



PACCARB

PRESIDENTIAL ADVISORY COUNCIL ON COMBATING ANTIBIOTIC-RESISTANT BACTERIA

Dear Secretary Becerra,

On behalf of the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria (PACCARB), we bring to your attention a critical issue that, if not immediately addressed, would undermine the collective U.S. government effort to support our public health infrastructure to combat rising rates of antimicrobial resistance (AMR). There is a significant shortage of infectious diseases (ID) professionals, including ID physicians, nurse practitioners, physician assistants, and clinical pharmacists, in our nation. Fewer healthcare professionals enter, and more physicians exit the specialty. Nearly 80% of U.S. counties do not have a single ID physician,¹ and only half of ID physician training programs were filled this year.² Furthermore, burnout among healthcare workers continues to increase, which exacerbates the current staffing shortage and limits access to ID professionals for both pediatric and adult patients.³

ID professionals are extremely important to combatting AMR. Resistant infections are rising and are anticipated to cause more than 10 million deaths annually by 2050, equaling and potentially surpassing the death rate of cancer.⁴ ID professionals lead infection prevention and control programs as well as antimicrobial stewardship programs—two vital operational roles that are required of all hospitals but are insufficiently filled. Additionally, ID professionals play a critical role in public health response, managing emergent and endemic infectious diseases, the treatment of zoonotic and globally relevant diseases, and are instrumental in pandemic preparedness and response.

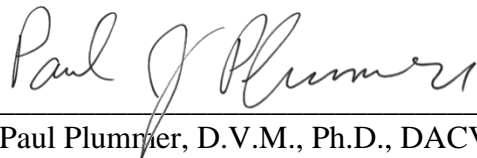
We urge the development and enactment of federal incentives to promote more ID professionals entering the workforce, such as the addition of new Center for Medicare and Medicaid Services (CMS) codes for ID-related activities to increase reimbursement,⁵ federal loan forgiveness or repayment programs, and sufficient and sustained federal funding for these ID workforce incentives.

ID care is complex, highly specialized, and potentially protracted. CMS charge codes and reimbursement structures must reflect this specialty's critical role and appropriately compensate for the efforts of ID professionals. ID physicians are among the lowest paid physician specialties in the U.S. and sub-specialty training in ID generally results in lower pay than primary care physicians.^{6,7} Offering incentives that can boost earnings or alleviate post-education financial burdens can drive more professionals to enter this specialty. The passing of federal loan

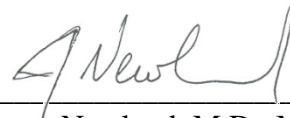
forgiveness or repayment programs is important, but not sufficient; funding must be appropriated for these initiatives and must be sustained over time.

As previously recommended in the PACCARB's 2023 report *Preparing for the Next Pandemic in the Era of Antimicrobial Resistance*, bolstering the ID professional workforce by expanding recruitment and financial support is critical in the fight against AMR and preserving our nation's health in the face of this continued and intensifying public health threat. The recommendations provided in that report and this letter should be considered the first step in addressing the critical ID professional workforce shortage.

Sincerely,



Paul Plummer, D.V.M., Ph.D., DACVIM
Chair



Jason Newland, M.D., M.Ed., FPIDS
Vice Chair

¹ Walensky, R. et al. (2020). "Where Is the ID in COVID-19?" *Annals of Internal Medicine* 173(7): 587-589.
<https://www.acpjournals.org/doi/10.7326/M20-2684>

² Infectious Diseases Society of America. (2024). ID Fellowship Match Results.
<https://www.idsociety.org/professional-development/student--resident-opportunities/id-match/match-resources/>

³ Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria. (2023).
<https://www.hhs.gov/sites/default/files/paccarb-pandemic-preparedness-report.pdf>

⁴ United Nations Environment Programme. (2023). Bracing for superbugs: Strengthening environmental action in the One Health response to antimicrobial resistance. <https://www.unep.org/resources/superbugs/environmental-action>

⁵ Letter sent by Infectious Diseases Society of America to the Centers for Medicare & Medicaid Services February 2024.: Retrieved from https://www.idsociety.org/globalassets/idsa/policy--advocacy/current_topics_and_issues/antimicrobial_resistance/strengthening_us_efforts/letters-manually-added/idsa-add-on-codes-letter-and-descriptors_feb2024.pdf

⁶ Infectious Diseases Society of America. (2022). IDSA--Compensation Infographic. Retrieved from <https://www.idsociety.org/globalassets/value-of-id/idsa---compensation-infographic-horizontal-090722.pdf>

⁷ Medscape. (2024). Medscape Physician compensation Report 2024. Retrieved from <https://www.medscape.com/slideshow/2024-compensation-overview-6017073>