

Bolstering Infectious Outbreaks (BIO) Preparedness Workforce Act

Frequently Asked Questions

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The *BIO Preparedness Workforce Act* (S.3244/H.R. 5602) would create a new loan repayment program for health professionals conducting bio-preparedness activities in facilities across the country and health care professionals providing infectious diseases care in underserved communities and federally funded facilities. The bill has been introduced by Senators Tammy Baldwin (D-WI) and Susan Collins (R-ME) in the Senate and Representatives Lori Trahan (D-MA) and David McKinley (R-WV) in the House of Representatives. This FAQ was developed to provide more information on the bill and how it relates to other loan repayment programs.

Why is this legislation needed?

- The COVID-19 pandemic and recent natural disasters have exposed weaknesses in our nation's preparedness for public health emergencies related to infectious disease outbreaks, including insufficient infectious diseases (ID) workforce capacity at health care facilities.
- Incentives, such as the loan repayment provided in the *BIO Preparedness Workforce Act*, are important to ensure an adequate supply and support recruitment of bio-preparedness and ID health professionals.
- ID physicians and health care professionals lead and are key members of health care facility preparedness and response teams in addition to preventing and caring for people with serious infectious diseases, such as HIV, hepatitis B and C and endocarditis and other infections linked to the opioid and substance use epidemics.
- Many communities lack sufficient infectious diseases expertise to conduct bio-preparedness activities and provide ID care. A June 2020 [study](#) in the *Annals of Internal Medicine* found that 208 million Americans live in areas with little or no access to an ID physician.

How can a loan repayment program help?

- The [average medical student](#) carries more than \$240,000 in educational debt and \$215,000 in medical student debt.
- The ID specialty is not financially feasible for many newly trained physicians. The annual salaries for ID physicians are well [below salaries of almost all other medical specialties](#), including the general internists, although ID training and certification requires an additional two to three years of study and training. Educational debt poses an [even larger barrier](#) for individuals from underserved populations in medicine to pursue careers in infectious diseases and other specialties, making it difficult to recruit the diverse workforce necessary to address health inequities.
- Physicians and other health care professionals conducting bio-preparedness activities or providing ID care are not eligible for most other loan repayment programs.

How would this bill strengthen pandemic preparedness?

- Every community requires a strong workforce to conduct bio-preparedness activities to mount rapid, effective responses during natural disasters in addition to infectious diseases and other pandemic threats.

- By incentivizing health care professionals to be a part of the bio-preparedness team, the bill would help to ensure more facilities have staff to conduct activities critical to prepare for the next pandemic.
- The bill also allows the Secretary to ensure that loan repayment provided under this bill helps to diversify the bio-preparedness and infectious diseases workforce.

What are bio-preparedness activities?

Trained staff are needed to conduct and lead activities that ensure facilities have the systems, equipment and processes in place during health care and public emergencies. The activities include:

- Developing and updating response and surge capacity plans and protocols;
- Collaborating with state and local health departments to ensure communications channels and response plans align;
- Training health care facility personnel;
- Purchasing and managing equipment, such as personal protective equipment or PPE for bio-emergencies;
- Executing readiness assessments;
- Repurposing areas of a health care facility to manage patient influx;
- Communicating with the public;
- Performing infection prevention and control; and
- Conducting antimicrobial stewardship to ensure that treatments for infectious diseases are used appropriately to yield optimal patient outcomes.

Who conducts bio-preparedness activities?

- A multidisciplinary team is responsible for ensuring facilities and communities are prepared to respond during public health crises, including natural disasters, outbreaks and pandemics. The team includes physicians, clinical pharmacists, physician assistants, advanced practice registered nurses, infection preventionists and clinical laboratory professionals.

Would this loan repayment program be limited to physicians?

