

Stéphane Bancel, Chief Executive Officer Moderna, Inc. 200 Technology Square Cambridge, MA 02139

November 16, 2021

Dear Mr. Bancel,

We are writing to urge you to accelerate efforts to end the pandemic around the world. Moderna's world-class vaccine offers you the unparalleled power to help save millions of lives across the world from this deadly disease in the near future. Yet Moderna has taken a different approach so far: mRNA-1273 has so far almost exclusively been supplied to wealthy countries, while low- and middle-income countries are left without, or with long waits and high prices.

Humanity remains in a state of emergency. Almost a year since the world's first vaccine was administered, only four percent of people have received a vaccine in low-income countries, which have received less than half of one percent of vaccines globally. We are in no doubt that most COVID-19 deaths in low-income countries are now avoidable deaths: lives that could be saved were effective vaccines, none more than mRNA-1273, widely available to their populations. Concerningly, the World Health Organization estimates that six of every seven COVID-19 cases in Africa are going undetected.

We believe Moderna can help solve this crisis by ensuring that mRNA-1273 is produced and delivered safely at scale. On October 13, at a panel event hosted virtually by Yale Law School, Dr. David Kessler, Chief Science Officer of the White House COVID-19 Response Team, stated that "there is very substantial capacity through 2022 for [Moderna] to close, and in fact, even exceed the COVAX gap and they need to do that." Dr. Kessler added that this capacity was "in the billions at Moderna through 2022," and called on Moderna to provide these doses to low- and middle-income countries at a not-for-profit price.

Moreover, the White House on October 18 called on Moderna to share know-how with other parts of the world to increase vaccine manufacturing capacity. On October 26, Moderna announced plans to sell up to 110 million doses to the African Union, with only 15 million doses arriving before the end of 2021, and 35 million more doses arriving during the first quarter of 2022.

If these plans are realized, more than 50 million Africans could be vaccinated. But 1.3 billion people live on the continent. The strategy of relying on donations to overcome a global pandemic is failing. We write on behalf of nearly 90 health, human rights and humanitarian organizations in the US and across the globe including UNAIDS, Club de Madrid, Public Citizen and Oxfam to ask for an urgent response on three issues fundamental to ramping up supply.

1) The NIH-Moderna COVID-19 vaccine is the first Moderna ever marketed, and Moderna has produced fewer than 500 million doses cumulatively so far. Does Moderna have excess production capacity "in the billions [of doses] through 2022" that could be allocated towards low-and middle-income countries, as Dr. Kessler has stated? Please provide detailed justification of Moderna's production estimates, including a breakdown of how many 100  $\mu$ g (primary series dose) and 50  $\mu$ g (booster dose) you expect to manufacture and how prior production estimates throughout this pandemic have borne out.

2) The World Health Organization is establishing a technology transfer hub in South Africa to produce mRNA-1273 – or a vaccine as close to it as possible. The WHO has stated that Moderna transferring its technology would shave years off their production timeline. Will Moderna heed the call of Dr. Kessler, the White House and WHO to share know-how and transfer technology through the World Health Organization to qualified manufacturers in other parts of the world?

3) So far, only about one million doses of mRNA-1273 have gone to low-income countries and Moderna has shipped a greater share of doses to wealthy countries than any other COVID-19 vaccine manufacturer. Our analysis suggests that at scale, a not-for-profit price for mRNA-1273 would be no greater than \$3 per dose. Will Moderna commit to providing the doses that it produces to low- and middle-income countries where they are needed most, including through COVAX, and at cost?

Moderna, with the NIH, has developed the world's most effective vaccine technology, that is also the world's most exclusive vaccine, out of reach to billions of people. This can and must change.

We look forward to your urgent response and stand ready to work with you to scale up vaccine supply, save lives and end this pandemic.

Sincerely,

People's Vaccine Alliance Public Citizen Africa Faith and Justice Network African Alliance African Women and Youth Initiative American Women and Youth Initiative American Friends Services Committee American Medical Student Association Amnesty International Amref Health Africa UK Archewell Foundation AVAC Be A Hero Bread for the World C19 Peoples Coalition and Peoples Vaccine Campaign South Africa CAFOD (Catholic Agency for Overseas Development)

Center for Artistic Activism Center for Economic and Social Rights Center for Health and Hope Chasing Zero Christian Aid Clean Clothes Campaign International Office Club de Madrid Concern Worldwide Congregation of Our Lady of Charity of the Good Shepherd, U.S. Provinces Conigli Bianchi - Artivists against Serophobia **Doctors For America** Doctors Without Borders | Médecins Sans Frontières USA **EMERGENCY** EqualHealth Campaign Against Racism European Citizens' Initiative No profit on Pandemic Faithful America Foundation for Integrative AIDS Research (FIAR) Free the Vaccine for COVID-19 Freedom Road Friends in Solidarity, Inc. Frontline AIDS Fundación IFARMA Get1Give1 Worldwide Global Justice Now Global Network of People living with (GNP+) Health GAP Health Poverty Action HelpAge International Help Justice International Human Rights Watch Humana People to People Ibn Sina Academy of Medieval Medicine and Sciences Incentives for Global Health International Trade Union Confederation Just Treatment Kamukunji Paralegal Trust (KAPLET) Knowledge Ecology International Last Mile Health Leadership Conference of Women Religious Maryknoll Office for Global Concerns **MSI** United States National Advocacy Center of the Sisters of the Good Shepherd Network Lobby for Catholic Social Justice Nizami Ganjavi International Center **ONE** Campaign Oxfam Partners In Health

Physicians for Human Rights PrEP4All Public Eye, Switzerland Public Services International RESULTS **RESULTS UK Right2Health Action** Salud por Derecho Sama SECTION27 Sojourners **STOPAIDS** The Access Challenge The Borgen Project The Center for Artistic Activism / Free the Vaccine for COVID-19 The United Methodist Church - General Board of Church and Society Treatment Action Group **UNAIDS UNI Global Union** Unitarian Universalist Service Committee Universities Allied for Essential Medicines (UAEM) Vaccine Advocacy Resource Group Wemos Win Without War Youth Foundation of Bangladesh Yunus Centre

CC: Dr. David Kessler, Chief Science Officer, White House COVID-19 Response Team

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