



Senate Committee on Finance

Part 1: Protecting the Reliability of the U.S. Medical Supply Chain During the COVID-19 Pandemic

July 28, 2020

10:15 AM, 215 Dirksen Senate Office Building

Purpose

The purpose of this hearing is to examine the current state of the nation's medical supply chain and discuss strategies to secure it for future public health events.

Members Present

Chairman Grassley, Ranking member Wyden, Senators Portman, Stabenow, Menendez, Lankford, Carper, Cassidy, Cardin, Bennet, Casey, Hassan, Brown, Cortez Masto, Daines, Cantwell

Witnesses

Thomas F. Overacker., Cargo and Conveyance Security, Office Of Field Operations, United States Customs and Border Protection (CBP), Washington, DC

Steve K. Francis., Assistant Director, Homeland Security Investigations Global Trade Investigations Division, Director, National Intellectual Property Rights Coordination Center, United States Immigration, Customs, and Enforcement, Washington , DC

Soraya Correa., Chief Procurement Officer, United States Department of Homeland Security, Washington, DC

Opening Statements

(16:25) Chairman Grassley said that it is the duty of Congress to ensure that the Department of Homeland Security is protecting Americans by ensuring that the U.S. medical supply chain is secure. Everyone can agree that the COVID-19 pandemic has exposed several vulnerabilities in the medical supply chain. Some of the vulnerabilities are new, but many have existed for a long time. It has also become evident that China has serious quality control problems. Far too many products in the American market are counterfeits that originated in China. This committee must go back to the beginning and examine the root cause of the supply chain vulnerabilities. When the pandemic first started, China restricted the export of personal protective equipment (PPE) and instructed local governments to purchase PPE from the international market. This action prevented front line workers in the United States from accessing the necessary PPE to keep them safe. The United States must reduce its dependence on China. The US cannot allow its supply chain to be so heavily reliant on other countries. Even more concerning, is that small providers who tend to treat low income families, have been heavily impacted by the pandemic. This population has also been hit the hardest and is 4 or 5 times more likely to be hospitalized. Black and Brown communities are suffering. This committee is dedicated to assisting these communities.

(29:25) Ranking member Wyden had audio difficulties for the beginning of his opening statement. **Ranking member Wyden** said that the President of the United States is not interested in helping the American people. Instead he is deploying paramilitary personnel against citizens of the United States. The President has denied his role in the COVID-19 pandemic since the beginning. His actions reflect that actions of an election campaign as opposed to the actions of a sitting president. Unfortunately, the President has left states and localities on their own to purchase scarce essential supplies. This has created an environment where states are left to compete with each other, thus inflating prices. This cannot continue.

Testimony

(41:35) Ms. Correa said that the Department of Homeland Security (DHS) recognizes the importance of ensuring that contracts are awarded to responsible actors. Since the declaration of the Public Health Emergency, DHS has been committed to hiring trustworthy and successful contractors. To accomplish this, three specific actions were taken. First, special emergency contracting authorities were invoked under the Federal Acquisition Regulation. This helped increase the purchasing power of FEMA and other departments. Second the communication framework between industry, agencies and stakeholders was enhanced to provide more transparent and streamlined communication. Finally, in response to an extraordinary surge in inquiries from industry, a supplier verification team and procurement and acquisition innovation team were created. These teams share the results of their work across DHS on a regular basis. They also provide industry with a centralized approach to engage with DHS on COVID-19. In addition, using the Commercial Solutions Opening Pilot Program Authority, DHS can obtain innovative commercial products that may help meet the new and emerging mission needs that have resulted from the COVID-19 pandemic and to prepare as we consider future outbreaks or similar threats. The solicitation will remain open until August 31, 2020. The Chief Procurement Office remains fully committed to ensuring the Department has the products and services needed to fulfill its critical mission to safeguard the American people, our homeland, and our values.

