Dear Secretary Becerra, Administrator Johnson and Director Young,

We write to express our grave concern about the future of the infectious diseases (ID) workforce that is essential to promote patient safety, manage complex medical care, and prepare for and respond to increasingly frequent outbreaks and pandemics. Recruitment to the field is plummeting. We implore you to take action by including $50 million for the Bio-Preparedness Workforce Pilot Program at the Health Resources and Services Administration (HRSA) in the FY2026 President’s Budget Request.

We championed the Pilot, which was enacted in the bipartisan Consolidated Appropriations Act of 2023, but it has not yet been included in the Administration’s budget, nor has it received funding. Inclusion in the President’s budget would strengthen our ability to work with appropriators in Congress to allocate funding for this program.

The need for funding is urgent. Last year, only half of ID physician training programs filled, down from 56% in 2022. Nearly 80% of counties in the US do not have a single ID physician, leaving many patients without access to care and many communities without the local expertise needed to support public health emergency preparedness and response. Similar shortages persist for HIV health care professionals, infection preventionists, clinical laboratory staff, ID pharmacists, ID nurses and other ID experts.

As the workforce shrinks, the need is growing dramatically. ID and HIV specialists are critical to our nation’s healthcare goals, including efforts to end the HIV epidemic and reduce cancer and maternal mortality:

- Only 66% of people with HIV are virally suppressed in the U.S. despite the availability of HIV therapies highly effective at suppressing HIV and stopping HIV transmission.
- About half of all cancer deaths are associated with an infection.
- Sepsis—the body’s overwhelming response to infection—is the second leading cause of maternal mortality in the US.
- ID specialists are on the frontlines of the fight against antimicrobial resistance, leading efforts to prevent infections and use antibiotics wisely, as well as caring for patients with serious infections.

The Pilot provides a targeted incentive to encourage health care professionals to pursue careers in ID and emergency preparedness where they are needed most by offering loan repayment in exchange for three years of service in underserved areas and with underserved patient populations. A relatively modest investment in the Pilot will yield dividends—patients with serious infections who receive ID and HIV specialist care have better outcomes, shorter hospital stays and lower health care costs. Communities with local ID and HIV experts are more resilient in the face of outbreaks.

We hope we can count on your support for this critically important issue.

Sincerely,