
MEMORANDUM

TO: Cornerstone Clients
FROM: Cornerstone Government Affairs
SUBJECT: House Energy & Commerce Hearing on Road to Recovery, Ramping Up COVID-19 Response
DATE: Feb. 4, 2021

On Wednesday, Feb. 3, 2021, the House Committee on Energy and Commerce Subcommittee on Health held a hearing titled "Road To Recovery: Ramping Up Covid-19 Vaccines, Testing, And Medical Supply Chain." The Committee discussed the challenges in administering vaccines, expanding testing, and developing an interoperable system to track data regarding the pandemic. The issue of equity was also addressed, with witnesses identifying several barriers communities of color face in accessing resources. Members and witnesses discussed problems and solutions with the U.S. supply chain, which present a national security threat. Additionally, members asked about the need to improve public health infrastructure which, witnesses testified, has been chronically underfunded.

Witnesses:

- *Luciana Borio, M.D.* – Vice President, In-Q-Tel; Former Acting Chief Scientist, FDA; Former Director for Medical and Biodefense Preparedness, National Security Council
- *Greg Burel* – President and Principal Consultant, Hamilton Grace; Former Director, United States Strategic National Stockpile
- *The Honorable Michael O. Leavitt* – Founder and Chair, Leavitt Partners; Former Secretary of Health and Human Services; Former Governor of Utah
- *Julie Morita, M.D.* – Executive Vice President, Robert Wood Johnson Foundation

Members in Attendance:

Subcommittee Chair Anna Eshoo (D-CA), Full Committee Chairman Frank Pallone (D-NJ), Rep. G.K. Butterfield (D-NC), Rep. Doris Matsui (D-CA), Rep. Kathy Castor (D-FL), Rep. Peter Welch (D-VT), Rep. Kurt Schrader (D-OR), Rep. Tony Cárdenas (D-CA), Rep. Raul Ruiz (D-CA), Rep. Debbie Dingell (D-MI), Rep. Ann Kuster (D-NH), Rep. Nanette Diaz Barragán (D-CA), Rep. Lisa Blunt Rochester (D-DE), Rep. Kim Schrier (D-WA), Rep. Lori Trahan (D-MA), Rep. Lizzie Fletcher (D-TX), Rep. Angie Craig (D-MN), Rep. Robin Kelly (D-IL), Rep. John Sarbanes (D-MD), Rep. Tom O'Halleran (D-AZ), Subcommittee Ranking Member Brett Guthrie (R-KY), Full Committee Ranking Member Cathy McMorris Rodgers (R-WA), Rep. Fred Upton (R-MI), Rep. Michael Burgess (R-TX), Rep. Morgan Griffith (R-VA), Rep. Gus Bilirakis (R-FL), Rep. Larry Bucshon (R-IN), Rep. Richard Hudson (R-NC), Rep. Neal Dunn (R-FL), Rep. John Curtis (R-UT), Rep. John Joyce (R-PA), Rep. Buddy Carter (R-GA).

Key Themes:

Vaccine Distribution and Testing Availability

Members and witnesses discussed the challenges and barriers to expanding testing and vaccine distribution. Full Committee Chairman Pallone argued that sustaining the vaccine program is a top priority for pandemic response. Subcommittee Ranking Member Guthrie and Full Committee Ranking Member McMorris Rodgers

commended the development and approval of two vaccines in record time under Operation Warp Speed, but several Democrats, including Full Committee Chairman Pallone and Reps. Butterfield and Barragán, felt that the previous administration's lack of a comprehensive vaccination plan hindered progress on managing the virus.

Chair Eshoo noted the importance of President Biden's American Rescue Plan for addressing vaccine distribution, specifically highlighting the \$20 billion allocation for a national vaccination strategy to vaccinate 300 million Americans by the end of the summer, \$3 billion to develop innovative COVID-19 treatments, and further funding to create a public health corps of 100,000 new community health workers and expand testing. Chair Eshoo added that each day vaccinations are sped up will save \$10 billion in health and economic costs.

