

Proposed Funding for Pandemic Influenza Initiative

White House Fact Sheet: November 1, 2005

Activity	Funding (in millions)
To detect and contain global outbreaks	\$251
To accelerate development of a cell culture technology	2,800
For development of new treatments and vaccines	800
For HHS and Defense to purchase influenza vaccines	1,519
To stockpile antiviral medications	1,029
To promote preparedness at local, state and federal levels to respond to an outbreak	644
TOTAL	\$7,043

HHS Appropriations Testimony

November 2, 2005

Activity	Funding (in millions)
Investments in creating pandemic influenza vaccine production capacity and stockpiles of vaccine	4,700
Stockpile antiviral drugs	1,400
Disease surveillance, public health infrastructure, and risk communication (State and local public preparedness efforts)	555 (100)
TOTAL	\$6,655

Budget Message from the Director of OMB to the Speaker of the House

November 1, 2005

Activity	Funding (in millions)
Funding for the Public Health and Social Services Emergency Fund to prepare for and respond to an influenza pandemic, including the development and purchase of vaccines, antivirals and necessary medical supplies, and for planning activities, to remain available until expended.	6,460
Funding for the PHSSEF for activities related to pandemic influenza including international activities and activities in foreign countries	200
Amount available for obligation in:	FY 2006: \$3.2 billion FY 2007: \$2.3 billion FY 2008: \$1.2 billion
TOTAL	\$6.660 billion

Influenza Vaccine:

- Working to acquire, over a 2 year period, enough H5N1 vaccine and antivirals to protect 20 million people should they become infected with the pandemic virus.
- Aim to create domestic influenza vaccine manufacturing capacity aimed at producing 300 million courses (two doses of vaccine per person) within 6 months of the onset of an influenza pandemic. (Between 2008 and 2013)
- Initial component is to expand the number of licensed domestic egg-based influenza vaccine manufacturers from the single one that currently exists. Would give the U.S. the ability to develop a 20 million course (40 million doses) pre-pandemic vaccine stockpile by 2009.
- This would be used to immunize health care workers, front-line responders, vaccine manufacturing personnel, and others critical to the pandemic response.
- Once this capacity is developed, current egg-based production techniques could then provide about 60 million courses of vaccine within about 6 months of an outbreak, or about 20 percent of the goal of 300 million courses with six months.
- Best hope for expanding capacity is acceleration of our investment in cell-based influenza vaccines.

Antivirals:

- To stockpile antivirals (\$1.4 billion), funds would help achieve goal of having 81 million courses of antivirals, which would be sufficient to treat 25 percent of the U.S. population (75 million courses) and a reserve supply of 6 million courses that could be used to contain an initial U.S. outbreak.
- Of the 81 million courses, 6 million will be designated to contain the first isolated domestic outbreaks.
- Of the 75 million courses that will be used to treat those infected with the pandemic virus, HHS would fully fund the procurement of 44 million treatment courses to provide protection to the highest priority groups in the event of a pandemic. Will work with States to encourage them acquire antivirals for rapid use. To help support State efforts, would establish contractual arrangements with manufacturers of approved antivirals whereby States may purchase up to 31 million treatment courses and HHS would pay for approximately 25 percent of the costs of these drugs.

Disease Surveillance, Public Health Infrastructure and Risk Communication:

- Implement and refine surveillance and epidemiological response.
- This includes funds to be used internationally.
- \$100 million is included for State and local pandemic preparedness efforts.