

116TH CONGRESS
2D SESSION

H. R. 6334

To authorize United States participation in the Coalition for Epidemic Preparedness Innovations, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 23, 2020

Mr. BERA (for himself and Mr. YOHO) introduced the following bill; which was referred to the Committee on Foreign Affairs

A BILL

To authorize United States participation in the Coalition for Epidemic Preparedness Innovations, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Securing America
5 From Epidemics Act”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

8 (1) Due to increasing population and popu-
9 lation density, human mobility, and ecological

1 change, emerging infectious diseases pose a real and
2 growing threat to global health security.

3 (2) While vaccines can be the most effective
4 tools to protect against infectious disease, the ab-
5 sence of vaccines for a new or emerging infectious
6 disease with epidemic potential is a major health se-
7 curity threat globally, posing catastrophic potential
8 human and economic costs.

9 (3) The 1918 influenza pandemic infected
10 500,000,000 people, or about one-third of the
11 world's population at the time, and killed
12 50,000,000 people—more than died in the First
13 World War.

14 (4) The economic cost of an outbreak can be
15 devastating. The estimated global cost today, should
16 an outbreak of the scale of the 1918 influenza pan-
17 demic strike, is 5 percent of global gross domestic
18 product.

19 (5) Even regional outbreaks can have enormous
20 human costs and substantially disrupt the global
21 economy and cripple regional economies. The 2014
22 Ebola outbreak in West Africa killed more than
23 11,000 and cost \$2,800,000,000 in losses in the af-
24 fected countries alone.

1 (6) The ongoing novel coronavirus outbreak re-
2 flects the pressing need for quick and effective vac-
3 cine and countermeasure development.

4 (7) While the need for vaccines to address
5 emerging epidemic threats is acute, markets to drive
6 the necessary development of vaccines to address
7 them—a complex and expensive undertaking—are
8 very often critically absent. Also absent are mecha-
9 nisms to ensure access to those vaccines by those
10 who need them when they need them.

11 (8) To address this global vulnerability and the
12 deficit of political commitment, institutional capac-
13 ity, and funding, in 2017, several countries and pri-
14 vate partners launched the Coalition for Epidemic
15 Preparedness Innovations (CEPI). CEPI’s mission
16 is to stimulate, finance, and coordinate development
17 of vaccines for high-priority, epidemic-potential
18 threats in cases where traditional markets do not
19 exist or cannot create sufficient demand.

20 (9) Through funding of partnerships, CEPI
21 seeks to bring priority vaccines candidates through
22 the end of phase II clinical trials, as well as support
23 vaccine platforms that can be rapidly deployed
24 against emerging pathogens.

1 (10) CEPI has funded multiple partners to de-
2 velop vaccine candidates against the novel
3 coronavirus, responding to this urgent, global re-
4 quirement.

5 (11) Support for and participation in CEPI is
6 an important part of the United States own health
7 security and biodefense and is in the national inter-
8 est, complementing the work of many Federal agen-
9 cies and providing significant value through global
10 partnership and burden-sharing.

11 **SEC. 3. AUTHORIZATION FOR UNITED STATES PARTICIPA-**
12 **TION.**

13 (a) IN GENERAL.—The United States is hereby au-
14 thorized to participate in the Coalition for Epidemic Pre-
15 paredness Innovations.

16 (b) PRIVILEGES AND IMMUNITIES.—The Coalition
17 for Epidemic Preparedness Innovations shall be consid-
18 ered a public international organization for purposes of
19 section 1 of the International Organizations Immunities
20 Act (22 U.S.C. 288).

21 (c) REPORTS TO CONGRESS.—Not later than 180
22 days after the date of the enactment of this Act, the Presi-
23 dent shall submit to the appropriate congressional com-
24 mittees a report that includes the following:

1 (1) The United States planned contributions to
2 the Coalition for Epidemic Preparedness Innovations
3 and the mechanisms for United States participation
4 in such Coalition.

5 (2) The manner and extent to which the United
6 States shall participate in the governance of the Co-
7 alition.

8 (3) How participation in the Coalition supports
9 relevant United States Government strategies and
10 programs in health security and biodefense, to in-
11 clude—

12 (A) the Global Health Security Strategy
13 required by section 7058(c)(3) of division K of
14 the Consolidated Appropriations Act, 2018
15 (Public Law 115–141);

16 (B) the applicable revision of the National
17 Biodefense Strategy required by section 1086 of
18 the National Defense Authorization Act for Fis-
19 cal Year 2017 (6 U.S.C. 104); and

20 (C) any other relevant decision-making
21 process for policy, planning, and spending in
22 global health security, biodefense, or vaccine
23 and medical countermeasures research and de-
24 velopment.

1 (d) APPROPRIATE CONGRESSIONAL COMMITTEES.—

2 In this section, the term “appropriate congressional com-
3 mittees” means—

4 (1) the Committee on Foreign Affairs and the
5 Committee on Appropriations of the House of Rep-
6 resentatives; and

7 (2) the Committee on Foreign Relations and
8 the Committee on Appropriations of the Senate.

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