Ranking Member Guthrie noted that some states are doing well with local vaccine distribution, but other states have had a slow distribution due to a lack of transparency about when and how many doses they will receive. Dr. Borio testified that states need additional resources and clear communication to plan how they will distribute the doses. Furthermore, she explained, the unique temperature control requirements and multiple doses present additional challenges. Gov. Leavitt and Dr. Morita highlighted the need for customized approaches to vaccine distribution, as individual communities best understand their own needs. Dr. Morita also pointed to the potential for mobile units as a method of distribution in the future. Dr. Morita also stated open communication between all levels of government, increased transparency, and a ramping up of the public health workforce will improve vaccination measures. Full Committee Ranking Member McMorris Rodgers pointed to the success of states such as West Virginia that have relied on community pharmacists to vaccinate people. In response to Rep. Butterfield's comment that 95 percent of Americans live within five miles of a pharmacy, Dr. Morita noted that pharmacies were a critical component in the H1N1 vaccine response and commended the Biden Administration's plan to make more vaccine doses available through pharmacies.

While vaccine distribution efforts are critical, many members highlighted the need for continued testing and contact tracing as well. Full Committee Chairman Pallone and Reps. Fletcher and Castor emphasized the need for the development of an effective national testing strategy that addresses the accuracy and reliability of tests. Rep. Schrier advocated for the development of affordable, at-home tests to increase testing accessibility. Rep. Schrier asked Dr. Borio about whether there has been any head-to-head testing done on rapid antigen tests to determine the most effective tests. Dr. Borio responded that, to her knowledge, there had not been that type of testing, but went further to say that it is possible to do that type of head-to-head evaluation to determine the best test to invest in, scale up, and roll out to the country. Additionally, Dr. Borio underscored the importance of multiple options for health care practitioners and innovations in technology to allow testing and contact tracing to be conducted at the right speed. When asked by Rep. Fletcher what Congress could do to ensure proper resources are allocated to testing and tracing, Dr. Morita said the greatest barrier to testing is insufficient staff, so that is where resources should be directed.

Public Health Infrastructure

Members and witnesses agreed that improvements to and sustained funding for public health infrastructure are critical. In his testimony, Gov. Leavitt suggested that fragmented data on vaccination measures presents a challenge to vaccine rollout. He pointed to the Centers for Disease Control and Prevention's (CDC) IZ Gateway, which allows for cross-state jurisdictions to share vaccine information, as a solution. Rep. Upton asked how many states currently participate in the IZ Gateway, to which Gov. Leavitt responded that only about half of the jurisdictions are participating. Gov. Leavitt encouraged Committee members to include a provision in the next

stimulus to require states receiving federally funded vaccines to report vaccine data to the IZ Gateway. Dr. Borio underscored the importance of an expanded surveillance system and interoperable data infrastructure for public health. She argued that building interoperable systems with the capability to integrate data from all states and territories is critical for the federal government and local health professionals to develop a coordinated response.

In response to a question from Rep. Sarbanes about the need for a more robust public health workforce, as is proposed in President Biden’s American Rescue Plan, Dr. Borio agreed that staffing shortages are a supply chain issue. In the short term, she said, this issue can be addressed by rehiring retired health care professionals and looking to other health care professionals such as dentists and pharmacists to support vaccine administration efforts. In the long term, she suggested making a more concerted investment in the public health workforce to manage future threats.

Full Committee Chairman Pallone and Reps. Sarbanes and Joyce each highlighted the need to prepare for future pandemics. When Rep. Joyce asked what Congress should do to ensure vaccines are available for future Coronavirus mutations and pandemics, Gov. Leavitt emphasized the need for increased funding to boost public health infrastructure and improved coordination with federal agencies. Dr. Borio asserted the need to develop a system that integrates good governance, the private sector, and technology to manage future threats. Rep. Kuster advocated for improved data infrastructure, and asked Dr. Borio what that would look like. Dr. Borio said improvement in public health data infrastructure would be an integrated, interoperable system with tremendous capability to link data from federal government to public health professionals.

