

To: Scott Pendergast, World Health Organization
Paul Molinaro, World Health Organization
Dr. Mark Perkins, World Health Organization
Dr. Mike Ryan, World Health Organization
Peter Sands, The Global Fund to Fight AIDS, Tuberculosis and Malaria
Philippe Francois, The Global Fund to Fight AIDS, Tuberculosis and Malaria
Ira Magaziner, Clinton Health Access Initiative
Alan Staple, Clinton Health Access Initiative
Jackson Hungu, Clinton Health Access Initiative
Rich Freeman, Clinton Health Access Initiative
Dr. Philippe Duneton, Unitaid
Robert Matiru, Unitaid
Natalie Revelle, Bill & Melinda Gates Foundation
Tanya Shewchuk, Bill & Melinda Gates Foundation
Dr. Catharina Boehme, Foundation for Innovative New Diagnostics
Dr. Sergio Carmona, Foundation for Innovative New Diagnostics
Etleva Kadilli, United Nations Children's Fund
Lama Suleiman, United Nations Children's Fund
Dr. Soji Adeyi, World Bank
Dr. Yewen Kebede, Africa CDC
Dr. Brenda Waning, Stop TB Partnership Global Drug Facility

Cc: UN COVID-19 Supply Chain Task Force
National Department of Health, South Africa
Ministry of Health and Family Welfare, India
Ministry of Health, Brazil
Ministry of Health, Kenya
African Society for Laboratory Medicine
Global Fund Communities Delegation
Global Fund Developing Countries NGOs Delegation
Global Fund Developed Countries NGOs Delegation
Unitaid Communities Delegation
Unitaid NGOs Delegation

Civil society call for equitable and affordable access to COVID-19 and related diagnostics

24 April 2020

Dear Scott Pendergast and Colleagues,

COVID-19 has presented the unprecedented challenge to rapidly develop, manufacture, and scale-up testing for SARS-CoV-2 to stem the tide of the pandemic, while also ensuring supply and capacity necessary to maintain testing for other infectious diseases. For communities in low- and middle-income countries with fragile health systems and already over-stretched health budgets, access to testing—including for SARS-CoV-2, TB, HIV, HCV and other diseases—will be a matter of life and death.

As major global health actors, funders, and procurers, you have tremendous responsibility to work together, and with country governments, to mobilize funding and coordinate the supply and procurement of essential diagnostic tests for SARS-CoV-2 and other diseases that share common platforms and supply chains. This responsibility includes maximizing donor and domestic funds and clout by leveraging your collective funding and procurement power to: (1) negotiate affordable prices for diagnostic tests; and (2) guarantee equitable allocation of these diagnostic tests to low- and middle-income countries in a way that is transparent, harmonized

with existing, well-established procurement mechanisms, and based on a set of shared principles that promote equity and solidarity.

The undersigned civil society organizations respectfully request a conference call to better understand the work of the Diagnostics Supply Consortium and to share our concerns—which include its criteria and approach to rationing and reinforcing the existing supply of tests for SARS-CoV-2 and other infectious diseases that rely on the same supply chains and platforms—as well as efforts to secure more affordable prices for SARS-CoV-2 molecular diagnostic tests and supplies. These pressing concerns are added to our longstanding concerns that global health actors, funders, and procurers are not sufficiently coordinated or engaged in bundling procurement of molecular diagnostic tests for TB, HIV, HCV, and other diseases inclusive of the cost of service and maintenance, or using their procurement power and leverage to negotiate the lowest possible prices for these tests.

The undersigned civil society organizations call for more transparency, accountability, and collective will from the global health actors, funders, and procurers to which this letter is addressed, as members of our communities are dying undiagnosed and untreated due to insufficient access to testing. For the past decade, low- and middle-income country needs for molecular diagnostic testing have been insufficiently met, in large part due to the high prices of tests, which is the result of companies pricing tests based on what the market will bear, rather than on the cost-of-goods-sold (COGS), volumes, and manufacturing efficiencies, and considering public and philanthropic investments. Global health actors, funders, and procurers have allowed the molecular diagnostics companies to remain unchallenged, thereby leading to supplies that are overpriced and inaccessible for many low- and middle-income countries. In addition to securing lower prices, we need all actors to ensure adequate supply by promoting technology transfer for qualified manufacturers and adherence to a coordinated and equitable approach to allocating existing and anticipated supplies of essential diagnostic tests and supplies during the ongoing pandemic.

The unprecedented challenge of preserving and continuing to improve public health in low- and middle-income countries through scaling-up testing for COVID-19, TB, HIV, HCV, and other diseases requires unparalleled action, and collective will, from global health actors, funders, and country governments. We call for a higher level of global coordination, transparency, and accountability to ensure sustainable and equitable access to molecular diagnostic testing for COVID-19, as well as to address the decades-long global health crisis that unaffordability and lack of access to testing for TB, HIV, HCV and other diseases has presented.

The undersigned civil society organizations respectfully request a conference call to discuss the above-mentioned issues and concerns as a matter of urgent priority. By 1 May, we look forward to your response, which can be directed to David.Branigan@treatmentactiongroup.org.

Sincerely,

Treatment Action Group (TAG)
AIDS-Free World (AFW)
Global Coalition of TB Activists (GCTA)
Global TB Community Advisory Board (TB CAB)
International Treatment Preparedness Coalition (ITPC) Global
Médecins Sans Frontières (MSF) Access Campaign
Partners in Health (PIH)
Treatment Action Campaign (TAC)