- No. Eligible health care professionals include physicians, clinical pharmacists, physician assistants and advanced practice registered nurses.
- In addition, infection preventionists and clinical laboratory professionals are included in the definition for a bio-preparedness health care professional; and dentists are included in the definition for an infectious diseases health care professional.
- Eligible recipients are limited to those from the following degree and certificate programs, and additional programs at the Secretary's discretion: MD, DO, PhD, PharmD, RN, BSN, MSN, NP, CNP, PA-C, DrPH, MPH, MS epidemiology, MT, MLT, DDS and DMD.

How would this bill interact with the workforce funding and provisions included in the American Rescue Plan (ARP) Act of 2021?

- The ARP provided **supplemental, one-time** funding to support the public health workforce during the public health emergency and increased funding for the National Health Service Corps and the Nurse Corps to provide **primary care services** in underserved areas.
- ARP also provided funding to support a **voluntary** Medical Reserve Corps as a mechanism for health care professionals to help respond to and prepare for public health emergencies.
- The BIO Preparedness Workforce Act would be complementary to the workforce provisions included in the ARP. The BIO Preparedness Workforce Act would create a new loan repayment opportunity for ID healthcare professionals, which is not available through other workforce programs. Loan repayment targeted to ID healthcare professionals is needed to ensure facilities across the country have ID healthcare professionals to prepare for the next pandemic and that underserved communities have ID healthcare professionals to prevent and treat infectious diseases.

Why create a new program instead of building on an existing program?

- Current federal loan repayment programs are focused on various workforce shortages and recruiting needs that do not encompass the bio-preparedness activities or infectious diseases care outlined in the *BIO Preparedness Workforce Act*.
- Federal loan repayment programs in the Public Health Service Act include:

Sec. 317F	CDC Epidemic Intelligence Service (EIS)
Sec. 338B	National Health Service Corps
Sec. 487A	NIH Intramural Loan Repayment Program
Sec. 487B	NIH Extramural Loan Repayment Program
Sec. 775	Pediatric Specialty Care Workforce
Sec. 776	Public Health Workforce Loan Repayment Program
Sec. 781	Substance Use Disorder Treatment Workforce

Would this program be duplicative of other loan repayment programs?

- No, the existing loan repayment programs related to infectious diseases are specifically tied to employment at a federal, state, local or tribal public health agency rather than direct patient care in the community.
- The *BIO Preparedness Workforce Act* establishes two categories of eligibility that differ from the existing programs:
 1. Health care professionals who spend at least 50% of their time engaged in **bio-preparedness and response** activities; and
 2. Health care professionals who spend at least 50% of their time providing **infectious disease care** in a shortage designation area, underserved community or federally funded facility.
- In addition, the *BIO Preparedness Workforce Act* specifically excludes individuals employed by a public health agency so that it does not duplicate the Sec. 776 Public Health Workforce Loan Repayment Program, which is specific to individuals employed by such agencies; and the Sec. 317F CDC EIS loan repayment program, which is specific to individuals employed by the Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry.

Is this a disease-specific bill?

- No. Infectious diseases care is broad and touches on nearly every aspect of health care. ID professionals focus on diagnosing and managing a range of acute and chronic infections caused by bacteria, parasites, fungi and viruses that frequently are linked to other health conditions. In addition, the *BIO Preparedness Workforce Act* supports pandemic preparedness activities that are not specific to any disease or circumstance.
- The COVID-19 public health emergency has highlighted the need for such activities. However, they are equally important when responding to other epidemics (e.g., Ebola, Zika, etc.) or pandemics (e.g., H1N1, HIV, viral hepatitis and other infections associated with opioid use), as well as natural disasters (e.g., flooding, fires, hurricanes, etc.). Natural disasters often result in displacement of patients, water-borne illness, noroviruses and other infections that pose a risk for evacuation shelters.

Is service limited to certain settings or geographic areas?