Supply Chain Reliability

Full Committee Chairman Pallone and Full Committee Ranking Member McMorris Rodgers expressed concern about U.S. reliance on China and emphasized the need for a more robust medical supply chain. Pallone also mentioned that several states are facing shortages of medical supplies such as syringes, vials, drugs, and personal protective equipment (PPE). In her opening statement, Dr. Borio described the U.S. supply chain for making and distributing vaccines as fragile and noted that while use of the Defense Production Act may help, the Department of Health and Human Services (HHS) must expand the industrial base for critical supplies. In response to a question about supply chain stability from Full Committee Ranking Member McMorris Rodgers, Dr. Borio explained that a lack of any single component in the supply chain could bring the entire vaccine process to a halt. She said the most important next steps are expanding the industrial base to manufacture critical supplies like filters, columns, syringes, and needles. Full Committee Ranking Member McMorris Rodgers also noted the importance of strengthening stockpile logistics and addressing supply chain vulnerabilities due to reliance on adversaries such as China. In response to a question from Rep. Joyce about preparing for future pandemics and coronavirus variants, Mr. Burel emphasized the need to invest in sustained domestic health care manufacturing, describing it as a national security “imperative.” Rep. Upton pointed out that many states have to reschedule or cancel second doses of the vaccine because states are receiving different amounts of vaccines than expected. He asked how the vaccine supply chain could improve so individuals don’t have to forgo second doses. Gov. Leavitt said having a steady supply and coordination between levels of government was key. Rep. Bilirakis asked about how the U.S. could balance supply chain resiliency with value in the future. Mr. Burel recommended building stock in the Strategic National Stockpile as well as incentivizing manufacturers to hold flexible stock.

In response to a question from Rep. Upton, Mr. Burel testified that most PPE is made overseas, but many businesses want to enter this sector. Chair Eshoo pushed back on that claim in her questioning, saying that there are major American vendors that manufacture PPE in the U.S. Mr. Burel also emphasized the need to invest in and encourage manufacturers to make better quality PPE, faster, even beyond the pandemic. In response to Rep. Griffith’s question on what portion of supply chain products should be developed in the U.S., Mr. Burel emphasized the need to invest in PPE infrastructure at the federal level and said the U.S. should not limit itself to a single manufacturer or location. Rep. Schrader agreed that there should be a baseline level of PPE made in the U.S. and asked about incentives for manufacturers to enter this market. Mr. Burel outlined measures including a subsidy program, investing in joint ventures, and federal assistance to help companies manufacture and improve their manufacturing. Mr. Burel said the government needs to provide incentives and regulatory structures to support domestic production. In the long-term, as these markets are created, they must continue to be supported. Chair Eshoo commented she believed the PPE supply chain should be entirely domestically produced.

Equity

A key topic of discussion was the importance of ensuring equitable access to health care resources in the most vulnerable communities. Chair Eshoo noted disparity in care among communities of color due to lack of access and affordability. Rep. Butterfield asserted during his line of questioning that equity should be at the center of any national vaccination plan. Rep. Ruiz highlighted the barriers many face when attempting to be vaccinated, including the difficulty navigating online appointment systems, lack of transportation to vaccine facilities, inability to take time off, and a lack of resources available in different languages.

In response to Rep. Kelly’s question about testing and vaccine access for people with disabilities, Dr. Morita emphasized the need to bring vaccination sites and health care workers directly to vulnerable communities. Additionally, she noted the need for greater accessibility by making appointments available by phone and not just through the internet. Dr. Morita testified that Congress should encourage states to vaccinate individuals by priority and report vaccination data on race, ethnicity, occupation, and neighborhood. She also reaffirmed the importance of improving current data systems and supporting the manpower needed to maintain them. Rep. Butterfield also emphasized the importance of improving data collection measures, noting that race and ethnicity data is currently only available for about half of those receiving vaccines.

Members and witnesses also discussed mistrust in health information as a key barrier to vaccination. Witnesses agreed that community groups, faith-based organizations, and neighborhood actors can play a key role in addressing these concerns. Additionally, Dr. Morita underscored the importance of diversity in vaccine clinical trials to build trust among communities of color that the results are representative and safe.

Rep. Ruiz asked about the potential for Federally Qualified Health Centers (FQHCs) to reach communities of color. In response, Dr. Morita testified that FQHCs are trusted by and well connected to communities of color, but face barriers in lack of resources, inadequate staffing, and insufficient compensation for work. Gov. Leavitt also noted the important role of FQHCs in solving challenges of equity if given adequate resources and funding.

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