"The Federal Interagency Response to the Coronavirus and Preparing for Future Global Pandemics" Opening Statement of Chairman Ron Johnson March 5, 2020

As prepared for delivery:

On December 31, 2019, China first alerted the World Health Organization of a cluster of abnormal health cases in the central Hubei province. What at first appeared to be cases of pneumonia were later revealed to be the emergence of a novel coronavirus, now identified as COVID-19.

In early January, the U.S. began tracking the virus and notifying U.S. clinicians, and established an incident management system. On January 17, the Department of Homeland Security implemented targeted airline passenger health screenings at three airports to detect ill travelers on flights arriving from (or connecting through) Wuhan, China. The Centers for Disease Control and Prevention activated its Emergency Operations Center on January 21, and the President created a Coronavirus Task Force on January 29. On January 31, the President issued an emergency declaration paving the way for DHS to begin funneling all incoming flights from China to eight U.S. airports for entry health screenings and expanding that number to eleven by February 3. Also pursuant to the emergency declaration, on February 2 the U.S. began denying entry into the United States to most foreign nationals who have traveled in China within 14 days of their arrival. The U.S. has continued to adjust travel restrictions as conditions change: it expanded its ban to travel related to Iran, continues to update its guidance and screening for passengers returning from Italy and South Korea, and is monitoring for any necessary changes for other significantly impacted countries.

The World Health Organization states the total number of global COVID-19 infections is 93,090—spanning 77 countries and territories—and 3,198 deaths. As of this morning, the CDC reported 126 cases and 9 deaths across 13 states. To date, the global mortality rate for COVID-19 stands at 3.4 percent, compared to 40 percent for the 2014 Ebola outbreak, 34 percent for the 2012 MERS outbreak, 9.6 percent for the 2003 SARS outbreak, and 0.1 percent for the average U.S. seasonal flu.

The continued spread of the virus should focus us on addressing top priorities. First, we must ensure that we are protecting our medical responders: doctors, nurses, and other medical staff, as well as, first responders at Customs and Border Protection and the Centers for Disease Control.

Second, we need a sufficient supply of testing kits to diagnose persons that have potentially been infected by COVID-19. On February 4, the FDA issued an Emergency Use Authorization for the CDC to develop test kits to be used by qualified public health labs. I hope that we can clarify the administration's strategy for the supply and distribution of testing kits during today's hearing.

Finally, we need to address the insecurity of our medical supply chain, both in the short term to address COVID-19 and in the long term. The virus has produced demand for personal protective equipment approximately 100 times higher than normal, resulting in extremely high

prices and a supply that may be insufficient to meet our needs. Experts have also warned that COVID-19 could result in potential shortages of drugs, as we are over-reliant on active pharmaceutical ingredients manufactured outside the U.S. We will want to hear what actions are being taken to address the current shortage.

Although unique, COVID-19 is not the first disease outbreak that has spread globally and it will certainly not be the last. Our response to each outbreak should help us prepare and protect against the introduction and spread of future global pandemics. It should also help us reflect on the consequences of our reliance on drugs manufactured outside of the U.S. and provide us an opportunity to think long-term about what we need to improve our strategic stockpile and what, if any, steps Congress should take to help increase U.S.-produced, FDA-approved drugs and other necessary medical devices and supplies.

I thank our witnesses for joining us today look forward to addressing these and other questions.