(45:55) Mr. Overacker said the global scale of this pandemic has required a comprehensive response. CBP serves steadfastly on the frontlines, implementing and supporting the U.S. response, effectively managing travel and trade, and mitigating risk. CBP acknowledges that a successful U.S. response demands strong partnerships with other government agencies, private-sector stakeholders, medical organizations, and our international counterparts. CBP has prioritized communication with all parties involved in the global medical supply chain. During fiscal year 2019, CBP processed 35.5 million entries valued at over \$2.7 trillion and more than 28.7 million imported cargo containers at U.S. ports of entry. Over the last six months and as a direct result of the global pandemic, CBP has seen a 12 percent decline in overall volume and a 13 percent decline in the value of imports when compared to the same period for 2019. While the U.S. is working with Canada, Mexico, and other international partners to implement certain border restrictions for non-essential travel, U.S. borders remain open for commerce, and CBP continues to facilitate legitimate commercial trade at POEs nationwide. At the end of March, CBP created the COVID-19 Cargo Resolution Team composed of a network of subject matter experts from across the agency. CBP also worked with FEMA's Supply Chain Stabilization Task Force on Project Air Bridge, which significantly sped up the delivery of high-demand medical and PPE supplies from overseas manufacturers. CBP is also leveraging existing partnerships with industry to facilitate the import of legitimate medical supplies. CBP continues to carry out its mission of facilitating and

safeguarding the global supply chain, and has increased its focus on the critical medical supply chain and products needed for the nation's response.

(50:55) Mr. Francis said COVID-19 is a worldwide pandemic affecting nearly every country in the world. Despite widespread illness and death caused by COVID-19, individuals and organizations operating around the globe are actively seeking to exploit the pandemic for illicit financial gain. The illicit schemes these entities employ compromise legitimate trade and financial systems, threaten the integrity of the U.S. border, and endanger the safety and security of the American public. In April 2020, Homeland Security Investigations (HSI) launched Operation Stolen Promise to utilize the agency's unique authorities, robust cyber capabilities, and strategic partnerships worldwide to protect the Homeland from the increasing and evolving threat posed by COVID-19-related fraud and criminal activity. As the COVID-19 pandemic has evolved and intensified, concerned Americans have sought to acquire test kits, PPE, medicines, hygiene products, and other medical equipment and supplies to protect themselves from the virus. Since March 2020, HSI offices domestically and internationally have seen a significant increase in COVID-related fraud and other criminal activity. In response, HSI has intensified collaboration and partnership with multiple federal departments and agencies, along with business and industry representatives, to ensure the surging criminal activity surrounding the COVID-19 pandemic is met with an equally robust investigative response. In the midst of a relentless global pandemic, the American people are counting on law enforcement to safeguard the public and ensure that our states, cities, and communities are protected from individuals and organizations intent on exploiting the pandemic through fraud. This is why HSI launched Operation Stolen Promise, and why the men and women of HSI have worked day in and day out to identify, disrupt, and dismantle these schemes rapidly and effectively utilizing the unique and extensive tools at HSI's disposal.

Questions and Answers

(55:50) Chairman Grassley asked how DHS is prioritizing small business who seek to provide aide and support to the federal government. **Mr. Correa** said that DHS has a very robust small business program. DHS has a very strong record with the small business administration.

Chairman Grassley asked if DHS is prioritizing minority owned business. **Ms. Correa** said yes.

Chairman Grassley asked how to obtain innovative solutions to address procurement problems.

Ms. Correa said that DHS uses their Commercial Solutions Opening Pilot Program (CSOP) to invite commercial industries to submit potential solutions. In addition, the CSOP should be extended.

Chairman Grassley asked about the status of the United States Customs and Border Protection (CBP) proposed procedure to disclose information otherwise protected by the Trade Secrets Act.

Mr. Overacker said that this procedure is currently being developed.

(1:02:00) Ranking member Wyden asked if forcing state health departments to procure medical supplies through any source was a sound national strategy. **Ms. Correa** said she cannot comment on this.

Ranking member Wyden asked if it is good public health policy to ask states to compete against each other. **Ms. Correa** said she is not the person to comment on public health policy.

Ranking member Wyden asked how the nation benefits from the standpoint of fighting the pandemic, by deflecting federal resources to arrest civilians in places like Portland. **Ms. Correa** said that she cannot answer that question.

(1:08:10) Sen. Portman asked how long term contracts help bring production back into the United States. **Ms. Correa** said that having long term financial predictability and stability encourages companies to invest in domestic production. Industry is always worried about their financial bottom line. **Sen. Portman** asked how to eliminate bad actors from the supply chain. **Mr. Francis** said that educating consumers and businesses is a start. This is currently happening in real time.

