
MEMORANDUM

TO: Cornerstone Clients
FROM: Cornerstone Government Affairs
Subject: House Committee on Energy and Commerce Subcommittee on Oversight and Investigations Hearing, “No Time to Lose: Solutions to Increase COVID-19 Vaccinations in the States”
DATE: Feb. 2, 2020

On Tuesday, Feb. 2, the House Committee on Energy and Commerce Subcommittee on Oversight and Investigations met for the first time in the 117th Congress to examine the distribution and administration of COVID-19 vaccinations in the U.S. The purpose of the hearing was to hear best practices and challenges from state leaders on the front lines of vaccine distribution. All five witnesses emphasized that their states are equipped and eager to distribute more vaccines than they are currently being allocated, and there was broad consensus among witnesses and members about the need to increase the speed and efficiency of COVID-19 vaccine rollout across all states. The primary point of disagreement among members of the Committee was the extent to which the federal government should be involved in state and local vaccine distribution. Republican members were generally more supportive of a localized, individual approach to vaccine distribution, while Democrats were vocal about the importance of federal support and the creation of a national communications strategy to promote vaccine confidence and aid distribution.

Witnesses

Dr. Ngozi Ezike, M.D. – Director, Illinois Department of Public Health
Dr. Joneigh S. Khaldun, M.D., M.P.H., F.A.C.E.P. – Chief Medical Executive and Chief Deputy Director, Michigan Department of Health and Human Services
Dr. Clay Marsh, M.D. – COVID-19/Coronavirus Czar, West Virginia
Dr. Courtney N. Philips, Ph.D. – Secretary, Louisiana Department of Health
Jill Hunsaker Ryan, M.P.H. – Executive Director, Colorado Department of Public Health and Environment

Members in Attendance

Subcommittee Chairwoman Diana DeGette (D-CO), Full Committee Chairman Frank Pallone (D-NJ), Rep. Jan Schakowsky (D-IL), Rep. Raul Ruiz (D-CA), Rep. Ann Kuster (D-NH), Rep. Paul Tonko (D-NY), Rep. Kathleen Rice (D-NY), Rep. Kim Schrier (D-WA), Rep. Lori Trahan (D-MA), Rep. Tom O’Halloran (D-AZ), Rep. Darren Soto (D-FL), Rep. Debbie Dingell (D-MI), Subcommittee Ranking Member Rep. Morgan Griffith (R-VA), Full Committee Ranking Member Rep. Cathy McMorris Rodgers (R-WA), Rep. Neal Dunn (R-FL), Rep. John Joyce (R-PA), Rep. Gary Palmer (R-AL), Rep. Michael Burgess (R-TX), Rep. David McKinley (R-WV), Rep. Tim Walberg (R-MI), Rep. Buddy Carter (R-GA)

Key Themes

Collaboration Between Federal, State, and Local Governments

The distribution of responsibility across local, state, and federal government in the vaccine rollout was a consistent theme throughout the hearing. In her opening statement, Full Committee Ranking Member Rodgers stated she was frustrated with the common one-size-fits-all approach to addressing the pandemic and said Congress needs to look at each state individually. When asked by Ranking Member Rodgers to outline his perspective on a localized approach to vaccine distribution, Dr. Marsh explained that, to best meet the needs of

the West Virginia community, there needed to be local involvement. He stated that by engaging local pharmacies in the distribution of vaccines, it allowed West Virginia to control their supply chain and respond quickly to any changes. In their opening statements, Dr. Philips, Ms. Ryan, Dr. Marsh, and Dr. Ezike all outlined the effectiveness of establishing a wide network of local providers in their vaccine distribution plans. Dr. Philips cited Louisiana's strategy as being "low and wide" with over 1,900 providers in place.

While each witness described useful community-based strategies, most still emphasized the need for federal support. After disagreeing with Ranking Member Rodgers on her state-by-state view, Full Committee Chairman Pallone asked the witnesses if there is a need for a national strategy and another COVID-19 relief bill. Dr. Khaldun testified that additional funds and a national communications strategy are needed. In her opening statement, Dr. Ezike stated that a multi-pronged approach supported by the federal government would be the most effective strategy to increase vaccinations across the country. She listed direct financial support, improved communication streams, and robust data sharing systems as important aspects of a successful strategy.

Data reporting was identified as a significant barrier to collaboration between different levels of government. Multiple witnesses testified that the federal government reporting infrastructure needs to be improved. Dr. Khaldun emphasized in her opening statement the need for improvements in data reporting, which has contributed to miscommunications and confusion during the pandemic. When questioned by Rep. Walberg about why Michigan seemed to lag behind other states in vaccine distribution, Dr. Khaldun pointed to inconsistent, out of date, and inaccurate data reporting at the Centers for Disease Control and Prevention (CDC). Dr. Marsh added that there have been improvements to the reporting system, but there is still a need for states to control their own reporting and data sharing. He also suggested the creation of a portal for states to share best practices.

The role of the private sector was also questioned by some members as an alternative to government intervention. While emphasizing his position against a one-size-fits-all model, Rep. Dunn asked if public-private partnerships allow states to use resources more effectively than a far-reaching federal mandate. Dr. Marsh responded that these relationships are useful, but they need to be met with a top-down approach. In her opening statement, Dr. Philips outlined the partnerships Louisiana has developed with CVS and Walgreens in their vaccine roll out plan. When asked why flexibility is needed in the pharmacy program, Dr. Philips described the success they had in Louisiana; the vaccine distribution speed did not match allotment speed, which meant they needed to hold back on giving out first doses of vaccines to make sure second doses were getting into the arms of those who needed them in the proper timeframe. By working directly with CVS and Walgreens, Louisiana was able to save some doses from going to waste.

