June 4, 2018

The Honorable Greg Walden
Chairman
Energy and Commerce Committee
United States House of Representatives
Washington, DC 20515

The Honorable Frank Pallone
Ranking Member
Energy and Commerce Committee
United States House of Representatives
Washington, DC 20515

Dear Chairman Walden and Ranking Member Pallone:

As members of the Global Health Technologies Coalition (GHTC)—a group of more than 25 organizations working to save and improve lives by encouraging the research and development of essential health technologies to bring healthy lives within reach for all people—we write in support of the reauthorization of the Pandemic All-Hazards Preparedness Act (PAHPA).

GHTC strongly supports the Biomedical Advanced Research and Development Authority (BARDA) playing a robust role in the advanced development of medical countermeasures (MCMs) to address naturally occurring threats with pandemic and epidemic potential. As you consider the U.S.’s biodefense needs and emerging threats in reauthorizing PAHPA, we ask that you ensure BARDA has ample resources and authority to address emerging infectious diseases (EIDs), pandemic influenza (PI), and drug-resistant infectious diseases. Specifically, we ask that you consider the creation of a separate line item with authorization for a minimum $300 million to fund BARDA’s work on EIDs to prepare and maintain platform technologies as rapid-response architecture as, to date, BARDA’s work in this area has only come through emergency funding. We also ask that in light of the growing risk of these threats, you formalize the workstream for antimicrobial resistance (AMR) at BARDA and require reporting on BARDA’s work in EIDs, PI, and AMR.

While BARDA is authorized to advance MCMs for EIDs, robust work in the space is lacking and previous efforts have primarily advanced only through emergency funding for response to the Ebola and Zika virus crises. As BARDA has a unique and unmatched ability to mobilize diverse stakeholders and industry to advance late-stage development of critical MCMs, we urge the Committee to include a dedicated funding for EIDs within BARDA as these unpredictable threats need our greatest attention.

We also encourage the Committee to consider strengthening BARDA’s AMR work to include a focus on the threat of drug-resistant infectious diseases with pandemic and epidemic potential. The Public Health Emergency Medical Countermeasures Enterprise (PHEMCE) “High-Priority Threats” list includes only one multi-drug resistant biological threat (MDR anthrax) and a catchall category of EIDs. The PHEMCE Strategy notes that PHEMCE leadership may include specific emerging pathogens if leadership determines they have the potential to affect national health
security. AMR is a clear health security threat for the U.S. and projections indicate that drug-resistant tuberculosis (DR-TB) is the single largest driver of AMR deaths globally.

We additionally request that the Committee consider including requirements for the Assistant Secretary of Preparedness and Response’s (ASPR) five-year annual budget to report on priorities relative to EIDs, PI, and AMR so that BARDA’s decision-making gains insight on the threats and ensures that the PHEMCE is adequately weighing the needs in these areas relative to other priorities for MCM development.

We stand ready to work with you to advance US leadership in MCM research and development, particularly for naturally occurring threats with pandemic and epidemic potential and those which face growing antimicrobial resistance. On the heels of the Ebola and Zika crisis, Congress has a unique opportunity to ensure our country is better prepared for the next outbreak.

Please do not hesitate to contact GHTC Director Jamie Bay Nishi at jnishi@ghtcoalition.org or (202) 540-4379, if you have questions or need any additional information.

Sincerely,

American Society of Tropical Medicine & Hygiene

Global Health Technologies Coalition

Infectious Diseases Society of America

Path

AVAC

Global Advocacy for HIV Prevention

International AIDS Vaccine Initiative