

Considerations for COVID-19 Emergency Supplemental Appropriations Infectious Diseases Society of America

IDSAs calls upon Congress to pass an emergency supplemental appropriations bill that is sufficient to support the domestic and global COVID-19 response. Infectious diseases (ID) physicians, public health practitioners, researchers and other health care providers play essential roles on the frontlines of this outbreak. ID physicians are leading hospital preparedness programs, working collaboratively with CDC and state and local health departments, and driving research on vaccines, therapeutics and diagnostics.

The emergency supplemental bill should provide new funding for the COVID-19 response and not take funding away from other critical domestic or global health priorities. Resources in the supplemental should address needs in the areas of 1) public health response, 2) hospital/health system preparedness, response, and surge capacity, 3) laboratory capacity, 4) research, and 5) global health preparedness and response.

Public Health Response Needs

- Federal agencies like CDC and ASPR require additional resources to coordinate the COVID-19 response, develop guidance, conduct testing, and lead other critical activities.
- State and local health agencies have largely exhausted available funds. They require additional resources to support a large number of activities, including:
 - Isolation and quarantine activities are among the most resource-intensive and complex aspects of public health emergency response. There are significant costs associated with finding suitable facilities, monitoring patients, serving and enforcing legal orders (including providing due process), meeting the needs of the population under isolation or quarantine and ensuring timely medical evaluation and testing when necessary, including safe and secure transport from isolation or quarantine locations to and from health care facilities.
 - Contacting, testing and monitoring patients under investigation (including hundreds of returning travelers), rapidly investigating cases, and obtaining information on their close contacts.
 - Modernizing public health surveillance systems to allow for seamless, rapid, secure data sharing across public health systems, including the federal, state, local, tribal and territorial levels.
 - Public communication to ensure timely and accurate information about how individuals can best prevent infection.
 - Emergency operations and collaboration with all community partners, including cities, businesses, schools and other first responders to prepare for community mitigation.

Hospital/Health System Preparedness, Response and Surge Capacity Needs

- Hospitals and health systems must screen, diagnose and treat patients who become ill, which may significantly overburden hospitals and health systems if COVID-19 transmission becomes widespread in the United States. Hospitals and health systems will require support to increase capacity to address COVID-19 while continue to provide other routine medically necessary care.
- Preparedness will also include acquisition of personal protective equipment (PPE), including N95 masks and other respirators. Many institutions are already reporting rationing and reusing of PPE, which may put health care workers at risk of contracting and spreading COVID-19.

Laboratory Capacity

- CDC developed a diagnostic within a week of COVID-19 being recognized by public health authorities in China. However, most states do not yet have access to this test. Resources are needed to ensure that state public health laboratories and other appropriate laboratories to perform hundreds of thousands of tests and to be able to provide rapid results of COVID-19 testing. Without investment in laboratory capacity, infectious cases of COVID-19 may go undetected in communities throughout the country.

Research

- Funding is needed to support the research, development, manufacturing and dissemination of medical countermeasures, including vaccines and therapeutics.
- Research is also needed to deepen our understanding of the novel coronavirus, including research to determine optimal clinical care.

Global Health Preparedness and Responses

- Providing immediate funding to meet the short-term needs of the COVID-19 response is essential, but insufficient. The next outbreak is not a matter of “if” but “when”. It is crucial that we fund public health emergency preparedness activities at state and local health departments, hospitals and globally. Investing in public health infrastructure and research in an ongoing fashion will allow for more rapid and effective responses to future outbreaks and may lessen the amount of funding required for future emergency supplemental requests.
- Investing in strengthening capacities to prevent, detect and respond to infectious disease threats in the countries where they originate is essential for ensuring American and global health security. High consequence pathogens with zoonotic origins, including Ebola, Zika and Nipah viruses, are increasingly emerging in resource-limited countries with weak preparedness and healthcare systems. The CDC estimates that it takes just 36 hours for an emerging pathogen to travel from a remote village in a low- and middle-income country to any major metropolitan city in the world, highlighting the importance of helping partner countries strengthen their abilities to stop outbreaks at their source.
- Resource-limited countries, particularly in Asia and Africa, have reported limited capacity to effectively respond to outbreaks of COVID-19 in their countries, with many countries already juggling outbreaks of other infections. Nigeria, home to the first confirmed case of COVID-19 in sub-Saharan Africa, is also currently experiencing outbreaks of Lassa fever and yellow fever. Elsewhere in Africa, outbreaks of cholera, measles, dengue and other infections are further straining already weak healthcare systems, while new cases of Ebola continue to be reported in the Democratic Republic of the Congo.
 - Low- and middle-income countries have reported challenges in diagnosing COVID-19, with many countries lacking testing kits. Currently only 26 labs in Africa can perform COVID-19 testing. In addition to resources, countries need technical assistance to develop other detection capacities in the absence of adequate testing capabilities.
- The World Health Organization announced it needs \$675 million for global preparedness and response activities until April, including strengthening capacities in resource-limited countries. Thus far WHO member states have only pledged \$150 million. It is unclear how much the U.S. government has contributed.
- Officials at U.S. agencies engaged in global health security activities have reported they are currently assessing their capacities to help partner countries with preparedness and response efforts. It

remains unclear how much funding is currently available to CDC, USAID and DoD for essential global health security activities related to COVID-19.

- U.S. agencies need sustained, robust funding for ongoing efforts to strengthen preparedness and response capacities in partner countries with limited resources and technical expertise:
 - CDC helps countries strengthen abilities to detect outbreaks, supports surveillance systems that enable disease tracking and reporting, helps build better laboratory systems, develops and improves emergency operations centers, supports faster and more accurate data sharing, and trains disease detectives and healthcare workers, among other essential activities.
 - USAID leads efforts to promote and implement One Health policies and practices to mitigate the threat of zoonotic infections, including conducting vital research on emerging zoonotic infections, training health workforces proficient in One Health practices, and helping countries develop strong preparedness and response plans. DoD global health security activities focus on countering natural, accidental and intentional biological threats through engagement with civilian counterparts at home and abroad and through research and development of medical countermeasures. DoD efforts to protect U.S. and allied forces against infectious disease threats have resulted in extensive disease surveillance and research programs beneficial to both the military and general public.