(1:15:10) Sen. Stabenow asked what is the criteria for giving no bid contracts, and what is done to verify the accuracy of any claim made by the contract winner. **Ms. Correa** said no bid contracts are also called sole source contracts because they are only awarded to one winner. In order to be awarded the contract, DHS vets all of the certifications claimed to be possessed by the company.

(1:21:10) Sen. Menendez asked if having a nationwide system to provide accurate and real-time assessments of the nation's supply chain would be a good idea. **Ms. Correa** said yes. **Sen. Menendez** asked if having a national view of the nation's supply chain would be a good idea. **Ms. Correa** said yes. **Sen. Menendez** asked if the Intellectual Property Rights Coordination Center (IPR) has worked with e-commerce platforms to encourage upfront screening of vendors. **Mr. Francis** said yes. Currently engagement is optional. **Sen. Menendez** asked if funds should be appropriated for the IPR. **Mr. Francis** said yes.

(1:27:00) Sen. Lankford asked what challenges exist in tracking precursor chemicals. **Mr. Francis** said that this is very challenging. The IPR works with special agents to identify when precursor chemicals come into the US and identify their country of origin. **Mr. Overacker** said that he works closely with domestic pharmaceutical manufacturers to have a better understanding of their supply chain needs. **Sen. Lankford** asked if there is any conversation surrounding diversifying the precursor chemical supply chain. **Mr. Overacker** said yes, but his office does not pick winners and losers. Instead they help to facilitate the procurement of supplies when needed. **Sen. Lankford** asked if forced labor is being used to create products coming into the United States. **Mr. Overacker** said yes. Action is being taken in this area to prevent this.

(1:33:15) Sen. Carper asked if a coordinated federal strategy to ensure the availability of PPE would be a good idea. **Ms. Correa** said yes. A coordinated procurement strategy is always a good idea. Currently, there is no update on any official coordinated strategy. **Sen. Carper** asked what DHS and FEMA are doing to help update and integrate public health data. **Ms. Correa** said from the perspective of procurement, DHS is leveraging private partnerships to enhance their capabilities. She will bring this question back to the department. **Sen. Carper** asked what is being done to ensure that travelers COVID-19 test results are quickly and accurately collected. **Ms. Correa** said she is not the person to answer this question. **Mr. Overacker** said that CBP is working on this but he does not have a current answer. He will bring this question back to CBP.

(1:39:35) Sen. Cassidy asked if the US could decrease the number of counterfeit good if supply chains were moved out of the China. **Mr. Francis** said yes. **Sen. Cassidy** asked to what degree are countries cooperating once the United States identifies counterfeit products. **Mr. Francis** said that Hong Kong and Chinese officials support US investigative efforts. **Sen. Cassidy** asked if there is an association between counterfeiting and human trafficking and other criminal activity. **Mr. Francis** said yes, there is a large association between the two.

(1:45:15) Sen. Cardin asked what is being done to prevent supply hoarding and price gouging. **Mr. Overacker** said that there are actors in the federal government who are currently investigating and holding accountable entities who hoard supplies and price gouge. The Department of Justice is heavily involved. **Ms. Correa** said the Department of Justice is the prime actor in this space. **Sen. Cardin** asked how state law enforcement is being levered. **Mr. Francis** said the US Attorney's Office out of NJ is leading the task force in this area.

(1:51:00) Sen. Bennet asked what can be done to help America better respond to the pandemic. **Ms. Correa** said from a procurement perspective, if more data was available, DHS could coordinate to identify all of the various sources of supply. **Sen. Bennet** asked if DHS has enough data at the state level. **Ms. Correa** said that it varies state by state.

(2:27:40) Sen. Casey asked why PPE shortages still exist. **Ms. Correa** said that her role does not allow her to direct the manufacturing of equipment. Thus, it is hard for her to answer this question. **Sen. Casey** asked how much domestic PPE has been purchased versus foreign PPE. **Ms. Correa** said that she does not have exact data on this. Domestic products are always preferred, however when it is not available foreign products are used next.

