May 20, 2020

Vice President Michael R. Pence  
Chair  
White House Coronavirus Task Force  
The White House  
1600 Pennsylvania Avenue NW  
Washington, DC 20006

Dear Vice President Pence:

We write to inquire about the White House Coronavirus Task Force’s plans to address the coronavirus disease 2019 (COVID-19) pandemic during the upcoming influenza (flu) season, a time which Centers for Disease Control and Prevention (CDC) Director Robert Redfield warns could create unprecedented strain on our health care system. President Trump has deemed these warnings as “fake news.” His downplaying of the threat is irresponsible: the failure to prepare for this known risk could result in many unnecessary deaths. We urge you to begin planning for and activating the resources of the federal government now to increase capacity, supplies, and vaccinations to prevent public health and medical systems from being overwhelmed by simultaneous peaks of both of these deadly infectious diseases in the fall.

Previous severe flu outbreaks by themselves have stretched the capacity of our health care system, leading to shortages of hospital beds and nurses. The COVID-19 pandemic, which arrived in the U.S. near the end of this year’s flu season, has required hospitals to operate at maximum capacity, mobilizing additional staff and creating field hospitals to handle the overflow of patients. In past pandemics, including the 1918 influenza outbreak and the 2009 H1N1 pandemic, an initial wave in the spring was followed by an even more severe resurgence in the fall. The combination of a COVID-19 resurgence with the annual flu outbreak is likely to

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2 NBC News, “Trump asks CDC director to explain how he was ‘misquoted.’ He says quote is accurate,” Allan Smith, April 22, 2020, [https://www.nbcnews.com/politics/donald-trump/trump-asks-cdc-director-explain-how-he-was-misquoted-he-n1190051](https://www.nbcnews.com/politics/donald-trump/trump-asks-cdc-director-explain-how-he-was-misquoted-he-n1190051).  
strain the health care system even further, requiring even greater supplies, funding, and staff than our hospitals have needed thus far, while placing an unprecedented burden on our public health systems.

The federal government must prepare now for this alarming scenario. Now, more than any previous flu season, it is essential that people get their flu shot. One of the most important and reliable ways to reduce the severity of flu outbreaks is to promote and ensure the distribution of flu vaccinations, which save lives, while helping to reduce hospitalizations and freeing up resources for other purposes.\(^7\) The CDC, the Advisory Committee on Immunization Practices (ACIP), and the Healthcare Infection Control Practices Advisory Committee (HICPAC) recommend that all U.S. health care workers be vaccinated annually against influenza, yet in the 2018-2019 flu season, only 81% of health care workers were vaccinated.\(^8\) CDC and the ACIP also recommend the vaccine for people six months and older; yet in 2018-19, only 45% of adults and roughly 60% of children received a flu vaccine.\(^9\)

This problem is likely to be complicated by the COVID-19 pandemic: already, rates of routine pediatric vaccinations have plummeted during the coronavirus pandemic as parents and patients skip routine care visits for fear of contracting COVID-19.\(^10\)

To begin to address this problem, we will need a national campaign to improve flu vaccination take-up rates for both health care workers and the general public, including a public information campaign and plans for combatting misinformation and communicating with and educating those who may not normally seek out the vaccine. This effort will be complicated if patients are reluctant to visit their primary care physicians for routine health care or other providers from whom they may seek vaccination because of the risk of exposure to COVID-19. Public health systems must plan now for how to communicate with patients and workers about the importance of flu vaccination and provide safe opportunities to receive the vaccine. These campaigns should specifically target marginalized communities, including people with disabilities, people whose primary language is not English, communities of color, and those at high risk because of underlying health conditions.

We must also begin planning now to build the immunization infrastructure for increased vaccine distribution. In September 2019, President Trump created the National Influenza Vaccine Task Force (Task Force) tasked with modernizing our infrastructure for developing and manufacturing influenza vaccines; however, it is not clear whether the Task Force has met its

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Dir. \(^7\) "CDC Director warns second wave of coronavirus is likely to be even more devastating,” Lena H. Sun, April 21, 2020, [https://www.washingtonpost.com/health/2020/04/21/coronavirus-secondwave-cdcdirector/](https://www.washingtonpost.com/health/2020/04/21/coronavirus-secondwave-cdcdirector/).

\(^8\) "CDC Director warns second wave of coronavirus is likely to be even more devastating,” Lena H. Sun, April 21, 2020, [https://www.washingtonpost.com/health/2020/04/21/coronavirus-secondwave-cdcdirector/](https://www.washingtonpost.com/health/2020/04/21/coronavirus-secondwave-cdcdirector/).


\(^10\) Centers for Disease Control and Prevention, “Effects of the COVID-19 Pandemic on Routine Pediatric Vaccine Ordering and Administration – United States, 2020,” May 8, 2020, [https://www.cdc.gov/mmwr/volumes/69/wr/mm6919e2.htm?s_cid=mm6919e2_w&utm_source=STAT+Newsletters&utm_campaign=a4d4393b19-MR_COPY_01&utm_medium=email&utm_term=0_8cab1d7961-a4d4393b19-151248629](https://www.cdc.gov/mmwr/volumes/69/wr/mm6919e2.htm?s_cid=mm6919e2_w&utm_source=STAT+Newsletters&utm_campaign=a4d4393b19-MR_COPY_01&utm_medium=email&utm_term=0_8cab1d7961-a4d4393b19-151248629).
deadlines for issuing recommendations and a five-year national plan.\textsuperscript{11} Although we do not yet have a timeline for a COVID-19 vaccine and public health experts have cautioned that such a vaccine likely remains many months away, we must prepare for increased production of the seasonal influenza vaccine alongside potential distribution of a vaccine for COVID-19 by making improvements to our current system, including expanding and improving upon information systems to track access and adverse events, identifying an array of health care providers who can administer the vaccine, ensuring adequate staffing to administer a COVID-19 vaccine and the seasonal flu vaccine simultaneously, and developing a vaccine allocation plan that prioritizes the communities that are at the highest risk.\textsuperscript{12}