Transparency and Preparedness

Multiple witnesses expressed a need for increased transparency from the federal government about how much vaccine is available and, subsequently, the need for more advanced notice about vaccine shipments. They expressed that not knowing how much vaccine they would be receiving until a week before distribution made it extremely difficult to plan ahead. Members, too, expressed concern about a lack of transparency and preparedness in their lines of questioning. When asked by Rep. Rice to describe the communication with federal officials in recent weeks, Ms. Ryan stated that Army Gen. Gustavo Perna, chief operating officer of Operation Warp Speed, has been very supportive and transparent in his communications, offering himself up as a personal contact to help problem solve in real time. Dr. Khaldun and Ms. Ryan both testified that communication has improved under the Biden Administration, and that they are now receiving two to three weeks of prior notice for vaccine allocations rather than the one week they were receiving previously. This additional time has been

essential for scheduling appointments, allocating resources, and planning for the distribution of first and second doses.

Resource Supply and Demand

Members and witnesses focused on three key resource challenges: vaccine doses, equipment, and personnel. The panel of witnesses consistently expressed a need for an increased supply of COVID-19 vaccine doses to meet the demand in their states. When asked by Rep. DeGette what is needed from Congress to improve the rate of vaccinations, Ms. Ryan and Dr. Marsh both stated that an increased supply of vaccines would be the most impactful solution. In her opening statement, Dr. Philips stated Louisiana has secured 1,900 vaccine distributors, but only 32 percent have received vaccines. Rep. Tonko asked what effect an increase in vaccines would have in Michigan, and Dr. Khaldun responded that it would allow a more targeted and equitable distribution of vaccines to marginalized communities.

Subcommittee Ranking Member Griffith asked why there is a discrepancy between the number of doses distributed versus doses administered. Dr. Marsh explained the discrepancy is mostly due to inaccurate tracking systems. He said in West Virginia they have taken a localized approach to ensure full control over the doses, and explained that the state receives its doses into five hubs to minimize distance to the distribution sites, and all doses have a GPS tracker. If the doses are not administered within seven days, they are brought back to a hub for reallocation.

Rep. Kuster asked how the witnesses' states were balancing the distribution of the first and second doses in the face of limited supplies. Dr. Philips said it is difficult to ensure those who receive their first dose can also receive their second dose in the necessary time frame, while still maximizing the number of people who receive their first vaccine. This is due partly to the lack of available vaccine, but also due to not knowing ahead of time what their dose allotment will be for a given week. Dr. Marsh responded by citing studies indicating the first dose reduces the severity of the illness, which is why West Virginia have prioritized first doses even if it means second doses are delayed.

In addition to limited vaccines, Rep. Schrier asked what supplies states are most concerned about and what Congress can do help stabilize the supply chain. Ms. Ryan said there needs to be support from the federal government to ensure supply chains do not seize up. Dr. Marsh suggested that states need to become more self-sufficient to make their own vaccine and testing equipment.

In response to Rep. Soto's question regarding what the federal government can do to support the health care workforce, Dr. Ezike said it is necessary to expand the pool of vaccinators and develop training for non-health care professionals. Dr. Khaldun and Dr. Philips emphasized the importance of the National Guard in their vaccine distribution efforts. They both stated the 100 percent Federal Emergency Management Agency (FEMA) funding is critical and must be continued for any future efforts to be successful. Mr. Marsh added that his "vaccinate the vaccinators" program has been essential to expanding distribution efforts. Responding to a similar question from Full Committee Chairman Pallone, Ms. Ryan advocated for sustained public health infrastructure funding. She argued that public health has been chronically underfunded and a sustained investment, rather than one-time emergency funding, is necessary to build out a robust public health workforce.

Vaccine Hesitancy and Communication

The topic of vaccine hesitancy and misinformation was highlighted by several members and witnesses. Rep. O'Halleran and Chairwoman DeGette asked what resources the federal government could provide to help



overcome vaccine hesitancy. Dr. Ezike emphasized the need for a national communications strategy with a clear and focused message on mask wearing and vaccine information. In her opening statement, Dr. Khaldun asserted that there is a need for a communications strategy to stop the spread of misinformation. Dr. Marsh agreed clear communication is important but advocated for a more collaborative, localized approach to spreading information.

To effectively communicate about vaccines with constituents, many members were interested in the communication streams the witnesses use to disseminate information. Ranking Member Griffith asked what methods of communication Dr. Marsh used to reach elderly citizens in West Virginia. Dr. Marsh said they had implemented several methods including regular T.V. briefings, an information call center, and community-based approaches. Dr. Ezike expressed that the key to the Illinois communication strategy has been local health departments.

Rep. Ruiz cited several statistics regarding health disparities in minority groups, and specifically the Hispanic community. When asked by Rep. Ruiz how focusing on equity has influenced vaccine distribution, Dr. Ezike stated that Illinois holds regular virtual townhalls in Spanish and English and has coordinated with TV channels such as Telemundo to distribute vaccine information. Rep. Palmer also pointed to the specific reluctance in minority communities to get vaccinated. In response, Dr. Khaldun stated there has been a long history of exploitation of people of color by the U.S. health care system, so shaming is not an effective method of engagement for them. She argued that there should be a focus on engaging community leaders to promote appropriate and clear messaging, and highlighted in her opening statement that her state has set up testing sites in convenient locations and has focused on developing strategic communications to these communities.

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