(2:33:40) Sen. Hassan asked what medical products and supplies have been the focus of counterfeiters since the start of the pandemic. **Mr. Overacker** said counterfeit masks, shut out lanyards, and other misleading products.

(2:40:20) Sen. Brown asked if the lack of federal coordination has contributed to the lack of PPE. **Ms. Correa** said that this is hard to answer but it is possible. **Sen. Brown** asked if increasing domestic production would help respond to future pandemics. **Ms. Correa** said yes. **Sen. Brown** asked if any PPE supplies have been made with forced Uighur labor. **Mr. Overacker** said that this is currently being investigated. He will return to the committee with results.

(2:46:20) Sen. Cortez Masto asked if the COVID-19 cargo resolution team works with state and local governments. **Mr. Overacker** said yes. **Sen. Cortez Masto** asked if there is a contact person that a Governor could reach out to on the cargo resolution team. **Mr. Overacker** said yes, they already have access to a portal. **Sen. Cortez Masto** asked what is being done to address the inefficient PPE market. **Mr. Overacker** said that CBP has tried to expedite the release of products from legitimate vendors. Unfortunately, this has become a global competition.

(2:51:45) Sen. Daines asked about the trends of medical products being imported from China since the start of the pandemic. **Mr. Overacker** said that by far China is the largest supplier of PPE on a global scale. CBP is continuing to scrutinize Chinese imports turn over products to FDA for further verification of accuracy. **Sen. Daines** asked if DHS was prepared to meet the COVID-19 crisis with respect to procurement. **Ms. Correa** said that this pandemic put significant stress on the whole country. Unfortunately, the contracts that DHS had were not sufficient. Thus DHS expanded their capacity.

(2:58:00) Sen. Whitehouse asked who Ms. Correa buys supplies for. **Ms. Correa** said the entire Department of Homeland Security, FEMA and HHS. **Sen. Whitehouse** asked if Ms. Correa is

charged with purchasing supplies for states. **Ms. Correa** said no. **Sen. Whitehouse** asked if it is fair to call the current marketplace 'toxic' based on the prevalence of counterfeit products. **Mr. Francis** said it is certainly a very challenging environment that is full of fraud. **Mr. Overacker** agreed. **Sen. Whitehouse** asked if it is correct that the White House is aware of this 'toxic' marketplace. **Mr. Overacker** said yes. **Mr. Francis** said yes.

(3:03:20) Sen. Cantwell asked if CBP has enough personnel to respond to COVID-19. **Mr. Overacker** said that Congress has supported CBP very well. CBP does not have officers who are specially trained in PPE equipment. They rely on the private sector to explain the needs. **Sen. Cantwell** asked if CBP is coordinating with FDA and FEMA to ensure that the PPE coming into the nation is legitimate. **Mr. Overacker** said yes.

Senate Committee on Finance

Part 2: Protecting the Reliability of the U.S. Medical Supply Chain During the COVID-19 Pandemic
July 30, 2020

9:30 AM, 215 Dirksen Senate Office Building

Purpose

The purpose of this hearing was to examine the current state of the nation's medical supply chain and discuss strategies to secure it for future public health events

Members Present

Chairman Grassley, Ranking member Wyden, Senators Roberts, Carper, Cardin, Brown, Cortez Masto, Casey, Whitehouse, Hassan, Portman, Cassidy

Witnesses

Ms. Cathy Denning, RN, MSN., Group Senior Vice President, Sourcing Operations, Analytics And Center Of Excellence, Vizient, Irving, TX

Mr. Rob Wiehe., Senior Vice President, Chief Supply Chain And Logistics Officer, UC Health, Cincinnati, OH

Mr. Charles D. Johnson., President, International Safety Equipment Association (ISEA), Arlington, VA

Dr. Ernest Grant, RN, FAAN., President, American Nurses Association, Silver Spring, MD

Opening Statements

(31:00) Chairman Grassley said this is the second hearing to discuss the state of nations medical supply chain. Today, this committee will hear from a panel of industry experts who represents various corners of the supply chain. These witnesses have an insider perspective into the challenges currently facing the nation. Securing the supply chain continues to be an ongoing challenges. The medical supply market has become contaminated with fake and faulty equipment. It is a fact that the federal governments approach to emergency preparedness has always been filled with challenges. However, Democrats will make one believe that these problems are specific to this administration. The federal government has never been prepared to address a crisis of this scale.

