March 19, 2020

The American Society for Microbiology (ASM) respectfully requests that you include at least $27 million for the Advanced Molecular Detection (AMD) program at the Centers for Disease Control and Prevention (CDC) in the next emergency supplemental funding bill. The AMD program has been identified by CDC leadership as a “core capability,” and is an increasingly indispensable part of the CDC’s infrastructure and laboratory capacity as it relates to outbreak response. This additional funding is critical to increase the program’s core funding for FY 2020 to $57 million.

AMD uses next generation sequencing (NGS), giving CDC and state public health labs in all 50 states new tools to detect disease faster, identify outbreaks sooner, and protect people from emerging and evolving disease threats like SARS-COV-2. Through AMD, labs have been able to apply sequencing to the novel virus and then make the data available through a global database. In the case of COVID-19, the increased capacity for microbial genomics, as well as a greater openness about sharing that data, is essential to the response by providing a clear picture of how the virus is emerging so that our response can be quicker, more effective, and more accurate. By using NGS, AMD technology brings the concept of precision medicine to bear for “precision public health.”

NGS technology continues to advance at an astounding pace, while AMD funding has remained flat since the program’s inception in 2014. As a result, the current funding level of $30 million is no longer sufficient to meet increasing demands for the equipment, training, and expertise required to support state and local health departments with precision public health and expanded collaborations. The requested increase in appropriations for the AMD program will support three specific priority areas:

1. **Innovation in the field of public health.** The current COVID-19 outbreak and the recent Zika outbreak exemplify how CDC and state and local public health laboratories now use AMD technologies on virtually the entire spectrum of emerging infectious diseases. Before the emergence of the Zika virus, the AMD program supported the implementation of sequencing for two related pathogens, which then allowed them to quickly identify Zika and develop a protocol for Zika virus testing. Without AMD, this same process would have taken three to four
months, delaying public health’s ability to quickly diagnose Zika and target prevention and control strategies.

2. **Embedding AMD fully in state and local health departments.** State and local public health departments need the infrastructure to implement AMD programs that are capable of responding to emerging threats or changing priorities. CDC works closely with state and local health departments to build the capacity for each state to have an AMD program staffed by an AMD specialist to coordinate sequencing services. While several states already have an AMD unit that serves as a core facility for the state allowing for more efficiency and resilience through sharing of sequencing resources across the health department—many states still lack this essential infrastructure. The modest increase we are requesting to the AMD program would support an AMD specialist in EVERY state to ensure national capacity to utilize this innovative diagnostic technology.

3. **Expanded collaboration between public health and academic research institutions.** The AMD program has several long-standing relationships with academic research institutions around the country. An increased investment towards these collaborations would further the US as a leader in this area. New competitive awards could be established that pair every AMD site with one academic institution and one public health department furthering collaborations and ensuring a solid public health infrastructure.

Additional funding for this unique program should be included in a larger supplemental funding package to the CDC at this critical time. We respectfully request that House and Senate leadership consider this essential program as you allocate funding for our pandemic response and provide an additional $27 million for the CDC AMD program to protect public health both now and in the months to come. Please contact Allen Segal, ASM Director of Public Policy and Advocacy at asegal@asmusa.org or 202-942-9294 with any questions.

Sincerely,

Stefano Bertuzzi, PhD, MPH
ASM Chief Executive Officer

cc: House Committee on Appropriations
Senate Committee on Appropriations