Moreover, we will need to increase the stock of flu vaccines and supplies in order to accommodate an increased demand for both the flu vaccine and for COVID-19 tests. In past years, private manufacturers have produced up to 169 million doses of influenza vaccine.\textsuperscript{13} We should anticipate that a successful public health campaign will result in higher demand for these vaccines than in past years, and the federal government should be working with private manufacturers now to ensure that they are able to meet this need. Already, Australia, which will be facing its seasonal flu imminently, is seeing an “unprecedented surge in demand” for its flu vaccines and doctors have reported shortages as a result.\textsuperscript{14} In addition, global and national shortages of glass vials, needles, and syringes may threaten the supply of flu vaccines as well as COVID-19 diagnostics.\textsuperscript{15}

The federal government was unprepared for the COVID-19 outbreak and, as a result, our frontline health care workers have been put at risk due to shortages of personal protective equipment (PPE), and the COVID-19 outbreak has exploded because of a lack of supplies needed to ensure wide-scale testing.\textsuperscript{16} Now is the time to increase production and purchasing of essential equipment, and we continue to urge the President to use the authority of the \textit{Defense Production Act}, as needed, and all other available tools to increase production of PPE, testing

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\textsuperscript{12} Adult Vaccine Access Coalition, “Adult Vaccine Access Coalition’s Recommendations to Strengthen Immunization Infrastructure for COVID-19 Response.”  \\
\textsuperscript{13} Centers for Disease Control and Prevention, “Seasonal Influenza Vaccine Supply for the U.S. 2019-2020 Influenza Season,” September 24, 2019, \url{https://www.cdc.gov/flu/prevent/vaxsupply.htm}.  \\
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and vaccine materials, and other needed medical supplies in order to be prepared for increased demand over the next year or more.

Finally, the federal government must work to repair its relationship with the World Health Organization (WHO). The CDC is one of six WHO Collaborating Centers for Reference and Research in the world, and this collaboration to surveil and identify specific influenza virus strains will continue to be essential.\(^{17}\)

In order to better understand how the federal government is preparing for the intersection between the COVID-19 outbreak and the coming flu season, we request answers to the following questions by no later than June 3, 2020:

1. Please share estimates for the quantity of PPE items, ventilators, and other medical supplies that are anticipated to be required to handle subsequent waves of COVID-19 cases alongside seasonal influenza during 2020-21.
   a. How will the federal government ensure that these quantities are available?
   b. How will materials be distributed?
   c. How many suppliers are manufacturing these items under the Defense Production Act, and what quantities of each item are they expected to produce?

2. Please share estimates of hospital utilization and staffing needed to handle subsequent waves of COVID-19 cases alongside seasonal influenza in 2020-21.
   a. What steps are being taken now to expand existing hospital capacity through the fall and winter?
   b. How are federal workforce programs being utilized to prepare additional staff for the increased volume of patients?

3. What is the status of the report of the National Influenza Vaccine Task Force required by the President’s September 2019 Executive Order?\(^{18}\)

4. What is your goal for influenza vaccine take-up in the 2020-21 seasonal influenza season?
   a. What public information campaigns are planned to increase vaccine take-up?
   b. How will these campaigns reach marginalized communities, particularly those where COVID-19 has revealed or worsened existing health disparities?
   c. What additional funding is needed to support these campaigns?
   d. What strategies do you recommend to improve vaccination rates among health care workers?
   e. How will you support health care providers in reaching their patients if health systems continue to primarily rely on telehealth?


f. What policies and communication should health care providers put in place to ensure patient safety during routine visits?
g. What investments in immunization manufacturing (including through the use of Defense Production Act authorities to bolster production) and distribution infrastructure do you anticipate will be needed to meet the needs of the upcoming influenza season?
h. What efforts to improve this immunization infrastructure has the administration undertaken?

5. How many doses of influenza vaccine are anticipated to be needed in the United States for the 2020-21 influenza season?
   a. How have you partnered with private manufacturers to increase their production?
   b. How has the United States partnered with the WHO and international partners to improve the production and effectiveness of next year’s seasonal influenza vaccine?
   c. Has the federal government entered into any additional contracts with manufacturers to provide increased supply of influenza vaccines? If so, please provide the per-dose cost in these contracts and describe how it compares to previous contracts.

Thank you for your consideration of this important matter.

Sincerely,

Elizabeth Warren
United States Senator

Edward J. Markey
United States Senator

Patty Murray
United States Senator

Sherrod Brown
United States Senator

Kirsten Gillibrand
United States Senator

Robert P. Casey, Jr.
United States Senator
Tina Smith
United States Senator

Margaret Wood Hassan
United States Senator

Tammy Duckworth
United States Senator

Richard Blumenthal
United States Senator

Tammy Baldwin
United States Senator

Chris Van Hollen
United States Senator

Amy Klobuchar
United States Senator

Jack Reed
United States Senator

Jacky Rosen
United States Senator