reduce mortality from vaccine-preventable diseases that include measles.

Infectious Diseases and Opioids
The opioid epidemic continues to spread and IDSA urges increased funding in the Administration’s FY2022 Budget Proposal to address opioid addiction and related infectious diseases. We are very concerned about how the opioid crisis is driving higher rates of infectious diseases including hepatitis C, endocarditis, HIV, and pneumonia, as well as skin, soft tissue, bone, and joint infections. 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.

Assistant Secretary for Preparedness and Response (ASPR)
Biomedical Advanced Research and Development Authority (BARDA)
The President’s Budget Proposal should include increased funding for the BARDA broad spectrum antimicrobials program and CARB-X to leverage public/private partnerships to develop products that directly support the 2020-2025 National Action Plan for Combating Antibiotic-Resistant Bacteria. These programs have been successful in developing new Food and Drug Administration (FDA)-approved antibiotics. Despite this progress, the pipeline of new antibiotics in development is insufficient to meet patient needs, and increased funding is needed to strengthen our overall preparedness and to help prevent a post-antibiotic era in which we lose many modern medical advances that depend upon the availability of antibiotics.

Project BioShield
The Project BioShield Special Reserve Fund (SRF) which is positioned to support the response to public health threats, including AMR, requires increased funding in the Administration’s FY2022 Budget Proposal. BARDA and NIAID efforts have been successful in helping companies bring new antibiotics to market, but those companies now struggle to stay in business. 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 biotechs that develop new antibiotics are particularly vulnerable. Additional funding is needed to expand this approach to better support the antibiotics market.

National Center for Preparedness and Response
IDSA recommends that the Biden Administration provide increased funding for the Public Health Emergency Preparedness Program to increase federal, state, and local capacity to prepare for and respond to infectious diseases outbreaks and other emergencies. The response to COVID-19 has demonstrated the importance of strong and consistent national leadership and guidance informed by the best available data and science, in addition to the need for federal resources to support emergency responses given the limited flexibility available to states within their budgets. Timely communication and data-sharing across all levels of government and with health care professionals and the public is critical to successful public health responses. A significant and sustained investment in public health infrastructure and workforce is urgently needed to ensure every community has a public health agency that, in addition to performing comprehensive public health functions, is well-positioned and prepared to respond to emergencies. The current COVID-19 surge overwhelming hospitals throughout the country clearly demonstrates that the absence of a coordinated national pandemic plan is a recipe for disaster.

National Institutes of Health
NIAID
COVID-19 has made a substantial and enduring impact on the U.S. biomedical research workforce. IDSA appreciates the agency’s commitment to research training and increased flexibility during the COVID-19 pandemic in terms of extended deadlines, flexible submissions, and the expansion of Early-Stage Investigator (ESI) status for qualified researchers. IDSA urges the Biden administration to increase investment in the biomedical research workforce, including research training and efforts to promote diversity. We specifically recommend expanding funding to provide more K awards, T32 awards, F32 awards and support for the K to R transition; to support mentorship opportunities, particularly for early-stage investigators from underrepresented groups; and to expand support for investigators who are caregivers.

Additionally, it is imperative to build on the lessons learned from this pandemic to adequately prepare for future challenges. We believe that an important step in this regard is to update the national clinical trials infrastructure in order to include community and smaller non-academic hospitals and to enable access for
populations most impacted by the pandemic and other infectious diseases. **IDSA urges the Administration to devote FY2022 funding and support in its Budget Proposal for repurposing successful COVID-19 research infrastructure to target other high-priority unmet needs.**

**IDSA urges the Biden Administration to include increased funding in its FY2022 Budget Proposal for the full spectrum of infectious diseases research at NIAID, including HIV, influenza, TB, and emerging infectious diseases.** We specifically urge increased funding for AMR research that prioritizes the discovery and development of new antibacterial agents and supports further study and development of rapid diagnostic tests to guide more rapid pathogen-directed therapy and advance antimicrobial stewardship. Increased FY2022 funding 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 Combating Action Plan.

**Fogarty International Center**

A vital part of the U.S. response to COVID-19 and other infectious diseases globally, the Fogarty International Center (FIC) quickly mobilized to respond to the pandemic, including providing technical assistance in low-and middle-income countries and conducting vital research on COVID-19 and its impacts, including studying the intersection of COVID-19 and leading infectious disease killers including HIV and tuberculosis. **We recommend increasing funding in FY2022 for the Center to address the research and training needs associated with the COVID-19 pandemic and its long-term impacts on other infectious disease areas in low- and middle-income countries.**

**Influenza Preparedness and Response**

We urge the Biden Administration to include funding in its FY2022 budget plan to support the implementation of a five-year national plan as established by the National Influenza Vaccine Task Force as well as a short-term plan for seasonal influenza vaccination to improve these vaccines over the longer term. Additionally, the executive order (EO) “Modernizing Influenza Vaccines in the United States to Promote National Security and Public Health,” appropriately prioritizes domestic efforts to modernize and improve the production and effectiveness of influenza vaccines and promotes increased immunization rates. The Budget Proposal should support implementation of the EO, including sustained funding increases for BARDA (in addition to the CDC and the NIH.)

