The NOVID Act (Nullifying Opportunities for Variants to Infect and Decimate)
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Problem
While vaccines are widely available for Americans, the rest of the world has not been as fortunate. If the current vaccination rate continues, many middle-income countries may not achieve widespread vaccination until late 2022, and the world’s poorest nations will likely not reach widespread vaccination coverage before 2023, if at all.

This is not just a problem for the rest of the world. The unchecked transmission of COVID-19 gives rise to new variants, many of which show vaccine-resistance. The most concerning of these variants have been shown to reduce vaccine efficacy by as much as 20-40%, and a recent survey of international epidemiologists by Oxfam found that 66% believe we may have as little as one year or less before the majority of first-generation vaccines are rendered ineffective. We must end the pandemic globally before that happens.

The COVAX initiative, which was conceived to help procure vaccines for low-income countries, has already fallen behind schedule. As of May 5, COVAX had only delivered 53.8m shots to 121 countries, just 22.7% of the 237m doses that were due to be delivered by now, and only 2.7% of COVAX’s goal of 2bn doses in 2021.

Proposal
To protect the United States and to end this pandemic on a global scale, the NOVID Act will establish the Pandemic Preparedness and Response Program (PanPReP), which will have oversight and responsibility for the U.S. Government global health response to the COVID-19 pandemic.

The Program will coordinate between State, USAID, CDC, FDA, BARDA, Health Resources and Services Administration, DOD, Department of Commerce, the Peace Corps, and the Department of Labor. The Program will also be responsible for coordinating the U.S. Government response with international non-governmental organizations, development banks and civil society as well as foreign governments.

After the COVID-19 pandemic, the Program will shift to protect against future pandemics by coordinating a global disease surveillance network to identify and stop pandemic-potential pathogens before they spread uncontrollably.

Specifics
The Program will establish a comprehensive strategy to end the COVID-19 pandemic worldwide. It will establish specific, achievable goals, and focus on three primary issues:

1. Working with manufacturers to rapidly scale up the production of vaccines and vaccine components around the world to ensure there is an adequate supply of vaccines for all nations.
2. Working with our international partners to purchase enough vaccines for low- and middle-income countries to immunize at least 60% of their populations.
3. Supporting end-to-end delivery and administration of vaccines in low- and middle-income countries. In this respect, the Program should be modelled off of the President's Emergency Plan For AIDS Relief (PEPFAR), which has for almost two decades set the global standard for targeted bilateral public health interventions.

The bill would authorize spending for $34 billion: $25 billion to cover the cost of scaling manufacturing capacity and producing 8 billion vaccine doses; $8.5 billion to cover the cost of end-to-end delivery of enough vaccines to immunize 60% of the populations in the 92 COVAX countries; and $500 million to establish a global disease surveillance network to protect against future pandemics. We anticipate our international partners would contribute to cover additional costs, including health care workers’ salaries and medical treatment for COVID-19 patients.

Benefits
The world is turning to the United States for help, and we must rise to the occasion. In addition to preventing new vaccine-resistant variants, these efforts will place the United States at the forefront of global health security. The cost is minimal when compared with the price of doing nothing.

Join: To cosponsor the NOVID Act, please email Rachel.sorensen@mail.house.gov.