

September 10, 2024

Dear Vice President Harris:

As you consider your health policy priorities for a potential Harris-Walz Administration, we write to offer the Infectious Diseases Society of America (IDSA) and HIV Medicine Association (HIVMA) as a resource to you and respectfully request that you consider our recommendations for strengthening equitable prevention, diagnosis and treatment of infectious diseases (ID). Critical ID needs include but are not limited to antimicrobial resistance (AMR); infections associated with complex care, such as cancer chemotherapy and organ transplantation; infections associated with opioid use; HIV; sexually transmitted infections (including congenital syphilis); vaccine-preventable diseases, such as measles and influenza; diseases rapidly spreading due to the climate crisis, such as tick- and mosquito-borne diseases; and emerging and re-emerging infectious diseases, such as highly pathogenic avian influenza and mpox. **We request an opportunity to meet with you or the appropriate member(s) of your team to discuss these urgent issues.**

We appreciate the campaign's recognition of the importance of addressing infectious diseases and in particular to expanding preexposure prophylaxis (PrEP) access to advance racial/ethnic and health equity. As we saw with the COVID-19 pandemic, our most vulnerable communities face severely disproportionate impacts of infectious diseases. COVID-19 also demonstrated the tremendously positive results that can be achieved when we invest in health care, public health and biomedical research with a focus on advancing equity and increasing access to care for those disproportionately impacted by disease. With this in mind, we offer the below recommendations that we believe align well with the 2024 Democratic Party Platform.

Expanding Access to ID Care by Growing and Diversifying the ID Workforce: IDSA appreciates your platform's commitment to growing the health care workforce to expand access, including in rural and low-income communities. This is particularly important for the field of ID as nearly 80% of U.S. counties do not have a single ID physician, and we are not recruiting and training enough ID physicians to meet growing needs and demands. Last year, only half of ID physician training programs filled (even less for pediatric ID programs), whereas most other specialties filled all or nearly all of their programs. Expanding access to ID care is critical, because **1) as medical care becomes more complex with growing numbers of immunosuppressed individuals, ill premature infants and elderly people, more patients are at risk for serious infections; 2) nearly every type of care in the hospital carries a risk of infection and requires the availability of an ID specialist; and 3) patients with serious infections have better outcomes, shorter hospital stays and lower health care costs when treated by an ID physician.** Unfortunately, ID is one of the lowest reimbursed medical specialties, and high medical student debt is a key barrier to entering the field, especially for individuals from disadvantaged backgrounds.

To build on your goal of eliminating health workforce shortages, IDSA recommends that your Administration:

- Fund the Bio-Preparedness Workforce Pilot Program (\$50 million), authorized in [Public Law 117-328](#), to provide loan repayment to ID health professionals who work in the communities where they are most needed.
- Build on the Biden-Harris Administration proposal to create a new ID add-on code in Medicare. Additionally, advance reimbursement improvements for ID, such as providing an ID-specific incentive payment, funding the development of ID quality measures to pave the

way for value-based models, and developing mechanisms to enable ID physicians to participate in the cost-savings their work generates and encourage more trainees to enter the field of ID.

- Increase funding for the National Institute of Allergy and Infectious Diseases (NIAID) to train more ID physicians and support early career ID researchers who will speed advancements in cutting-edge research.

Combating Antimicrobial Resistance: AMR is an increasing and severe threat to human health. As our antimicrobial drugs grow less effective due to overuse, we are eroding medical gains that rely upon antimicrobials, including cancer chemotherapy and other complex care and surgeries. While anyone can get a resistant infection, certain populations are at increased risk. For example: **1) individuals who inject drugs are 16 times more likely to develop an invasive MRSA infection; 2) sepsis (the body's overwhelming response to infection) is the second leading cause of maternal mortality; 3) Black and Latinx individuals are at heightened risk for several types of resistant infections; and 4) resistant infections are particularly problematic for immunocompromised patients, with infection as the second leading cause of death for bone marrow transplant patients.** As the United Nations prepares to hold a high-level meeting on AMR, it is critical that the U.S. advance our global leadership on this health crisis.

IDSA and HIVMA recommend:

- Enact, fund and implement the bipartisan PASTEUR Act, which aligns with a Biden-Harris Administration proposal to stimulate antimicrobial availability by delinking federal payments for novel antimicrobials from the volume used and providing hospitals resources for antimicrobial stewardship.
- Expand funding for programs at the Centers of Disease Control and Prevention (CDC), NIAID, and the Administration for Strategic Preparedness and Response/Biomedical Advanced Research and Development Authority to support AMR prevention, surveillance, stewardship, research and innovation.

IDSA represents over 13,000 physicians and other health care and public health professionals specializing in the prevention, diagnosis and treatment of infectious diseases, and they are involved in patient care, research and public health activities, including serving on the front lines of responses to outbreaks and pandemics. We welcome the opportunity to collaborate with you. **To schedule a meeting or to reach out with any questions or requests, please contact Amanda Jezek, IDSA senior vice president for public policy and government relations, at ajezek@idsociety.org.**

Sincerely,



Steve Schmitt, MD, FIDSA
President, IDSA



Allison Agwu, MD, ScM, FIDSA, FAAP
Chair, HIVMA

Attachments

[Fact Sheet on Growing and Diversifying the ID Workforce to Promote Health Equity](#)

[State of ID Workforce Brief](#)

[Fact Sheet on Women's Health and AMR](#)

[Fact Sheet on the Unequal Threat of AMR](#)