Suspend the Rules and Pass the Bill, H.R. 6334, With an Amendment

(The amendment strikes all after the enacting clause and inserts a new text)

116th CONGRESS 2D Session

H.R.6334

To authorize United States participation in the Coalition for Epidemic Preparedness Innovations, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

March 23, 2020

Mr. BERA (for himself and Mr. YOHO) introduced the following bill; which was referred to the Committee on Foreign Affairs

A BILL

- To authorize United States participation in the Coalition for Epidemic Preparedness Innovations, and for other purposes.
 - 1 Be it enacted by the Senate and House of Representa-
 - 2 tives of the United States of America in Congress assembled,

3 SECTION 1. SHORT TITLE.

- 4 This Act may be cited as the "Securing America
- 5 From Epidemics Act".

6 SEC. 2. FINDINGS.

7 Congress finds the following:

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(1) Due to increasing population and popu lation density, human mobility, and ecological
 change, emerging infectious diseases pose a real and
 growing threat to global health security.

5 (2) While vaccines can be the most effective 6 tools to protect against infectious disease, the ab-7 sence of vaccines for a new or emerging infectious 8 disease with epidemic potential is a major health se-9 curity threat globally, posing catastrophic potential 10 human and economic costs.

11 The 1918 influenza pandemic infected (3)12 500,000,000 people, or about one-third of the 13 world's population at the time. and killed 14 50,000,000 people—more than died in the First 15 World War.

16 (4) The economic cost of an outbreak can be
17 devastating. The estimated global cost today, should
18 an outbreak of the scale of the 1918 influenza pan19 demic strike, is 5 percent of global gross domestic
20 product.

(5) Even regional outbreaks can have enormous
human costs and substantially disrupt the global
economy and cripple regional economies. The 2014
Ebola outbreak in West Africa killed more than

11,000 and cost \$2,800,000,000 in losses in the af fected countries alone.

3 (6) The ongoing novel coronavirus outbreak re4 flects the pressing need for quick and effective vac5 cine and countermeasure development.

6 (7) While the need for vaccines to address 7 emerging epidemic threats is acute, markets to drive 8 the necessary development of vaccines to address 9 them—a complex and expensive undertaking—are 10 very often critically absent. Also absent are mecha-11 nisms to ensure access to those vaccines by those 12 who need them when they need them.

13 (8) To address this global vulnerability and the 14 deficit of political commitment, institutional capac-15 ity, and funding, in 2017, several countries and pri-16 vate partners launched the Coalition for Epidemic 17 Preparedness Innovations (CEPI). CEPI's mission 18 is to stimulate, finance, and coordinate development 19 vaccines for high-priority, epidemic-potential of 20 threats in cases where traditional markets do not 21 exist or cannot create sufficient demand.

(9) Through funding of partnerships, CEPI
seeks to bring priority vaccines candidates through
the end of phase II clinical trials, as well as support

vaccine platforms that can be rapidly deployed
 against emerging pathogens.

3 (10) CEPI has funded multiple partners to de4 velop vaccine candidates against the novel
5 coronavirus, responding to this urgent, global re6 quirement.

7 (11) Support for and participation in CEPI is
8 an important part of the United States own health
9 security and biodefense and is in the national inter10 est, complementing the work of many Federal agen11 cies and providing significant value through global
12 partnership and burden-sharing.

13 SEC. 3. AUTHORIZATION FOR UNITED STATES PARTICIPA14 TION.

(a) IN GENERAL.—The United States is hereby authorized to participate in the Coalition for Epidemic Preparedness Innovations.

(b) BOARD OF DIRECTORS.—The Administrator for
the United States Agency for International Development
is authorized to designate an employee to serve on the Investors Council of the Coalition for Epidemic Preparedness Innovations as a representative of the United States.
(c) REPORTS TO CONGRESS.—Not later than 180
days after the date of the enactment of this Act, the Presi-

1	dent shall submit to the appropriate congressional com-
2	mittees a report that includes the following:
3	(1) The United States planned contributions to
4	the Coalition for Epidemic Preparedness Innovations
5	and the mechanisms for United States participation
6	in such Coalition.
7	(2) The manner and extent to which the United
8	States shall participate in the governance of the Co-
9	alition.
10	(3) How participation in the Coalition supports
11	relevant United States Government strategies and
12	programs in health security and biodefense, to in-
13	clude—
14	(A) the Global Health Security Strategy
15	required by section $7058(c)(3)$ of division K of
16	the Consolidated Appropriations Act, 2018
17	(Public Law 115–141);
18	(B) the applicable revision of the National
19	Biodefense Strategy required by section 1086 of
20	the National Defense Authorization Act for Fis-
21	cal Year 2017 (6 U.S.C. 104); and
22	(C) any other relevant decision-making
23	process for policy, planning, and spending in
24	global health security, biodefense, or vaccine

and medical countermeasures research and de velopment.

3 (d) UNITED STATES CONTRIBUTIONS.—Amounts au4 thorized to be appropriated under chapters 1 and 10 of
5 part I and chapter 4 of part II of the Foreign Assistance
6 Act of 1961 (22 U.S.C. 2151 et seq.) are authorized to
7 be made available for United States contributions to the
8 Coalition for Epidemic Preparedness Innovations.

9 (e) APPROPRIATE CONGRESSIONAL COMMITTEES.—
10 In this section, the term "appropriate congressional com11 mittees" means—

(1) the Committee on Foreign Affairs and the
Committee on Appropriations of the House of Representatives; and

(2) the Committee on Foreign Relations andthe Committee on Appropriations of the Senate.