(38:30) Ranking member Wyden said the Finance Committee is focusing this week on issues dealing with the lack of high-quality PPE and other equipment during the pandemic. On March 19th, 2020, with coronavirus cases beginning to go skyward, the president said the following when asked about buying and distributing PPE: “The federal government’s not supposed to be out there buying vast amounts of items and then shipping ... governors are supposed to be doing it.” On March 29, he accused nurses and doctors of stealing PPE: “Something is going on, and you ought to look into it as reporters. Where are the masks going? Are they going out the back door?” In mid-April, he called reports of PPE shortages “fake news.” Just in the last few days, Democratic Finance Committee staff have gathered direct accounts from health care workers about PPE shortages that are devastating communities, given the recent spikes in cases. The committee heard from nurses in Dallas, Texas, where COVID cases are surging, who recently began buying their own surgical masks since their hospital was requiring staff to reuse old ones for days at a time. The committee heard from an administrator of a 33-bed hospital in rural Alabama, serving a majority Black community, who told the committee her hospital is so low on PPE that she keeps an emergency supply stashed in her office for safekeeping. An ongoing study by Kaiser Health News and the Guardian has identified at least 851 deaths among frontline health care workers likely due to COVID-19. From sea to shining sea, Americans are desperately hoping there are safe and successful vaccines on the market in the coming months. They need to be distributed in a fair, methodical and medically-sound way. Unfortunately, the country’s experience over the past five months raises serious concerns about whether or not Americans can have any confidence this will be the case.

Testimony

(49:00) Ms. Denning said Vizient holds a unique position in that they work closely with both healthcare providers and suppliers. They act as a liaison, advocating on behalf of the member providers they serve and sometimes acting as their lifeline in times of disaster. First, the supply chain is not “broken” as some have claimed. Generally speaking, even in times of previous disasters like hurricanes, floods, and others – the health care supply chain represents a great example of different stakeholders working together for a common purpose. Previously, manufacturers, distributors, GPOs, hospitals and others have been able to quickly put protocols and processes in place to help guide critical supplies and services to areas most in need. When COVID-19 hit, no one knew how it was transmitted, where it came from, or how to treat it – only that it presented with a complicated mix of symptoms and appeared to be respiratory in 3 nature. This meant that providers were facing an unknown, highly contagious infection and the public was panicked here and simultaneously across the globe. It was the perfect storm. To add to the challenges, virtually overnight, hospitals were using roughly ten times their usual amount of PPE products and those in the hardest hit areas were using ten to fifteen times their usual amount of N95 respirators at the peak of their surge. Bottom line – in the pre-COVID-19 environment, there was simply no way for anyone to have adequately planned for this unprecedented and ongoing spike in worldwide demand for PPE. In order to further build a resilient supply chain, more transparency is needed. Transparency into the location of manufacturing, including raw materials, as well as storage locations. In addition, there is a need for a diversified supply chain – one that is global in nature. By having multiple manufacturing locations spread across the globe, we mitigate the risk of having all manufacturing of an essential product in one location wiped out by a single event. Finally, the stockpile should have at least 90 days of supplies for key items.

(54:50) Mr. Wiehe said the challenges that have emerged from the COVID-19 pandemic are unlike anything we have encountered in our lifetimes. The healthcare sector has been one of the hardest hit by this pandemic. Coronavirus-related disruptions to supply chains, combined with dramatic increases in global demand, are among one of the many challenges that hospitals and systems are facing in today's environment. Specific to the healthcare industry, Mr. Wiehe would offer the following specific examples of areas that can continue to be strengthened and improved: 1. Communication and transparency along the entire supply chain must be improved. 2. Create a more diverse and possibly regionalized approach for critical supplies. 3. Require manufacturers of critical supplies to report raw materials and manufacturing capacities to the government to provide insight into the most important supply chains. 4. Require health systems or hospitals to carry a minimum days on hand supply of critical supplies. 5. Improve transparency and communication on the national stockpile. 6. Build a larger national stockpile of critical supplies. 7. Improve domestic capabilities and capacities for the manufacturing of critical raw materials and supplies.

