

Prepared Statement of Ranking Member Richard Burr
An Update on the Ongoing Federal Response to COVID-19

June 16, 2022

Thank you, Senator Murray.

To our witnesses, thanks for finally coming back to the HELP Committee.

When we were last together in January, our country was in the throes of the original Omicron wave. At the time, I asked you, again, one basic question: what's the plan?

I hope in your opening statements or when I ask this question in the question round, somebody will give me an answer.

The Chair just did a fabulous job of painting Republicans as the obstacle for there not being enough emergency funding. I remind my colleagues, we spent \$1.9 [trillion] just on COVID-19 a year ago. Where's that money gone? How's it been spent? Where is it obligated? No plan has been presented. But, on multiple occasions, the Chair has been in the room when I've said, "here's a condition: present us a plan."

Now, in early May this plan went out. It just tells me what you would buy if you got \$10 billion and what you would buy if you got \$17.5 billion, and it says "confidential." This isn't a plan. When is somebody going to share with the

American people the destination that we are trying to get to, and how we're going to get to that destination?

We are still in crisis management and we're two and half years into this. And, I'm really sympathetic of Dr. Fauci's position because Tony, more than anybody, understands we're dealing with a virus that continues to evolve and change.

Since that time, we have seen new Omicron subvariants take hold. Right now, cases of BA.4 and BA.5 are creeping up around the country.

In January, I asked you, yet again, how this administration was looking to other countries that have already experienced new surges so that we can prepare for the impact of new variants in the U.S and inform our response.

BA.4 and BA.5, for example, caused a new wave of infections in countries where they were dominant, like South Africa and Portugal.

Twenty-two percent of cases in the U.S. are currently BA.4 or BA.5 – a number that continues to increase. What are we learning from other countries and regions that are ahead of us, like Israel and Europe?

What do we need to be doing today to ensure we are prepared for what we may face in the weeks and months to come?

I've asked you repeatedly about studies out of Israel and other countries.

I've been frustrated by the lack of detail about what you are learning from other countries and how it informs our COVID-19 response, so I sent my staff to Israel over the Memorial Day recess.

It's my understanding that you currently meet with your Israeli counterparts regularly, no less than every six to eight weeks.

During these meetings, they share the latest on COVID-19 trends in Israel and any updated data on their vaccine clinical trials and studies.

If you are getting this information regularly, why is it taking so long for you to act on it?

In January, Israel became the first country to offer a fourth vaccine dose to individuals over 60 and health care workers that were at least four months past their third dose.

Israel's Health Ministry announced new data at the end of January demonstrating additional protection from a fourth vaccine dose for those 60 and older.

It took CDC another three months to take similar steps.

I'll say that again – three months later.

Israel has also taken steps to appropriately target the use of limited COVID-19 countermeasures.

Israel targeted its supply of oral antiviral drugs to treat those at greatest risk of severe illness to keep them out of the hospital.

Meanwhile, in the United States the Biden Administration developed a new Test to Treat strategy to provide therapeutics to as many infected people as possible.

The terms of the emergency use authorization are that the Pfizer drug should be given to high risk patients, not everyone who tests positive. But the President himself said and I'll quote this: people can get tested at a pharmacy, and if they're positive, receive antiviral pills on the spot at no cost. End quote.

So, either the President was confused about his own announcement, or you are deliberately giving these pills to too many patients, violating the terms of the EUA, putting people at risk, and wasting treatments and taxpayer dollars.

I am puzzled by the wide gap in our approaches when so much data is regularly being shared between health leaders in both countries.

Before you say that our countries are different sizes, I'll remind you that we can approve drugs and devices based on samples of just a few thousand patients.

The virus is the same in Israel and in the United States and we have seen Israel get hit by new variants six to eight weeks before the United States.

Israel's quick and decisive actions in early December delayed the onset of the Omicron wave by five weeks. They had a clear plan and clear leadership.

Meanwhile, we have discarded over 82 million COVID-19 vaccine doses, and this Administration assumes that at least 50 percent of the booster doses we purchase for this fall will go to waste.

Why do we keep falling further behind? Why aren't we trying to do better? Why aren't we learning from our mistakes? It doesn't even seem like we are striving for mediocrity now.

Have you all just given up?

Let me highlight just a few of your more glaring inconsistencies.

In April, CDC released data indicating that nearly 60 percent of Americans, and about 75 percent of children, had at least one COVID-19 infection by the end of February.

Though more recent data has not been released, I imagine the infected rate is even higher today, given recent spikes in cases.

We know that the majority of Americans age five and older have had at least two doses of a COVID-19 vaccine.

So, the majority of Americans have some degree of protection against the virus – yet, we only removed our pre-departure testing requirement for travelers entering the U.S legally this past Sunday.

Many EU countries lifted their pre-entry testing requirement for fully vaccinated travelers in February and March. Canada followed suit in April.

In response to a letter I wrote about my concerns with CDC's termination of the Title 42 order, you wrote, "the COVID-19 risk for U.S. communities is greatly reduced for most people compared to earlier in the pandemic."

So, why are we still in an urgent state of emergency and taking months to remove restrictions that other countries have been removing since February and March?

The American people are fed up with your confusing messaging and inconsistent response.

So, let me ask again: what's the plan?

More than two years into this pandemic, the American people are going back to work in person, attending weddings and events, and traveling for work and leisure. And government still allows its employees, even at the FDA, CDC, and within the HHS platform, to work remotely.

Individuals who are at higher risk of severe illness or those who live in communities with higher levels of circulating virus know the precautions they need to take to keep themselves and their families safe. And if they get sick, we have tests and treatments to help them recover.

We know more now than we did two years ago, and we have more tools to save more lives.

It is past time to think about the future.

I have asked you over and over for the plan. The plan for gaining back the trust of the American people, and moving our country forward.

Six months later, I still have not received an adequate response as to what the plan actually is.

Since I'm having trouble getting a response to my initial question, let me end with asking each of you a slightly different one.

Every good plan is crafted around an intended outcome. So, I hope you all can answer this - what is your endgame? What is your goal for the future?

Maybe I'll respond differently to the Chair about the attacks that we're standing, Republicans, in the way of funding emergency money. But CDC says it's not an emergency anymore. That's why they are ending Title 42. I can go through a litany of things that suggest this has transformed to somewhere.

We are in a period that there needs to be an accountability of how we spent the \$1.9 trillion devoted to COVID-19. I think any country in the world laughs at the way we're spending our money relative to this crisis and this virus.

So, I'll continue to ask you for a plan until we get one. And, I'll continue to be a roadblock for those who believe that we can blindly appropriate emergency money, borrow it from the Chinese, and spend it on something that none of us have a clue as to what the plan is.

I thank the Chair.