

United States Senate
WASHINGTON, DC 20510

The Honorable Alex Azar
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

The Honorable Mark Esper
Secretary of Defense
U.S. Department of Defense
1000 Defense Pentagon
Washington DC, 20301

August 6, 2020

Dear Secretaries Azar and Esper:

As the Ranking Members of the Senate Armed Services Committee and the Senate Health, Education, Labor and Pensions Committee, we write to express our concerns about plans for the Department of Defense (DOD) to lead the distribution of COVID-19 vaccines, despite decades of public health leadership and deep expertise by the Centers for Disease Control and Prevention (CDC) in vaccine distribution and administration.

The COVID-19 pandemic continues to devastate communities and families across the country. To date, this virus has killed over 158,000 people in the U.S., with more than 4.8 million confirmed cases; the actual case count is potentially 10 to 13 times higher than officially reported numbers.^{1, 2} Many states continue to break records in terms of the number of newly diagnosed cases.³ The Trump Administration's continued refusal to prioritize science over politics has put the health and economic wellbeing of people in this country and around the world at unnecessary risk. Given the persistent, unresolved challenges in the U.S. COVID-19 testing regime and ongoing widespread community transmission across the country, our best hope for beginning to return to "normal" daily life is a substantial portion of the U.S. population receiving a safe and effective vaccine for COVID-19. Getting this right could not be more important.

Yet for months, the Administration has released few details regarding which agencies and staff are leading different aspects of this critical work, particularly plans for distribution of future COVID-19 vaccines. On July 30, a DOD official confirmed to the press that DOD will handle "all the logistics of getting the vaccines to the right place, at the right time, in the right condition," with CDC handling only "some of the communications through the state relationships [and] the state public health organizations."⁴ Contrary to this view, the distribution of any vaccine for COVID-19 is first and foremost a public health undertaking. The logistics expertise of the DOD, more specifically the Defense Logistics Agency, should be leveraged to

¹ <https://coronavirus.jhu.edu/map.html>

² <https://thehill.com/changing-america/well-being/medical-advances/508311-coronavirus-case-numbers-could-be-2-to-13x>

³ <https://coronavirus.jhu.edu/testing/tracker/overview>

⁴ <https://www.politico.com/news/2020/07/30/coronavirus-vaccine-distribution-388904>

assist the CDC in its work. It is important that CDC take the lead in distribution of COVID-19 vaccines, from setting clear public health priorities to leveraging its well-tested existing vaccine distribution programs and administration partnerships, and that DOD use its logistics expertise to augment these efforts and support delivery of vaccines.

As the leading public health agency for our nation, the CDC has led the distribution and administration of vaccines to children and adults for decades. The agency operates two critical programs, the Vaccines for Children Program and the Sec. 317 adult immunization program, which combined deliver over 80 million vaccine doses in the U.S. every year.⁵ Furthermore, the experts who administer these programs have critical and unique experience in pandemic response, most recently during the 2009 H1N1 pandemic. The CDC also has strong relationships with public health partners across the country, including state, local, Tribal, and territorial health departments, and other critical nongovernmental partners. These partners constitute the crucial “last mile” in the distribution chain and will be key to carrying out an efficient and effective vaccine distribution effort.

Leading public health partners, including the Association of State and Territorial Health Officials (ASTHO), National Association of County & City Health Officials (NACCHO), the American Immunization Registry Association (AIRA), and the Association of Immunization Managers (AIM) have already raised alarm about a potentially diminished role of the CDC, public health agencies, and immunization programs in the distribution of a COVID-19 vaccine, stating they “strongly recommend building upon existing plans and assessing, enhancing, and utilizing the existing coordinated public and private vaccine delivery infrastructure.”⁶

Our nation’s ability to beat this pandemic relies on the successful distribution and widespread administration of safe and effective vaccines. Unfortunately, the surge in cases across the country clearly demonstrates the consequences of ignoring public health experts. It is essential the Trump Administration use existing expertise, systems, and infrastructure as it also seeks to leverage the logistical expertise of the Department of Defense in these efforts. Though it is long overdue, the Trump Administration should immediately place public health experts in charge of these critical steps to turn the tide on this unprecedented crisis and strengthen, rather than undermine, our nation’s public health agencies. We request you provide a briefing within 15 days on the respective roles you envision for DOD and CDC in the COVID-19 vaccine distribution effort, including who in the U.S. government is ultimately responsible for ensuring such efforts are successful and optimize equity and public health.

Sincerely,



Patty Murray
United States Senator



Jack Reed
United States Senator

⁵ <https://www.appropriations.senate.gov/imo/media/doc/07.02.20--HHS%20OWS%20Testimony.pdf>

⁶ <https://www.astho.org/Federal-Government-Relations/Correspondence/ASTHO-Joins-Comments-Operation-Warp-Speed-Leaders/>