

October 28, 2015

The Honorable Thad Cochran
Chairman
Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Barbara Mikulski
Vice Chairwoman
Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Harold Rogers
Chairman
Committee on Appropriations
United States House of Representatives
Washington, DC 20515

The Honorable Nita Lowey
Ranking Member
Committee on Appropriations
United States House of Representatives
Washington, DC 20515

Dear Chairman Cochran, Vice Chairwoman Mikulski, Chairman Rogers, and Ranking Member Lowey:

Thank you for working with the Subcommittees on Labor-HHS-Education and Agriculture Appropriations to advance the allocation of some of the new resources requested by the administration to implement portions of the [*National Strategy for Combating Antibiotic-Resistant Bacteria*](#). Our organizations represent healthcare providers, patients, scientists, veterinarians, industry, and public health. We are deeply concerned with the growing crisis of antimicrobial resistance (AR) and were pleased to see the issue given high priority during development of the Fiscal Year (FY) 2016 appropriations bills, especially considering the budgetary constraints and difficult choices you face under the woefully inadequate sequestered spending caps. Nevertheless, the funding levels provided for AR in the appropriations bills are well below the President's budget request. The resources necessary to comprehensively combat AR will likely remain insufficient so long as these spending caps remain in place.

As you and other leaders in Congress work towards a budget compromise for FY 2016 that allows for completion of permanent spending bills, we urge that the sequestered spending caps initiated by the Budget Control Act of 2011 be raised to allow for necessary investments in discretionary health programs without forcing arbitrary and harmful cuts to other priorities. The Bipartisan Budget Act of 2013 serves as a model for restoring resources to agencies and programs already severely impacted by sequestration. Additionally, we ask that you strongly oppose efforts to advance a year-long continuing resolution (CR) that would prevent new investments in AR and other public health priorities. As you know, a year-long CR would also necessitate across-the-board cuts to existing programs to bring FY 2016 appropriations in line with sequestered spending caps.

Antimicrobial resistance continues to increase as a threat to public health, national security, and patients—particularly immunocompromised individuals including chemotherapy and transplant patients, the elderly, preterm infants, individuals with HIV/AIDS, and others. The rapid rise of AR demonstrates the need to increase and sustain federal investments in biomedical research and public health infrastructure.

In March 2015, the administration released the [National Action Plan for Combatting Antibiotic-Resistant Bacteria](#). The document builds off of [recommendations](#) made by the President's Council of Advisors on Science and Technology (PCAST) and guides implementation of the *National Strategy* through specific deliverables and timeframes. The PCAST report and *National Strategy* state that a comprehensive, well-coordinated federal response must include prevention and control activities, enhanced data collection and surveillance, antibiotic stewardship, as well as greater investment in research and development for antibiotics, diagnostics, vaccines, and alternatives to antibiotics for agricultural use. Such activities are only possible with strong support from the House and Senate Appropriations Committees (*Attachment 1*).

Once again, we urge the swift completion of a budget compromise and FY 2016 appropriations to raise the sequestered spending caps and provide strong support for the antimicrobial resistance line-items in the budget. You can obtain additional information by contacting Jonathan Nurse at the Infectious Diseases Society of America (703) 299-0202 or jnurse@idsociety.org. We thank you for your leadership and working with us to prevent a post-antibiotic era where common infections prove fatal.

Sincerely,

Accelerate Diagnostics Inc.
AdvaMedDx
Aeras
Alliance for the Prudent Use of Antibiotics
American Academy of Allergy, Asthma & Immunology
American Academy of Pediatrics
American Association of Avian Pathologists
American Association of Bovine Practitioners
American Congress of Obstetricians and Gynecologists
American College of Preventive Medicine
American Public Health Association
American Society for Microbiology
American Thoracic Society
American Veterinary Medical Association
Association for Professionals in Infection Control and Epidemiology
Association of American Veterinary Medical Colleges
Association of State & Territorial Health Officials
Biotechnology Industry Organization (BIO)
Cempra Inc.
Center for Food Safety
Council of State and Territorial Epidemiologists
Da Volterra
Health Care Without Harm
HIV Medicine Association
Infectious Diseases Society of America
Johns Hopkins Center for a Livable Future
Keep Antibiotics Working
Making-A-Difference in Infectious Diseases