- Every community needs to be prepared to prevent and respond to outbreaks, natural disasters and pandemics. Because of this, eligible service for bio-preparedness and response health care professionals is defined according to the type of activities and not limited by geography or setting.
- For health care professionals providing ID care, eligible service areas would include working in medically underserved communities, health professional shortage areas or frontier health professional shortage areas or working with medically underserved populations. In addition, service also could be completed at sites that receive federal funding, such as community health centers and rural health clinics, Indian tribe or tribal organizations, Ryan White Program clinics, critical access hospitals or academic institutions affiliated with such an institution.

What length of service would be required to qualify for loan forgiveness under this program? How does it compare to other federal loan programs?

- The *BIO Preparedness Workforce Act* would require a service agreement of 3 years, or longer as determined appropriate by the Secretary.
- The service requirement is similar to other loan repayment programs. For example, the National Health Service Corps Loan Repayment Program (Sec. 338B PHSA) requires a minimum of 2 years of service.
- The NIH loan repayment programs (Secs. 487A & 487B, PHSA) do not specify a service commitment but provide a maximum loan repayment amount per year of service.
- The Pediatric Specialty Care Workforce Loan Repayment Program (Sec. 775) requires a 2- to 3-year commitment, the CDC EIS program (Sec. 317F) requires at least a 2-year commitment and the Public Health Workforce Loan Repayment Program (Sec. 776) requires at least a 3-year commitment.
- The Substance Use Disorder Treatment Workforce Loan Repayment Program (Sec. 781 PHSA) requires an annual commitment for up to 6 years.

What level of loan repayment would be available under this program, and how does it compare to other federal loan programs?

- The *BIO Preparedness Workforce Act* would provide up to \$50,000 for each year of service. That amount is comparable to other loan repayment programs.
- The CDC Epidemic Intelligence Service (EIS) Loan Repayment Program (Sec. 317F), National Health Service Corps Loan Repayment Program (Sec. 338B PHSA), NIH Intramural Loan Repayment Program (Sec. 487A) and NIH Extramural Loan Repayment Program (Sec. 487B) authorize payment up to \$50,000 for each year of service.
- The Pediatric Specialty Care Workforce Loan Repayment Program (Sec. 775) and the Public Health Workforce Loan Repayment Program (Sec. 776) provide up to \$35,000 for each year of service.
- The Substance Use Disorder Treatment Workforce Loan Repayment Program (Sec. 781) provides up to \$250,000 total over 6 years of service, which is a maximum of approximately \$42,000 per year of service.

Who supports this bill?

Support for the bill continues to grow. The list of supporters includes:

- AIDS Action Baltimore
- AIDS Foundation Chicago
- AIDS Institute
- AIDS United
- American Academy of HIV Medicine
- American Association for the Study of Liver Disease
- American College of Clinical Pharmacy
- American Dental Association
- American Hospital Association
- American Institute of Dental Public Health
- American Medical Association
- American Society for Clinical Laboratory Science
- American Society for Microbiology
- Association for Professionals in Infection Control and Epidemiology
- Association of Nurses in AIDS Care
- CARES of Southwest Michigan
- Cascade AIDS Project
- Georgia Equality
- GLMA: Health Professionals Advancing LGBTQ Equality
- HIV AIDS Alliance of Michigan
- HIV Dental Alliance
- HIV + Hepatitis Policy Institute
- HIV Medicine Association
- Infectious Diseases Society of America
- Johns Hopkins Center for Health Security
- Latino Commission on AIDS
- Music City PrEP Clinic
- National Black Gay Men’s Advocacy Coalition
- National Hispanic Medical Association
- National Medical Association
- National Rural Health Association
- National Viral Hepatitis Roundtable
- National Working Positive Coalition
- Pediatric Infectious Diseases Society
- Physician Assistant Education Association
- Ryan White Medical Providers Coalition
- San Francisco AIDS Foundation
- Society for Health Care Epidemiology of America
- Society of Infectious Diseases Pharmacists
- Tufts Medical Center

- University of Wisconsin Health System
- University of Wisconsin School of Medicine and Public Health
- Valley AIDS Council
- Vivent Health
- Wisconsin Hospital Association
- Wisconsin Medical Society