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(Original Signature of Member)

117TH CONGRESS
1ST SESSION

H. R.

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

IN THE HOUSE OF REPRESENTATIVES

Mr. BERA introduced the following bill; which was referred to the Committee
on _____

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:

1 (1) Due to increasing population and popu-
2 lation density, human mobility, and ecological
3 change, emerging infectious diseases pose a real and
4 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 (3) The COVID–19 pandemic has infected more
12 than 119,960,700 individuals and has killed at least
13 2,656,822 people worldwide, and it is likely that un-
14 reported cases and deaths are significant.

15 (4) Even regional outbreaks can have enormous
16 human costs and substantially disrupt the global
17 economy and cripple regional economies. The 2014
18 Ebola outbreak in West Africa killed more than
19 11,000 and cost \$2,800,000,000 in losses in the af-
20 fected countries alone.

21 (5) While the need for vaccines to address
22 emerging epidemic threats is acute, markets to drive
23 the necessary development of vaccines to address
24 them—a complex and expensive undertaking—are
25 very often critically absent. Also absent are mecha-

1 nisms to ensure access to those vaccines by those
2 who need them when they need them.

3 (6) To address this global vulnerability and the
4 deficit of political commitment, institutional capac-
5 ity, and funding, in 2017, several countries and pri-
6 vate partners launched the Coalition for Epidemic
7 Preparedness Innovations (CEPI). CEPI's mission
8 is to stimulate, finance, and coordinate development
9 of vaccines for high-priority, epidemic-potential
10 threats in cases where traditional markets do not
11 exist or cannot create sufficient demand.

12 (7) Through funding of partnerships, CEPI
13 seeks to bring priority vaccines candidates through
14 the end of phase II clinical trials, as well as support
15 vaccine platforms that can be rapidly deployed
16 against emerging pathogens.

17 (8) CEPI supported the manufacturing of the
18 United States-developed Moderna COVID-19 vac-
19 cine during its Phase 1 clinical trial, and CEPI has
20 initiated at least 12 partnerships to develop vaccines
21 against COVID-19.

22 (9) CEPI is co-leading COVAX, the vaccines
23 pillar of the ACT-Accelerator, which is a global col-
24 laboration to quickly produce and equitably dis-

1 tribute safe and effective vaccines and therapeutics
2 for COVID–19.

3 (10) Support for and participation in CEPI is
4 an important part of the United States own health
5 security and biodefense and is in the national inter-
6 est, complementing the work of many Federal agen-
7 cies and providing significant value through global
8 partnership and burden-sharing.

9 **SEC. 3. AUTHORIZATION FOR UNITED STATES PARTICIPA-**
10 **TION.**

11 (a) IN GENERAL.—The United States is hereby au-
12 thorized to participate in the Coalition for Epidemic Pre-
13 paredness Innovations (“Coalition”).

14 (b) DESIGNATION.—The President is authorized to
15 designate an employee of the relevant Federal department
16 or agency providing the majority of United States con-
17 tributions to the Coalition, who should demonstrate knowl-
18 edge and experience in the fields of development and pub-
19 lic health, epidemiology, or medicine, to serve—

20 (1) on the Investors Council of the Coalition;
21 and

22 (2) if nominated by the President, on the Board
23 of Directors of the Coalition, as a representative of
24 the United States.

1 (c) REPORTS TO CONGRESS.—Not later than 180
2 days after the date of the enactment of this Act, the Presi-
3 dent shall submit to the appropriate congressional com-
4 mittees a report that includes the following:

5 (1) The United States planned contributions to
6 the Coalition and the mechanisms for United States
7 participation in such Coalition.

8 (2) The manner and extent to which the United
9 States shall participate in the governance of the Co-
10 alition.

11 (3) How participation in the Coalition supports
12 relevant United States Government strategies and
13 programs in health security and biodefense, includ-
14 ing—

15 (A) the Global Health Security Strategy
16 required by section 7058(c)(3) of division K of
17 the Consolidated Appropriations Act, 2018
18 (Public Law 115–141);

19 (B) the applicable revision of the National
20 Biodefense Strategy required by section 1086 of
21 the National Defense Authorization Act for Fis-
22 cal Year 2017 (6 U.S.C. 104); and

23 (C) any other relevant decision-making
24 process for policy, planning, and spending in
25 global health security, biodefense, or vaccine

1 and medical countermeasures research and de-
2 velopment.

3 (d) UNITED STATES CONTRIBUTIONS.—Amounts au-
4 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.

9 (e) APPROPRIATE CONGRESSIONAL COMMITTEES.—
10 In this section, the term “appropriate congressional com-
11 mittees” means—

12 (1) the Committee on Foreign Affairs and the
13 Committee on Appropriations of the House of Rep-
14 resentatives; and

15 (2) the Committee on Foreign Relations and
16 the Committee on Appropriations of the Senate.