March of Dimes Foundation
Microbion Corporation
MusculoSkeletal Infection Society
National Association of County and City Health Officials
National Association of Pediatric Nurse Practitioners
NovaDigm Therapeutics, Inc.
Pediatric Infectious Diseases Society
Peggy Lillis Foundation
Research!America
Society for Healthcare Epidemiology of America
Society of Infectious Diseases Pharmacists
Stop TB USA
Theravance Biopharma
Treatment Action Group
Trust for America's Health

Attachment

CC: Senators Roy Blunt, Patty Murray, Jerry Moran, Jeff Merkley
Representatives Tom Cole, Rosa DeLauro, Robert Aderholt, Sam Farr

Attachment – 1 of 1

As the FY 2016 appropriations process comes to a close, we urge you to provide the strongest of the President’s Budget Request, House and Senate Appropriations Committees allocations for AR programs. Specifically, we ask that the agencies and programs that follow receive your support.

Centers for Disease Control and Prevention (CDC)

- **Antibiotic Resistance Solutions Initiative (\$264 million):** The CDC Antibiotic Resistance Initiative builds prevention programs in all 50 states and 10 large cities, utilizing evidence-based approaches to stop the spread of drug-resistant bacteria and preserve the effectiveness of existing antibiotics. The initiative also supports a new network of regional labs to improve tracking of and response to outbreaks of serious and potentially deadly bacteria.
- **National Healthcare Safety Network (NHSN) (\$32 million):** The requested funding allows CDC to expand the National Healthcare Safety Network to more than 17,000 facilities. Expanded activities include providing real-time data about antibiotic use and trends, targeting health care facilities that need additional assistance using NHSN data, and implementing prevention strategies.
- **Advanced Molecular Detection (AMD) Initiative (\$30 million):** Continuation of this initiative allows CDC to more rapidly determine where emerging diseases come from, whether microbes are resistant to antibiotics, and how microbes are moving through a population. The AMD initiative strengthens CDC’s epidemiologic and laboratory expertise to effectively guide public health action.

National Institutes of Health (NIH)

- **National Institute of Allergy and Infectious Diseases (NIAID) (\$4.615 billion):** Within the NIAID budget, an increase of \$100 million is proposed to spur R&D for new rapid diagnostics to help ensure that antibiotics are prescribed appropriately, develop a national database of genome sequence data of all reported human infections with antimicrobial-resistant microorganisms, launch a large-scale effort to better understand drug resistance, and create a rapid-response clinical trial network to test new antibiotics on individuals infected with highly resistant strains.

Assistant Secretary for Preparedness and Response (ASPR)

- **Biomedical Advanced Research and Development Authority (\$522 million):** Funding requested for BARDA includes \$192 million dedicated to antimicrobial R&D, which is a step towards the PCAST recommended level of \$800 million annually. BARDA utilizes novel public-private partnerships to address the market failure in antibiotic R&D.

Food and Drug Administration (FDA)

- **Combating Antibiotic Resistant Bacteria (\$47 million):** Funding requested supports phasing out the use of medically important antimicrobials for growth promotion in food-producing animals, development of a system for monitoring antimicrobial drug use in food-producing animals, evaluation of new antibacterial drugs for patient treatments, and streamlining of clinical trials.

Department of Agriculture (USDA)

- **Antimicrobial Resistance (\$77 million):** Proposed funding allows the USDA to support research on the relationships among microbes and livestock, the environment, and human health, as well as alternatives to antibiotic use. Funding would also support expanded dissemination of science-based knowledge to veterinarians and producers, plus use of voluntary surveys to measure antibiotic use in agriculture.