

2023-2024 BOARD OF DIRECTORS

President
Steven Schmitt, MD, FIDSA
CLEVELAND CLINIC
CLEVELAND, OH

President-elect
Tina Tan, MD, FIDSA, FPIDS, FAAP
NORTHWESTERN UNIVERSITY
FEINBERG SCHOOL OF MEDICINE
CHICAGO IL

Vice President
Ronald G. Nahass, MD, FIDSA
IDCARE
HILLSBOROUGH, NJ

Secretary
Robin Trotman, DO, FIDSA
COXHEALTH
SPRINGFIELD, MO

Treasurer
Maximo O. Brito, MD, MPH, FIDSA
UNIVERSITY OF ILLINOIS AT CHICAGO
CHICAGO, IL

Immediate Past President
Carlos del Rio, MD, FIDSA
EMORY UNIVERSITY
ATLANTA, GA

Directors

Lilian M. Abbo, MD, FIDSA
UNIVERSITY OF MIAMI
MILLER SCHOOL OF MEDICINE
MIAMI, FL

Erin M. Bonura, MD, FIDSA
OREGON HEALTH & SCIENCE UNIVERSITY
PORTLAND, OR

Adaora A. Adimora, MD, MPH, FIDSA
UNIVERSITY OF NORTH CAROLINA
SCHOOL OF MEDICINE
CHAPEL HILL, NC

Matifadza Hlatshwayo Davis, MD, FIDSA
DEPARTMENT OF HEALTH
CITY OF ST. LOUIS
ST. LOUIS, MO

Robin H. Dretler, MD, FIDSA
INFECTIOUS DISEASE SPECIALISTS OF ATLANTA
ATLANTA, GA

Rajesh T. Gandhi, MD, FIDSA
HIVMA REPRESENTATIVE
MASSACHUSETTS GENERAL HOSPITAL
BOSTON, MA

Kami Kim, MD, FIDSA
UNIVERSITY OF SOUTH FLORIDA
TAMPA, FL

Bonnie M. Word, MD, FIDSA
HOUSTON TRAVEL MEDICINE CLINIC
HOUSTON TX

Heather Yun, MD, FIDSA
BROOKE ARMY MEDICAL CENTER
SAN ANTONIO, TX

Chief Executive Officer
Christopher D. Busky, CAE

IDSAs Headquarters
4040 Wilson Boulevard
Suite 300
Arlington, VA 22203
TEL: (703) 299-0200
EMAIL: Info@idsociety.org
WEBSITE: www.idsociety.org

May 9, 2024

The Honorable Xavier Becerra
Secretary
Department of Health and
Human Services
200 Independence Ave. SW
Washington, DC 20201

The Honorable Tom Vilsack
Secretary
Department of Agriculture
1400 Independence Ave. SW
Washington, DC 20250

Maj. Gen. (Ret.) Paul Friedrichs, MD, FACS
Director and Principal Advisor on Pandemic Preparedness and Response
White House Office of Pandemic Preparedness and Response Policy
1650 Pennsylvania Ave.
Washington, DC 20504

Dear Secretaries Becerra and Vilsack and Director Friedrichs:

On behalf of the Infectious Diseases Society of America (IDSAs) and more than 13,000 physicians, scientists, public health practitioners and other clinicians specializing in infectious diseases (ID) prevention, care, research and education, I appreciate your leadership in response to the outbreak of highly pathogenic avian influenza (HPAI). Thank you for your ongoing collaboration with IDSAs on this important issue. On April 25, IDSAs was especially honored to participate in the Scientific Symposium held by the Association of State and Territorial Health Officials with officials from the Department of Health and Human Services and U.S. Department of Agriculture.

IDSAs is prepared to offer ongoing support for the HPAI response and is eager to help the Administration continue taking steps to protect the public's health. We appreciate the Administration's response efforts thus far and provide some highlighted points below to suggest areas that IDSAs members on the front lines feel are most critical right now. In addition, we have launched an HPAI task force of IDSAs members that is available as a resource to federal agencies.

Much attention has been given to the importance of a One Health approach that recognizes the interconnection between people, animals, plants and their shared environment, especially in the face of emerging challenges like HPAI. To that end, much progress has been made; however, to fully embrace One Health, the collective health care and public health communities need to share critical questions, investigations and data with relevant agencies, organizations like IDSAs and equivalent veterinary associations and the public.

Specifically, IDSAs members from public health, academia and clinical practice are ready and willing to assist with the following priorities:

- Continued and broader implementation of active surveillance among animals and humans, including at-risk but asymptomatic persons, as well as, where appropriate, wastewater surveillance. It may be useful to consider innovative strategies to provide

financial support to farmers, veterinarians and the animal agricultural industry to avoid financial consequences preventing transparent data collection.

- Continued transparent and non alarmist public communication acknowledging uncertainty and timely updates as new information surfaces.
- Outreach tailored to at-risk communities using trusted messengers in the languages most commonly spoken to encourage appropriate precautions, educate on use of personal protective equipment and increase uptake of testing for symptoms.
- Rapid development, validation and widespread deployment of diagnostic testing and vaccines if necessary.
- Accelerated development and deployment of home influenza tests capable of detecting the H5N1 variant among at-risk communities.
- Proactive planning and communication to state public health officials about distribution of assets such as personal protective equipment and antivirals in the Strategic National Stockpile if necessary to manage a local outbreak.

Infectious Diseases Workforce

HPAI is the most recent in a series of outbreaks that clearly demonstrate the need for a strong public health infrastructure, including the ID workforce. Nearly 80% of U.S. counties lack an ID physician.¹ Just over half of ID physician training programs and less than 50% of pediatric ID training programs filled in 2023, compared to most other physician specialties that filled nearly all their programs. Shortages in ID personnel are particularly acute in rural areas where agricultural workers are at greatest risk of contracting HPAI. In addition, research has shown that 80,000 more public health professionals – an increase of nearly 80% – are needed to provide a minimum package of public health services across the U.S.²

These shortages need to be addressed to ensure that capacity is available to manage HPAI and future outbreaks. Financial barriers, namely high medical student debt and low reimbursement compared to other specialties, are a chief impediment to ID recruitment. **To address these challenges, we urge the Administration to prioritize funding for the Bio-Preparedness Workforce Pilot Program at the Health Resources and Services Administration and to include new codes or add-on codes to better capture unique ID physician services in the Medicare Physician Fee Schedule.**

Again, we thank you for your leadership at this crucial time, and we are committed to collaborating with you to inform and advance an HPAI response guided by research, scientific practice and equity. Please contact Amanda Jezek, IDSA senior vice president of public policy and government relations, with any questions at ajezek@idsociety.org.

Sincerely,



Steven K. Schmitt, MD, FIDSA, FACP
President

¹ Walensky, Rochelle P., et al. "Where is the ID in Covid-19?" *Annals of Internal Medicine*, vol. 173, no. 7, 6 Oct. 2020, pp. 587–589, <https://doi.org/10.7326/m20-2684>.

² deBeaumont Foundation. Staffing Up: Investing in the Public Health Workforce. <https://debeaumont.org/staffing-up/>.