**United States Agency for International Development**

**Global Health Security**

**IDSA urges the Biden Administration to include increased resources in its FY2022 Budget Proposal to sustain USAID’s global health program.** Now more than ever, USAID’s global health security program urgently needs greater support and resources to help partner countries respond to COVID-19 and prevent, detect, and respond to emerging health threats before they reach American shores. Core funding has decreased in recent years as funding from emergency supplemental packages to address the Ebola outbreak have expired, putting us at greater risk of emerging infections. The COVID-19 pandemic puts into stark clarity the need to better prepare for pandemics by strengthening health systems and infectious disease surveillance and lab capacity, particularly for the detection of zoonotic disease outbreaks. In the 21st century, 70% of infectious disease threats originated from animals – including SARS-CoV-2, Ebola and Zika. As a key implementor of the Global Health Security Agenda, USAID plays a critical role in strengthening global capacity to stop outbreaks at their source. While implementation of the Global Health Security Agenda is conducted through an interagency, whole-of-government approach, USAID
leads on supporting One Health initiatives to strengthen partner countries’ capacities to address zoonotic spillover and prevent pandemics.

**USAID Global HIV Program**

**We recommend increased funding in the Biden Administration’s FY2022 budget plan for the USAID global HIV program to accelerate progress against the global HIV epidemic.** The program has remained flat funded for more than a decade, and before then was subject to cuts, leaving the program to do increasingly more with fewer resources. USAID’s leadership in providing essential health services for infectious diseases has saved millions of lives, reduced poverty, helped stabilize fragile communities and protect human rights for vulnerable populations. As a key implementor of the President’s Emergency Plan for AIDS Relief (PEPFAR), USAID’s global HIV program provides invaluable technical support to PEPFAR partner countries on cost-effective, sustainable and integrated HIV/AIDS programming that harnesses the latest science and technological innovations to work towards global HIV control goals.

**USAID Global Tuberculosis Program**

**IDSA recommends substantially increased funding for the USAID Global TB Program to accelerate progress towards meeting global TB elimination goals, including the goals outlined in the United Nation High Level Meeting on Ending TB.** While USAID leads the U.S. government’s response to the global tuberculosis epidemic – the world’s biggest infectious disease killer and a driver of the global antimicrobial resistance crisis -- the World Health Organization found that 78% of countries reported disruptions to TB services as a result of COVID-19, including TB case notification, which has dropped significantly. Although TB is the biggest infectious disease killer globally – killing more people than HIV and malaria combined – it receives the least funding of any USAID global infectious disease programs. USAID’s global TB program supports programs in 23 priority countries with high burdens of TB and provides key technical assistance to 55 countries, making it one of the largest contributors to global TB elimination efforts after the Global Fund to Fight AIDS, TB and Malaria. USAID works to improve care, strengthen TB services, and provide diagnostics and drugs, including expanding the availability of new multidrug-resistant TB drugs and regimens – a key component of fighting the rising threat of antimicrobial resistance.

**President’s Malaria Initiative**

**IDSA urges the Biden Administration to prioritize malaria elimination efforts and substantially increase funding in its FY2022 Budget Proposal for the President’s Malaria Initiative to address the COVID-19 pandemic’s impact on malaria control efforts.** While the USAID malaria program received very modest increases in funding in recent years, funding increases have not kept up with needs. The COVID-19 pandemic has derailed progress towards eliminating malaria, threatening to reverse two decades of progress against the disease that kills more than 400,000 people – primarily children – each year. We urge the administration to renew support for USAID malaria elimination efforts, including providing more resources for the President’s Malaria Initiative (PMI). As the leader of PMI, USAID supports 27 countries in Africa and the Mekong subregion in Asia in delivering proven cost-effective and life-saving malaria interventions, including essential medicines and preventive therapy for pregnant women. USAID also provides technical and operational assistance to equip and empower partner countries to end malaria. The agency supports research and development of needed new tools, including the development of vaccines, novel insecticide-based vector control tools and new antimalarial drugs.

**State Department**

**PEPFAR**

**IDSA urges the Biden Administration to support increased funding for PEPFAR to help end the HIV epidemic, expand HIV treatment and prevention interventions in the most vulnerable communities and**
set bold new targets for expanding HIV treatment. As America’s flagship global HIV program and one of the biggest health programs globally, PEPFAR has saved millions of lives while transforming communities in the most vulnerable countries. Years of investments in health systems strengthening, including surveillance, laboratory, and health workforce capacity, among other core functions, has bolstered PEPFAR partner countries’ abilities to respond to emerging health threats, including Ebola and COVID-19. In addition to responding to HIV, PEPFAR has worked to address co-infections, including tuberculosis, viral hepatitis, Human Papillomavirus (HPV), and illnesses that include cervical cancer (the program has supported screening more than 560,000 women in sub-Saharan Africa for cervical cancer). While significant strides have been made in the fight against HIV globally, the world is not on track to meet global targets towards HIV elimination. Progress has stalled, and as the COVID-19 pandemic’s impact on HIV testing, prevention and treatment access sets back progress further, a greater U.S. investment is needed.

Global Fund to Fight AIDS, TB, and Malaria

We urge support for emergency funding to sustain the Global Fund’s response to COVID-19, and for robust funding targets for upcoming replenishment periods and providing full funding through annual appropriations. The Global Fund to Fight AIDS, TB, and Malaria and PEPFAR work synergistically to leverage each program’s resources and expertise to strengthen the global response to HIV. As the largest funder of tuberculosis and malaria elimination efforts globally, the Global Fund has been instrumental in saving lives and preventing new infections, including reducing deaths from malaria by nearly 50% and TB-related deaths by 25%. The Global Fund rapidly responded to the pandemic, quickly setting up the COVID-19 Response Mechanism to help more than 100 implementing countries mitigate disruptions to HIV, TB, and malaria services. These critical activities now face uncertainty, as the Response Mechanism has run out of funding.