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HOMELAND SECURITY AND GOVERNMENTAL AFFAIRS

WASHINGTON, DC 20510-6250

March 12, 2020

The Honorable Mike Pence
Vice President of the United States
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear Mr. Vice President:

I am extremely concerned about the Administration's response to the ongoing novel Coronavirus (COVID-19) pandemic, specifically in regards to testing capabilities for this virus. As hospitals and health facilities across the country prepare for the spread of COVID-19, it is clear that the Administration is unprepared and lacks concrete answers about our current and potential capacity to test for and respond to the virus. Testing after possible exposure is a critical step to help prevent further spread, and our health facilities must be equipped to handle the potential surge in individuals who need testing, while simultaneously limiting exposure to health care staff and patients. The Administration needs to provide the public accurate information about current testing abilities, hospital preparedness and surge capacity, and measures that communities can take to fight the spread of this virus.

In response to questions this morning during a Senators briefing from Administration officials, it is evident that federal agencies do not have a plan to ramp up testing capacity as this virus spreads and additional actions are necessary. When countries around the world are utilizing drive-through testing methods, including in South Korea, Germany, Australia, and the United Kingdom, with greater efficiency and accessibility, the United States, systematically, lags behind.¹ Health care systems in Seattle and Denver have set up special drive-through facilities to test potentially infected individuals for the virus as well.² There are additional precautions that hospitals can take to prevent co-mingling and limit the risk of exposure. The University of Utah

¹ *Would you like a coronavirus test with that? Germany is now using drive-thru centres to swab patients for the killer infection as outbreak continues to spiral in Europe*, Daily Mail (March 9, 2020) (<https://www.dailymail.co.uk/health/article-8091401/Germany-using-drive-centres-swab-patients-coronavirus.html>); *First 'drive-thru' coronavirus testing station opens in South Australia*, ABC News (March 9, 2020) (<https://www.abc.net.au/news/2020-03-10/australias-first-coronavirus-road-testing-station-opens-adelaide/12041978>).

² *Drive-Thru Coronavirus Testing Clinic Set Up in Hard-Hit Seattle*, Newsweek (March 9, 2020) (<https://www.newsweek.com/drive-thru-coronavirus-seattle-1491152>); *Colorado's first drive-up COVID-19 testing facility opens in Denver, is free of charge*, The Denver Channel (March 11, 2020) (<https://www.thedenverchannel.com/news/national/coronavirus/colorados-first-drive-up-covid-19-testing-facility-opens-in-denver-is-free-of-charge>).

Hospital in Salt Lake City, for example, has set up tents outside of their facility to securely test potentially infected patients without having them enter the hospital.³ These protective measures will safeguard both patients inside of hospitals as well as the staff performing the testing. Your agencies must provide the necessary resources and guidance for state and local health care systems in advance, otherwise, these systems can easily become overburdened before they recognize it.

I ask for your responses to these questions as soon as possible, but no later than March 19, 2020, so the American people can have the most accurate and up-to-date information on the federal government's response:

1. What changes is the Administration planning to make to address the gap that exists between need and current testing capabilities? Please describe in detail.
2. When will commercial lab companies be able to perform COVID-19 tests at full capacity? What do you expect daily testing capacity to be in these facilities?
3. Identify the barriers that currently exist to patients getting tested for the virus if they are symptomatic and steps the Department of Health and Human Services (HHS) is taking with state and local authorities to overcome these barriers.
4. How are your agencies planning to support the processes that would limit interaction between suspected COVID-19 cases and the general medical community, such as temporary testing facilities and drive-through testing? What measures can your agencies implement in the short-term on a large scale?
5. What resources have your agencies identified to ensure that potentially infected individuals are not co-mingled with other hospital patients? Are there specific safety guidelines for hospitals and facilities to follow for the protection of older and immunocompromised patients?
6. What steps is the Department of Homeland Security (DHS) taking to isolate those suspected of having COVID-19 from the general public at ports of entry?
7. Are HHS and DHS currently working with state and local authorities to address potential shortages of personal protective equipment and other medically necessary equipment to leverage existing supplies? If so, how?

³ *Amid growing coronavirus cases, hospitals have shared goal: Prevent the spread within their walls*, NBC News (March 9, 2020) (<https://www.nbcnews.com/health/health-news/amid-growing-coronavirus-cases-hospitals-have-one-goal-prevent-spread-n1153461>).

The Honorable Mike Pence

March 12, 2020

Page 3

8. If the President were to issue Disaster Declarations for COVID-19 through the Stafford Act, how would DHS utilize resources from the Disaster Relief Fund to respond to the virus? How would such actions increase testing accessibility, acquisition of personal protective equipment, potential quarantine measures, and other pandemic response efforts?

If the Administration does not address these and other concerns surrounding the virus, the consequences could be dire. Thank you for your attention to this matter.

Sincerely,



Gary C. Peters

Ranking Member

Committee on Homeland Security
and Governmental Affairs