Committee on Energy and Commerce

Opening Statement as Prepared for Delivery
of
Subcommittee on Health Ranking Member Anna Eshoo

Health Subcommittee Hearing on "Preparing for and Responding to Future Public Health Security Threats."

June 13, 2023

During my floor speech on the House passage of the original Pandemic and All Hazards Preparedness Act in 2006, I said, "this bill demonstrates the good that can come out of bipartisan teamwork."

Today, as the only original author of PAHPA still serving in Congress, I ask that Members recommit to bipartisan teamwork so that we can pass a reauthorization bill to ensure our country is doing its best to prepare for the worst.

The 2023 PAHPA reauthorization must meet the challenges we witnessed during the Covid pandemic and anticipate the challenges of the future. There's clear demand from stakeholders for improvements to the legislation – over 250 organizations replied to the Request for Information on PAHPA that Rep. Hudson and I published.

One critical area where our country is unprepared is our medical supply chain. During the pandemic, we saw that our medical supply chain is broken in three devastating ways: shortages of lifesaving supplies, especially when met with high demand during an emergency, subpar manufacturing, and an overreliance on foreign production.

It's in the DNA of PAHPA to address gaps in supply. Project Bioshield, the Biomedical Advanced Research and Development Authority, and the Strategic National Stockpile are authorized in PAHPA with the express purpose of ensuring access to medical countermeasures in times of emergency.

This year's PAHPA reauthorization is another opportunity to fix the vulnerabilities of our drug and device supply chains. For example, as Dr. Califf of the FDA testified to during our topical hearing last month, the federal government does not have the information it needs to identify the sources of Active Pharmaceutical Ingredients, leaving who supplies many critical drug elements a mystery. My legislation, the *Drug Origin Transparency Act,* fills these gaps in knowledge so we can be more secure in our ability to respond to a health threat.

To help prevent shortages, the FDA also needs notifications of supply interruptions for medical devices or unanticipated spikes in demand for drugs. If a drug goes into shortage, the FDA should be able to use data from the drug manufacturers to safely extend the shelf-life date. Finally, the FDA should be able to recall drugs that are either maliciously or accidentally contaminated in the same way it can recall biologics, devices, and food.

I also support policy that would create a buffer stock for critical oncology drugs that are often in shortage due to quality problems for sterile injectable drugs. I look forward to hearing from the oncologists on today's panel about this issue.

Currently, we do not have bipartisan agreement to include these policies in the bill, but I think it is critical, and let me just say this again, I think it is critical that we commit to move these policies forward in PAHPA. Chair Rodgers, Chair Guthrie, and Representative Hudson, I hope you'll work with me, I'm asking you, I'm really begging you to find a bipartisan path forward. That's how serious these issues are.

I'm pleased that today we'll consider important legislation to improve CDC's public health data, create a diagnostic preparedness plan, and provide BARDA with many of the important contract authorities that Assistant Secretary O'Connell described during our last hearing.

I'm hopeful we can include these commonsense policies, as well as address concerns about the medical supply chains, in the final reauthorization. Our nation's health and our nation's security depend on it.