## United States Senate

WASHINGTON, DC 20510

SENATE OFFICE BUILDING HART 136 WASHINGTON, DC 20510 (202) 224-4041

120 HUYSHOPE AVENUE SUITE 401 HARTFORD, CT 06106 (860) 549-8463

http://murphy.senate.gov

April 2, 2020

The Honorable Mike Pence Vice President of the United States, Chairman, White House Coronavirus Task Force 1600 Pennsylvania Ave NW, Washington, DC 20500

Dear Vice President Pence,

I write to you in your capacity as head of the Coronavirus Task Force, to express my serious concern regarding the manner in which your administration is handling distribution of critical medical resources, and to urge you to appoint a single senior official with government-wide authority to oversee such distribution, in line with the executive powers authorized through the Defense Production Act. The lack of a national and centralized coordination system for the disbursement of medical supplies is creating severely counterproductive competition between states, health care facilities, and federal agencies to secure limited supplies, driving up prices and exacerbating critical shortages. Further, to the extent the federal government has been engaged in allocating critical medical resources, there has been a deeply problematic degree of confusion and lack of transparency in the way the allocation decisions are made and which states' requests are met.

There remains a serious and damaging perception that medical supplies and personal protective equipment (PPE) have not been properly and equitably distributed in accordance with the threat and need, but rather based on political or personal motives. To that point, during the March 27th White House briefing, President Trump publicly warned you not to call governors who are critical of your administration's response adding, "I want them to be appreciative." Subsequently, the Washington Post reported that on March 14th, Florida, with only 77 positive COVID-19 cases, "received a shipment with everything" they asked for from the Federal Emergency Management Agency (FEMA) in a massive shipment of surgical masks, respirators, face shields and gloves. Jared Moskowitz, the Emergency Management Division's Director of Florida, attributed this success to the fact that "the governor has spoken to the president daily." However, according to Maine Public Health Director Dr. Shah, on March 30th, his state received only a "paltry amount of PPE in comparison to what we've asked for," less than 5%, despite 275 positive COVID-19 cases in the state. Due to a failure to receive adequate supplies, Maine is now "exploring other options to acquire PPE" outside of FEMA to treat and protect their residents. My own state of Connecticut has only received 14% of the PPE request it made to the federal government.

Governors and local officials who have competed for months for life-saving supplies are now having the federal government redirect their shipments with no explanation. Incomplete reporting from federal authorities, with no transparency from FEMA on supplies and allocation, has caused outright confusion among federal, state and local authorities. As examples:

- On March 26<sup>th</sup>, the Washington Post reported that "nearly 1.5 million N95 respirators are sitting in a U.S. government warehouse in Indiana and have not shipped them because they are past their expiration date ....DHS officials decided to offer the respirators to the Transportation Security Administration."
- On March 27<sup>th</sup>, CNN reported that Governor Gretchen Whitmer said that "health and safety equipment needed to fight the spread" on their way to Michigan are "getting cancelled or delayed."
- On March 31<sup>st</sup>, Governor Ned Lamont of Connecticut told CNN that, "we had our ventilators all set to come and at the last moment, FEMA redirected them... we're waiting expectedly and then they found another place that they considered more urgent."
- On March 31st, CNN reported that the Department of Defense's top logistics official, Lt. General Giovanni Tuck, "emphasized there are 1,000 ventilators fully ready to be shipped as soon as the Pentagon gets a destination of where to send them."

This week, FEMA finally established a National Resource Prioritization Cell within the agency's Supply Chain Stabilization Task Force to unify government and private industry prioritization. However, it is unclear which supplies the Task Force is leading on beyond ventilators; this is vital information given that the dire supply needs extend to all forms of PPE, prescription drugs, swabs, thermometers, reagents, and so forth. Hospital administrators, mayors, governors, and Members of Congress, myself included, have been begging your administration for months to establish a centralized acquisition process. Efforts now must focus critical resources to areas of our country experiencing the greatest increase in COVID-19 cases with the largest capacity shortfalls. But without any explanation of the means by which the federal government is determining which states get what supplies, doctors, nurses, medical providers, and the general public are left in the dark to speculate about the political motivations behind them. I urgently request that you explain the following as part of the National Resource Prioritization Cell's mission:

- 1. When will you disclose the details of FEMA's decision process for the allocation of resources to the American public?
- 2. What specific supplies is FEMA working to acquire?
- 3. Is FEMA the lead federal agency coordinating distribution of the medical supply chain? How does FEMA work with other federal partners like the Departments of Defense (including the Defense Logistics Agency), Health and Human Services, Transportation, and Homeland Security?
- 4. What information do you provide to state and local leaders about when and why redirection or cancellation of orders for medical supplies or PPE are made?
- 5. What unified standards (e.g. reporting and disclosure of testing, positive cases, hospital beds, and levels of critical medical supplies) are you using to determine state needs? Thus far we have only seen this with regard to ventilators.
- 6. Do you work with the Centers for Disease Control and Prevention to make allocation decisions based on medical science and appropriate public health response?

7. When do you plan to create a publicly reported system that is consistently updated with the standardized metrics you receive to provide transparency into allocation determinations and that discloses the allocations of all critical medical supplies and PPE made to each state?

We must all work together to stop this pandemic and protect the lives of Americans, but your administration must do more to add transparency to its efforts to stop the spread of this disease.

Sincerely,

M

CHRISTOPHER S. MURPHY United States Senator