

117TH CONGRESS
1ST SESSION

H. R. 2118

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

IN THE HOUSE OF REPRESENTATIVES

MARCH 23, 2021

Mr. BEREA (for himself and Mr. FITZPATRICK) 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 Representatives 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 population 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 COVID–19 pandemic has infected more
10 than 119,960,700 individuals and has killed at least
11 2,656,822 people worldwide, and it is likely that un-
12 reported cases and deaths are significant.

13 (4) Even regional outbreaks can have enormous
14 human costs and substantially disrupt the global
15 economy and cripple regional economies. The 2014
16 Ebola outbreak in West Africa killed more than
17 11,000 and cost \$2,800,000,000 in losses in the af-
18 fected countries alone.

19 (5) While the need for vaccines to address
20 emerging epidemic threats is acute, markets to drive
21 the necessary development of vaccines to address
22 them—a complex and expensive undertaking—are
23 very often critically absent. Also absent are mecha-
24 nisms to ensure access to those vaccines by those
25 who need them when they need them.

1 (6) To address this global vulnerability and the
2 deficit of political commitment, institutional capac-
3 ity, and funding, in 2017, several countries and pri-
4 vate partners launched the Coalition for Epidemic
5 Preparedness Innovations (CEPI). CEPI's mission
6 is to stimulate, finance, and coordinate development
7 of vaccines for high-priority, epidemic-potential
8 threats in cases where traditional markets do not
9 exist or cannot create sufficient demand.

10 (7) Through funding of partnerships, CEPI
11 seeks to bring priority vaccines candidates through
12 the end of phase II clinical trials, as well as support
13 vaccine platforms that can be rapidly deployed
14 against emerging pathogens.

15 (8) CEPI supported the manufacturing of the
16 United States-developed Moderna COVID–19 vac-
17 cine during its Phase 1 clinical trial, and CEPI has
18 initiated at least 12 partnerships to develop vaccines
19 against COVID–19.

20 (9) CEPI is co-leading COVAX, the vaccines
21 pillar of the ACT–Accelerator, which is a global col-
22 laboration to quickly produce and equitably dis-
23 tribute safe and effective vaccines and therapeutics
24 for COVID–19.

7 SEC. 3. AUTHORIZATION FOR UNITED STATES PARTICIPA-

8 TION.

9 (a) IN GENERAL.—The United States is hereby au-
10 thorized to participate in the Coalition for Epidemic Pre-
11 paredness Innovations (“Coalition”).

(b) DESIGNATION.—The President is authorized to designate an employee of the relevant Federal department or agency providing the majority of United States contributions to the Coalition, who should demonstrate knowledge and experience in the fields of development and public health, epidemiology, or medicine, to serve—

20 (2) if nominated by the President, on the Board
21 of Directors of the Coalition, as a representative of
22 the United States.

23 (c) REPORTS TO CONGRESS.—Not later than 180
24 days after the date of the enactment of this Act, the Presi-

1 dent shall submit to the appropriate congressional com-
2 mittees a report that includes the following:

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

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

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

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

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

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

1 (d) UNITED STATES CONTRIBUTIONS.—Amounts au-
2 thorized to be appropriated under chapters 1 and 10 of
3 part I and chapter 4 of part II of the Foreign Assistance
4 Act of 1961 (22 U.S.C. 2151 et seq.) are authorized to
5 be made available for United States contributions to the
6 Coalition.

7 (e) APPROPRIATE CONGRESSIONAL COMMITTEES.—
8 In this section, the term “appropriate congressional com-
9 mittees” means—

- 10 (1) the Committee on Foreign Affairs and the
11 Committee on Appropriations of the House of Rep-
12 resentatives; and
13 (2) the Committee on Foreign Relations and
14 the Committee on Appropriations of the Senate.

