



**Written Testimony Prepared by the American Society for Microbiology  
Examining the Reauthorization of the  
Pandemic and All-Hazards Preparedness Act**

Submitted to the  
Subcommittee on Health  
Energy and Commerce Committee

United States House of Representatives  
June 6, 2018

The American Society for Microbiology (ASM) appreciates the opportunity to submit this statement in support of reauthorization of the Pandemic and All-Hazards Preparedness Act.

ASM is the largest single life science society, composed of more than 30,000 scientists and health professionals. Our mission is to promote and advance the microbial sciences, including programs and initiatives funded by the federal government departments and agencies, by virtue of the pervasive role of microorganisms in health and society.

This year marks the 100th anniversary of the Great Influenza pandemic, which killed between 50 and 100 million people worldwide, reminding us that we must be prepared to rapidly respond to declared and potential public health emergencies, including infectious disease epidemics.

Among the most consequential issues facing world is antimicrobial resistance. According to the Centers for Disease Control and Prevention (CDC), each year in the United States at least two million people become infected with bacteria that are resistant to antibiotics and at least 23,000 people die each year as a direct result of these infections. Furthermore, these infections result in an additional \$20 billion per year of excess costs to our health care system.

The Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria (PACCARB) was created under a 2014 Executive Order and has twice been continued, most recently in 2017. The Advisory Council is set to expire on September 30, 2019 unless there is another continuation by Executive Order. Considering the danger posed by antibiotic-resistant bacterial infections remains high, ASM encourages this Subcommittee to put PACCARB into law which will ensure that PACCARB can continue its mission to produce reports and recommendations that influence federal combating antibiotic-resistant bacteria activities, home and abroad. A guarantee of

PACCARB's continuance also sustains the One Health partnerships — the integration of human, animal, and environmental domains — that have been formed since PACCARB's inception.

To date, PACCARB has issued a report on the progress of the federal government toward fulfilling the National Action Plan on Combatting Antibiotic-Resistant Bacteria (CARB) and has made a series of recommendations, to which Federal agencies have been responsive. Importantly, there has been, as a result of PACCARB, improved efforts at coordination of federal CARB efforts. PACCARB also issued a report on incentives for the development of new antibiotics. Whether addressed through PAHPA reauthorization or other mechanisms, an end-stage business model for private sector involvement and commitment is critical to antimicrobial and vaccine development and their successful deployment.

We believe PACCARB is having an effect on the larger antimicrobial resistance discussion and plays an important role in oversight of federal activities. We hope you will agree that PACCARB has made substantial progress since 2015 and that its important work and influence should continue well into the future as part of the federal government's all-hazards approach to protecting our nation.

ASM is hopeful that Congress will complete work on PAHPA reauthorization this year. We appreciate the Subcommittee's commitment to reauthorization and offer a few closing remarks on the PAHPA reauthorization discussion draft.

Reauthorization of PAHPA is the opportunity to include a specific authorization for the pandemic influenza program under the Biomedical Advanced Research Development Authority (BARDA). ASM is not only pleased to see inclusion and authorization of a Pandemic Influenza Program included in the discussion draft, but is also extremely grateful that the Subcommittee also recognizes the importance of a separate Emerging Infectious Disease Program and corresponding authorization. The Ebola and Zika pandemics did not originate within our borders, but traveled here quickly. There is no question that there will be another threat. The only questions are when and where in the world it will originate. We ask that provisions creating and authorizing funding for these two programs be retained as the legislation is finalized for introduction.

ASM also appreciates the recognition by this Subcommittee of the need for a Public Health Emergency Response Fund that allows the federal government to provide an initial response to a public health crisis until Congress can fulfill its fiduciary responsibilities. ASM supports that the legislation strengthens existing authorities for the Public Health Emergency Fund and attempts to create guardrails for the use of those funds. It is important, as specified in the discussion draft, that any amounts in such Fund supplement, not supplant, existing public health and preparedness grants and funding. ASM holds the position that dedicated funding is needed for such a fund and urges this Subcommittee to not lose sight of this critical need.

ASM appreciates the opportunity to submit this statement in support of reauthorization of PAHPA and looks forward to working with the Subcommittee to advance reauthorization legislation this year.