(1:00:50) Mr. Johnson said that ISEA's member companies have been challenged on two fronts. First, the safety and efficacy of the PPE used to combat the COVID-19 pandemic has been compromised by opportunistic market behavior. The incredible increase our member companies have seen in counterfeit, fraudulent, and non-performing equipment is of great concern to the manufacturers of, and more importantly, the users of, PPE. Second, the overall capability of the US to provide protection during this pandemic has been sorely tested. We must improve our overall preparedness to handle the remainder of the COVID-19 pandemic, but more importantly, there are improvements to preparedness that must be undertaken so that we can better respond to the next inevitable emergency. The safety equipment industry is built on a foundation of standardization, certification, regulatory compliance, and conformity. Most PPE products are as much items of intellectual property as they are physical barriers to injury or sickness. The standardized performance, the conformity of the product to that standard, and the accurate communication of that standard and conformity, are central to the value that PPE provides to the wearer. Opportunistic market behavior in the PPE sector leverages value of the standardization and conformity of branded, standardized, or certified safety equipment. ISEA welcomes the Committee's focus on Protecting the Reliability of the U.S. Medical Supply Chain During the COVID-19 pandemic. ISEA is proud to be a member of the National Association of Manufacturers. ISEA believes legislation is also needed to allow federal law enforcement authorities and IP holders to identify the individuals behind the websites and electronic front companies offering non-legitimate products. ISEA asks Congress to provide FEMA with authority during a public health emergency to gather data from state and local governments and healthcare providers regarding the supply, use, and demand for PPE. ISEA asks that legislators focus on direct and sustained support of domestic PPE production. In addition, ISEA asks that the Healthy Workplaces Tax Credit Act allow tax credits for costs of occupational health and safety training.

(1:06:30) Dr. Grant said that this is one of the most difficult times nurses have ever faced. At the beginning of this crisis the United States saw nurses and other frontline health care professionals confronting a shortage of Personal Protective Equipment by making their own masks or using trash bags for make-shift gowns. Because of the unsafe working conditions, some made the difficult choice to leave their jobs to protect their families and themselves. Others developed emotional and psychological issues, suffered severe physical ailments from the coronavirus and

tragically, all too many, more than 230 nurses died providing care to their communities. This is unacceptable. Nurses must be protected and supported so they can continue to care for patients and educate the public. We must safeguard nurses' and other frontline providers' well-being and heed their invaluable insights so that the nation can recover faster and stronger. It is both a moral and strategic imperative for our nation's leaders to do everything possible to arm and protect nurses and other critical responders as we work to combat the pandemic and prepare for future public health crises. To make sure health care providers are never again left with a PPE shortage, Congress should request an annual report on the state of the Strategic National Stockpile (SNS) with respect to PPE, vaccines, medicines, and other supplies. Health care facilities should be required to report monthly on their levels of these items so the agency in charge has up to date information on where shortages may be most acute in the early stages of an emergency. The federal government must take appropriate steps to plan coordination efforts. Many states will not have the resources or expertise to carry out preparations or coordination without federal assistance. The federal government needs to do more to incentivize and prioritize the manufacturing of PPE, medications, and other supplies in the United States, even if that means carrying out production itself.

Questions and Answers

(1:11:50) Ranking member Wyden asked if it is a sound national strategy to let healthcare stakeholders bid against each other for PPE. **Dr. Grant** said no. **Ranking member Wyden** asked if this national strategy will exacerbate health disparities among communities of color. **Dr. Grant** said yes. The lack of supply directly affects the ability to deliver care. This is more likely to be true in low income communities and communities of color. **Mr. Wiehe** said yes. **Mr. Johnson** said yes, the stress placed on the supply chain as a result of COVID-19 will impact low income communities. **Ms. Denning** said that there simply is not enough product for everyone.

(1:20:30) Sen. Roberts asked if the strategic national stockpile (SNS) should be expected to meet the totality of the needs presented by a future pandemic. **Ms. Denning** said yes, the SNS needs to be more functional in the future. There should be a 90 day supply of all critical products, and this stockpile should be limited to use in times of a disaster. **Mr. Wiehe** said yes, the national stockpile needs to be increased. Stakeholders in the supply chain should also be putting out capacity data so that the government can anticipate need more efficiently. **Mr. Johnson** said yes, the planning needs to be comprehensive and systematic. **Dr. Grant** said yes. **Sen. Roberts** asked if increasing domestic production of PPE can help to solve supply chain issues. **Mr. Johnson** said that increased support for domestic production can be an answer for future preparedness but it is not the only answer. That being said, diversification of the supply chain is obviously a good thing. Sound planning remains the most important step in preparedness.

