

United States Senate

WASHINGTON, DC 20510

July 19, 2022

The Honorable Xavier Becerra
Secretary
Department of Health and Human Services
200 Independence Ave SW
Washington, DC 20201

Dear Secretary Becerra:

The United States is reporting a historically high number of monkeypox cases with over 1,970 cases confirmed in 43 states, the District of Columbia, and Puerto Rico.¹ As I have raised on multiple calls with the Administration, I am concerned with the state of the U.S. response to monkeypox. The spread of monkeypox is a reminder that our work to protect families and strengthen our preparedness and response system is far from complete and cannot end with the COVID-19 pandemic. Communities across the country are relying on you to do everything you can to protect them from the threat of monkeypox. I write to request a briefing from the Department of Health and Human Services (HHS or the Department) on the domestic response to the monkeypox outbreak, including understanding how it is applying the lessons learned from the COVID-19 response, as well as the additional resources and authorities it needs to respond to and stop the disease from spreading further.

The global monkeypox outbreak was first reported to the World Health Organization (WHO) in May 2022, and today, 13,340 cases related to this outbreak have been detected in 69 countries.² Over the last two years, the COVID-19 pandemic has not only highlighted the dangers of a fragmented, understaffed, and underfunded public health system, but has put an unprecedented strain on our front line public health and health care workers, who are now being tasked with addressing yet another emerging public health threat. It is critical that lessons from COVID-19 are incorporated into our monkeypox response.

HHS has already taken a number of steps to respond to the domestic monkeypox outbreak, include activating the Centers for Disease Control and Prevention's Emergency Operations Center, releasing updated guidance and training for health care providers, mobilizing the

¹ <https://www.cdc.gov/poxvirus/monkeypox/response/2022/us-map.html>

² <https://www.cdc.gov/poxvirus/monkeypox/response/2022/world-map.html>

Laboratory Response Network and working with commercial labs to expand testing capacity, deploying medical countermeasures, and releasing a vaccination strategy for close contacts.^{3,4} However, it is clear more work is necessary to ensure that public health officials at all levels have the information and resources they need to respond quickly to this outbreak.

Various reports indicate challenges at the local level, with some patients and providers stating they do not have the information and resources necessary to understand, test for, or respond to the disease, which is now presenting with uncharacteristic features.^{5,6,7,8} Since the disease spreads through close, intimate contact, some patients are seeking care at sexual health clinics, which are frequently under-resourced despite providing critical services to underserved communities, including the LGBTQ+ community.

Ensuring the public health system responds appropriately to monkeypox will require both decisive action from the Department and its state, local, and Tribal partners, as well as robust, sustained investments in public health. History repeatedly shows the critical importance of providing long-term investments in our public health and medical response systems to ensure the U.S. is prepared to respond to a variety of threats. The global eradication of smallpox, a virus in the same family as monkeypox, is a public health success story – and is a credit to sustained, bipartisan investment into the research and development of medical countermeasures. The federal government stockpiled countermeasures, practiced responses with state and local health departments, and educated the public about smallpox.

While this investment in countermeasures has been sustained over decades, funding for the broader U.S. public health system has instead been subject to a cycle of crisis and complacency. That lack of consistency is why I have pushed for passage of the *Public Health Infrastructure Saves Lives Act*⁹, which would provide the sustained funding we need to handle emergencies such as monkeypox or COVID-19. Additionally, to ensure HHS has additional tools to respond efficiently to public health emergencies, I have worked with Senator Burr on our bipartisan PREVENT Pandemics Act.

Given the continued spread of this virus and the need to ensure that all public health officials have the guidance and resources necessary to respond, I request a briefing by August 2, 2022 to better understand both HHS's immediate response and the additional resources and authorities it needs. Specifically, I request updates on: (1) HHS's plan for responding to the current domestic monkeypox outbreak, including the guidance being provided to state, local, and Tribal health departments and to health care providers; (2) the current status of monkeypox vaccines, tests, and therapeutics, including their manufacture and guidance on the distribution of those countermeasures; (3) an overview of how the Department is applying lessons from the COVID-

³ <https://www.cdc.gov/media/releases/2022/s0706-monkeypox-labcorp.html>

⁴ <https://www.hhs.gov/about/news/2022/06/28/hhs-announces-enhanced-strategy-vaccinate-protect-at-risk-individuals-from-current-monkeypox-outbreak.html>

⁵ <https://www.npr.org/2022/06/23/1107151098/problems-with-monkeypox-testing-mean-the-outbreak-may-be-far-bigger-than-reporte>

⁶ <https://www.statnews.com/2022/06/07/testing-bottleneck-for-monkeypox-jeopardizes-containment-experts-warn/>

⁷ <https://www.washingtonpost.com/health/2022/06/23/monkeypox-response-biden-administration/>

⁸ <https://emergency.cdc.gov/han/2022/han00468.asp>

⁹ <https://www.congress.gov/bill/117th-congress/senate-bill/674>

19 response to the monkeypox response; and (4) what additional resources or authorities are needed to respond to and stop the disease from spreading further.

Thank you in advance for your attention to this matter. Please direct correspondence pertaining to this request to Jane Bigham at Jane_Bigham@help.senate.gov or Greg_Carter@help.senate.gov.

Sincerely,

A handwritten signature in blue ink that reads "Patty Murray". The signature is written in a cursive style and is positioned above a horizontal line.

Senator Patty Murray
Chair, Senate Committee on Health, Education, Labor, and Pensions