

117TH CONGRESS
1ST SESSION

H. R. 979

To direct the Secretary of Health and Human Services to submit to Congress a weekly report on COVID–19 vaccine distribution, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 11, 2021

Ms. CRAIG introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To direct the Secretary of Health and Human Services to submit to Congress a weekly report on COVID–19 vaccine distribution, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Vaccine Fairness Act”.

5 **SEC. 2. COVID-19 VACCINE DISTRIBUTION REPORTS.**

6 (a) WEEKLY REPORT TO CONGRESS.—Not later than
7 7 days after the date of the enactment of this Act, and
8 every 7 days thereafter, the Secretary of Health and
9 Human Services (in this section referred to as the “Sec-
10 retary”) shall submit to Congress a report on the effective-

1 ness of efforts relating to the distribution of COVID–19
2 vaccines to the public.

3 (b) CONTENTS OF REPORT.—Each report submitted
4 under subsection (a) shall include, with respect to the 7-
5 day period preceding the date on which such report is sub-
6 mitted, the following:

7 (1) The number of doses of COVID–19 vaccines
8 distributed for administration to the public.

9 (2) A description of any substantial purchase of
10 COVID–19 vaccines by a Federal Government agen-
11 cy or private organization.

12 (3) The number of doses of COVID–19 vaccines
13 that were distributed to State or local health depart-
14 ments.

15 (4) A description of the progress made in dis-
16 tributing COVID–19 vaccines to the following:

17 (A) High-risk and other priority groups,
18 including—

19 (i) racial and ethnic minorities;

20 (ii) individuals who are pregnant or
21 breastfeeding;

22 (iii) individuals with disabilities;

23 (iv) homeless individuals;

24 (v) newly resettled refugees; and

25 (vi) individuals in rural communities.

1 (B) High-risk facilities, including—

2 (i) long-term care facilities;

3 (ii) group homes; and

4 (iii) jails and prisons.

5 (5) A description of any deviations from Fed-
6 eral distribution plans, including issues relating to
7 the following:

8 (A) Sites administering large numbers of
9 COVID–19 vaccines, such as pharmacy chain
10 stores, schools, and primary health care pro-
11 viders.

12 (B) Tracking procedures for COVID–19
13 vaccines, particularly in areas of greatest need.

14 (C) Outreach to health care providers and
15 the public about the availability, benefits, safe-
16 ty, contraindications, and costs of receiving
17 COVID–19 vaccines.

18 (D) Outreach to health care providers re-
19 garding the responsibilities of such providers to
20 track vaccine administration and monitor ad-
21 verse events.

22 (E) Recordkeeping and data collection re-
23 lating to the administration of COVID–19 vac-
24 cines (including Federal support for State and
25 local immunization information systems).

1 (F) Overuse or gaps in treatment.

2 (c) PUBLIC AVAILABILITY OF CERTAIN DATA.—The
3 Secretary shall make publicly available on an appropriate
4 website of the Department of Health and Human Services,
5 and regularly update, data on the number of doses of
6 COVID–19 vaccines administered to the public, disaggre-
7 gated with respect to each of the following:

8 (1) Age.

9 (2) Race.

10 (3) Ethnicity.

11 (4) ZIP Code.

12 (d) TERMINATION.—This section shall cease to have
13 effect on the date that is 18 months after the date on
14 which the initial report is submitted to Congress under
15 subsection (a).

16 (e) STATE DEFINED.—In this section, the term
17 “State” means each of the several States, the District of
18 Columbia, each commonwealth, territory, or possession of
19 the United States, and each federally recognized Indian
20 Tribe.

