

June 18, 2019

The Honorable Roy Blunt
Chairman
Labor-HHS-Education Subcommittee
Committee on Appropriations
U.S. Senate
Washington, DC 20510

The Honorable Patty Murray
Ranking Member
Labor-HHS-Education Subcommittee
Committee on Appropriations
U.S. Senate
Washington, DC 20510

Dear Chairman Blunt and Ranking Member Murray:

Thank you for your leadership in supporting domestic and global tuberculosis (TB) programs and research at the Centers for Disease Control and Prevention (CDC) through the Labor, Health and Human Services, Education, and Related Agencies Appropriations Subcommittee. We, the undersigned organizations are deeply grateful for the funding increases that the House FY2020 Labor-HHS appropriations bill provided for both the CDC's domestic and global TB programs—\$10 million each, totaling \$20 million. We urge the Senate subcommittee to support the House's allocations for these important programs, and additionally, to ensure that the full \$10 million increase provided for the domestic TB program, the Division of TB Elimination (DTBE), remains with that program.

TB causes more deaths than any other single infectious disease agent, with 1.6 million deaths globally in 2017. In the U.S., every state reports cases of TB annually and in 2018, twenty-three states reported TB increases. In addition, there are up to 13 million people in the U.S. with latent TB infection. A targeted prevention program for those at greatest risk of progressing to disease is urgently needed to reach these individuals, who represent the reservoir of future active TB. This TB prevention program could be initiated with the proposed increase to CDC's domestic TB program and would move the United States towards elimination. Drug resistant TB poses a particular challenge to elimination efforts in the U.S. due to the high cost of treatment and intensive health care resources, including hospitalization.

Current FY2019 funding for CDC's domestic TB program is at the FY 2005 level. We remain very concerned that this stagnant funding level is eroding state TB programs' capacity to effectively protect the public's health, leaving communities vulnerable to this airborne disease. We know that current funding cannot support the much-needed prevention initiative outlined above. The FY2020 House Labor-HHS bill's funding level of \$152 million for the DTBE would help to support a critically needed national TB prevention initiative, address ongoing TB drug supply issues, further domestic implementation of the National Action Plan for Combating MDR-TB, and support the development of urgently needed new TB diagnostic, treatment, and prevention tools to support domestic and global TB elimination.

CDC's global TB program in the Division of Global HIV and TB (DGHT) plays a critical role in the U.S.'s global TB response. While CDC receives PEPFAR funding for TB-HIV, it needs more funding to expand its TB-specific work, considering that most TB cases globally are unrelated to

HIV. CDC DGHT currently relies on funds transferred in through other accounts, primarily from the DTBE, for this work.

Drug resistant TB is an issue for global health security, and CDC assistance is urgently needed to help countries address this expanding threat, including in Southeast Asia where the US has close ties. CDC's scientific expertise brings credibility with health officials in countries impacted by TB and provides a unique ability to support countries to address drug resistant TB with greater urgency. The House's provision of \$10 million in new line-item funding for the program would allow the agency to use its unique technical expertise to address the nexus between the global TB epidemic and the incidence of TB in the U.S.

Both CDC's domestic and global TB programs are essential frontline programs for the domestic and global elimination of TB. We believe that the House bill's first-time funding allocation for the global TB program will enable country-level TB identification, treatment and prevention progress and we urge an increase of \$10 million for the DTBE.

Thank you for your consideration.

Sincerely,

American Medical Student Association
American Thoracic Society
Association of Public Health Laboratories
Association for Professionals in Infection Control and Epidemiology
Association of State and Territorial Health Officials
Becton Dickinson and Co.
Council of State and Territorial Epidemiologists
Elizabeth Glaser Pediatric AIDS Foundation
Friends of the Global Fight Against AIDS, Tuberculosis and Malaria
Global Health Technologies Coalition
Global Health Council
IAVI
Infectious Diseases Society of America
International Union Against Tuberculosis and Lung Disease
Management Sciences for Health
Medical IMPACT
National Alliance of State and Territorial AIDS Directors
National Tuberculosis Controllers Association
Partners in Health
RESULTS
Stop TB USA
TB Alliance
Treatment Action Group
We Are TB