(1:31:20) Sen. Carper asked what is one area where Congress should take action. **Dr. Grant** said that more transparency in reporting is needed to help fix the supply strain. The competition between the federal and state governments is also driving up prices. **Ms. Denning** said that transparency is important. There is also a need for a secure global supply chain. **Mr. Wiehe** said increased transparency is critical. **Mr. Johnson** said there needs to be more demand transparency.

(1:41:30) Sen. Cardin asked what should be done to provide aide to underserved and low income communities. **Dr. Grant** said that there needs to be a stronger investment in public health.

Congress should invest more in testing and testing follow up. Finally, nurses should be at the table when decisions are being made. It is essential to have front line workers provide their viewpoint. **Sen. Cardin** asked what role the federal government should play in ensuring that front line workers are protected. **Dr. Grant** said that congressional oversight would be helpful in this area. Many localities have guidelines that are not being followed by the private sector.

(1:47:45) Sen. Brown asked what should be prioritized in the SNS. **Mr. Wiehe** said that transparency and communication needs to be strengthened. The goods are not useful in the stockpile if a stakeholder does not know they are going to receive it. This results in them trying to purchase these products on their own and creates redundancy. **Sen. Brown** asked how Congress can ensure that future policy decisions are informed by diverse stakeholders. **Dr. Grant** said that one of the best ways to do this is to oversee funding that would ensure that health disparities are addressed and become a top priority.

(1:53:20) Sen. Cortez Masto asked if it is too late to fully invoke the Defense Production Act (DPA) and address all of the concerns across the country. **Ms. Denning** said that she is not familiar with all of the nuances of the DPA, but in her opinion it is never too late to scale up production. **Mr. Johnson** said that if the DPA is invoked, his company stands ready to work with the federal government. Unfortunately, the DPA is not magic, it cannot stretch into the past. **Sen. Cortez Masto** asked what can be done to combat the mental health crisis among front line workers. **Dr. Grant** said that there should be more money spent on investing in mental health for front line workers.

(2:00:11) Sen. Casey asked what the status is of PPE innovation. **Mr. Johnson** said that the PPE industry is always innovating. Even before the pandemic, PPE manufacturers were investing in new products and technology. **Sen. Casey** asked what barriers exist related to PPE innovation. **Mr. Johnson** said that the certification process for respirators is burdensome and time consuming.

(2:05:10) Sen. Whitehouse asked if the PPE market is filled with fraud. **Dr. Grant** said yes, and this creates a lot of concern.

(2:10:20) Sen. Hassan asked how companies are allocating PPE to ensure that the highest need areas are receiving them. **Ms. Denning** said that her company does not handle allocation. **Sen. Hassan** asked if the federal government is helping to identify areas of highest need. **Ms. Denning** said that the federal government has not provided them assistance. **Sen. Hassan** asked how the uncertainty surrounding PPE has affected the mental health of front line workers. **Dr. Grant** said that 59% of nurses who answered a survey say that reusing PPE makes them feel unsafe.

(2:17:25) Sen. Portman asked if it is true that test results have been delayed. **Mr. Wiehe** said yes, there is a lot of variability in the timing of getting test results. **Sen. Portman** asked what supplies have been limited. **Mr. Wiehe** said early on there were swab shortages.

(2:26:50) Sen. Cassidy asked if Dr. Grant supports the office of Minority Health. **Dr. Grant** said yes, but now is the time for action. Data is good, but at some point action needs to happen. **Sen. Cassidy** asked if Academic Health Centers are often in urban areas. **Ms. Denning** said yes. **Sen. Cassidy** asked if the supply chain currently run by the private sector could manage the

distribution of supplies assuming there is an adequate supply. **Ms. Denning** said that her company does not distribute but does have distribution expertise. Thus, a private and public partnership could be successful.
