

FACT SHEET: EMERGENCY FUNDING REQUEST TO ENHANCE THE U.S. GOVERNMENT'S RESPONSE TO EBOLA AT HOME AND ABROAD

Since the first cases of Ebola were reported in West Africa in March 2014, the United States has mounted a whole-of-government response to contain and eliminate the epidemic at its source, while also taking prudent measures to protect the American people.

Today, the Administration announced it is seeking \$6.18 billion through an emergency funding request to Congress to enhance our comprehensive efforts to address this urgent situation. To help meet both immediate and longer-term requirements, \$4.64 billion is requested for immediate response and \$1.54 billion is requested as a Contingency Fund to ensure that there are resources available to meet the evolving nature of the epidemic.

The \$4.64 billion for the Administration's immediate response, as outlined below, is designed to fortify domestic public health systems, contain and mitigate the epidemic in West Africa, speed the procurement and testing of vaccines and therapeutics, and strengthen global health security by reducing risks to Americans by enhancing capacity for vulnerable countries to prevent disease outbreaks, detect them early, and swiftly respond before they become epidemics that threaten our national security. These are the same activities that are necessary to combat the spread of Ebola and reduce the potential for future outbreaks of infectious diseases that could follow a similarly devastating, costly, and destabilizing trajectory.

Department of Health and Human Services (HHS) - \$2.43 billion:

Centers for Disease Control and Prevention (CDC) - \$1.83 billion. The request includes funding to prevent, detect, and respond to the Ebola epidemic and other infectious diseases and public health emergencies both at home and abroad for the following activities:

- Fortify domestic public health systems and advance U.S. preparedness with support to more than 50 Ebola Treatment Centers through state and local public health departments.
- Improve Ebola readiness within State and local public health departments and laboratories.
- Procure personal protective equipment (PPE) for the Strategic National Stockpile.
- Increase support for monitoring of travelers at U.S. airports.
- Control the epidemic in the hardest hit countries in Africa by funding activities including: infection control, contact tracing and laboratory

- surveillance and training; emergency operation centers and preparedness; and education and outreach.
- Conduct evaluations of clinical trials in affected countries to assess safety and efficacy of vaccine candidates.
 - Establish global health security capacity in vulnerable countries to prevent, detect, and rapidly respond to outbreaks before they become epidemics by standing up emergency operations centers; providing equipment and training needed to test patients and report data in real-time; providing safe and secure laboratory capacity; and developing a trained workforce to track and end outbreaks before they become epidemics. These are the same activities that are necessary to combat the spread of Ebola and reduce the potential for future outbreaks of infectious diseases that could follow a similarly devastating, costly, and destabilizing trajectory.

Public Health and Social Services Emergency Fund (PHSSEF) - \$333 million. The request includes \$166 million for PHSSEF to immediately respond to patients with highly-infectious diseases such as Ebola, including for the purchase of and training on the use of PPE at hospitals across the United States and to support more than 50 Ebola Treatment Centers. These Ebola Treatment Centers would be able to provide a higher level of definitive care in an isolated setting with point-of-care laboratory testing. In addition, the request includes \$157 million for the Biomedical Advanced Research and Development Authority (BARDA) for immediate response to manufacture vaccines and synthetic therapeutics for use in clinical trials. The request also includes \$10 million to aid in modeling and genetic sequencing of the Ebola virus.

National Institutes of Health - \$238 million. The request includes funding for immediate response for advanced clinical trials to evaluate the safety and efficacy of investigational vaccines and therapeutics.

Food and Drug Administration - \$25 million. The request includes funding for immediate response for development, review, regulation, and post-market surveillance of an Ebola vaccine and therapeutics.

U.S. Agency for International Development - \$1.98 billion:

The request includes funding for USAID to scale up the U.S. foreign assistance response to contain the Ebola crisis in West Africa and assist in the region's recovery from the epidemic. USAID is the lead agency for the overall U.S. response to the Ebola epidemic in West Africa, partnering with CDC, which is the medical lead. USAID's request expands emergency assistance to contain the epidemic, address humanitarian needs and support the recovery of affected

countries in the region. The request supports the medical and non-medical management of Ebola treatment units and community care facilities; provides them with PPE and supplies; helps establish the regional logistics network needed to support the international crisis response; increases the number of safe burial teams; addresses food insecurity and other second-order impacts in affected communities, such as adverse effects on maternal and child health; and bolsters community education efforts critical to prevent the spread of the disease.

The request also expands global health security activities to prevent Ebola from spreading, enhance local health care systems' ability to report threats in real-time, and establish needed capability for expert personnel and equipment to stop health emergencies before they become epidemics. This will help limit the spread of Ebola beyond Liberia, Sierra Leone, and Guinea to other vulnerable nations and will increase preparedness and response capacity for future outbreaks.

Department of State - \$127 million:

The request includes funding to expand the Department's medical support and evacuation capacity to overseas posts in the affected region, provide additional repatriation assistance, and support other diplomatic operational needs including an Ebola Coordination Unit.

The request also includes resources to fund estimated U.S. contributions to the new United Nations Mission for Ebola Emergency Response (UNMEER) and provide a voluntary contribution to the World Health Organization (WHO) to enable it to continue to provide essential technical support for overall coordination, surveillance, and data collection in each Ebola-affected country.

Lastly, the request includes funding for biosafety training efforts as well as training for civil aviation staff to implement sound screening procedures in West African countries.

Department of Defense - \$112 million:

The request includes funding for the Defense Advanced Research Projects Agency (DARPA) to support immediate efforts aimed at developing technologies that are relevant to the Ebola crisis, such as providing immediate temporary immunity, including through the use of antibodies from survivors of Ebola and other infectious diseases that will help provide a stop gap until an effective vaccine is available, and developing new technologies that could shorten the vaccine development timeline from years to months.

Contingency Fund:

The Administration is requesting \$1.54 billion for a Contingency Fund, with \$751 million for HHS and \$792 million for USAID and the Department of State.

Given the changing nature of the Ebola epidemic, the Contingency Fund is requested to ensure that there are resources available to respond to the evolving situation. If necessary, the Contingency Fund could support increased domestic efforts, such as expanded monitoring; a limited vaccination campaign that could target health care workers treating infected patients (if a vaccine is proven safe and effective); an expanded response in Guinea, Sierra Leone or other countries if the virus spreads; and, enhanced global health security efforts. As the rapidly evolving and unpredictable outbreak progresses, it is necessary to have maximum flexibility to respond quickly.

Ongoing Activities:

The emergency funding requested today complements the ongoing efforts to combat the spread of Ebola, which includes deploying key medical and expert personnel to the affected countries, increasing the Department of Defense's deployed presence of up to 4,000 service members, building a new hospital for infected health care workers, building Ebola Treatment Units, and reaching out to communities assisting with safe burials. Domestically, this funding expands upon the existing system that screens entrants from West Africa for Ebola symptoms, monitors at-risk individuals, identifies and treats Ebola patients at selected hospitals. Without these additional resources, agencies will be unable to help control the epidemic, mitigate economic, social and political impacts of the crisis, ensure adequate domestic preparedness, develop safe and effective treatments and vaccines or expedite global health security capacity to prevent, detect, and rapidly respond to outbreaks before they become epidemics. For these reasons, this emergency funding is needed to enhance the Administration's current whole-of-government response to help end the Ebola outbreak in West Africa and support increased domestic preparedness.