

Committee on Energy and Commerce
Opening Statement as Prepared for Delivery
of
Full Committee Ranking Member Frank Pallone
Markup of 17 Bills, Subcommittee on Health
July 13, 2023

I regret that today we are considering a partisan reauthorization of the Pandemic and All-Hazards Preparedness Act (PAHPA) – something that has never been done in PAHPA’s history. It is clear from the legislation before us today that the Republican majority has learned all the wrong lessons from the COVID-19 pandemic and the ongoing drug shortage and medical supply chain crisis.

Our government was not prepared for COVID-19, and we have not done enough to be ready for the next threat. The bills before us today will leave us unprepared going forward and put politics over public health and science. The bills include no funding increases and no improvements to public health data. Republicans also do nothing to address the medical supply chain, a critical failure of our COVID-19 response that continues to cause problems with the ongoing drug shortage crisis.

Last week, I held a roundtable in my district to discuss this crisis. I heard from patients who have been unable to fill prescriptions and from doctors who are being forced to ration care. One oncologist, Dr. Eleonora Teplinsky, described how she has found herself sitting across the room from patients and their families, telling them she could not guarantee they would receive their next chemotherapy on time, if at all.

By refusing to address the drug shortage crisis as part of PAHPA reauthorization, Committee Republicans are putting American lives at risk. Democrats have put forward commonsense proposals that would improve our ability to quickly identify and respond to future pharmaceutical and medical device shortages. Those provisions should be included in the PAHPA reauthorization bill today. Republicans’ claims that FDA-policy is outside the scope of PAHPA defy reality considering that all previous PAHPAs have included FDA policy.

Meanwhile, Republicans are pulling out all the stops to provide themselves with political cover and pretend like they are taking action, with the partisan R.F.I. they put forward, and an announcement last night that the Chair intends to circulate a discussion draft for comment in a few weeks. Patients are demanding action now, and Republicans are giving them an I.O.U. for a rough draft. It doesn’t have to be this way. Work with us. Drug shortages are a clear and present emergency right now, and there is simply no good excuse for inaction.

While I am disappointed in our lack of progress in PAHPA, I am pleased that the same is not true for the SUPPORT for Patients and Communities Reauthorization Act. Five years ago, this Committee worked together to pass the SUPPORT Act to address the ongoing opioid

epidemic. Today, we will consider a package that will reauthorize critical programs included in the SUPPORT Act and some additional provisions to expand treatment options and response efforts to the opioid epidemic.

This markup does not include some important policies that will help justice-involved populations access Medicaid, but we are continuing to work in bipartisan fashion on those policies. It's important that we act, and we have the support of 31 state attorney generals of both red states and blue states, in support of the Medicaid Reentry Act and the Due Process Continuity of Care Act. The state A.G.s write that these bills, and I'm quoting "represent one of the 118th Congress' strongest opportunities to increase public safety and improve public health outcomes nationwide." I strongly support these policies and am hopeful that between now and the full Committee markup, we can find a bipartisan path forward on these provisions.

We are also working together on strategies to address the rising threat of xylazine and will be considering a version of H.R. 1839. I remain concerned about whether this approach will really do anything to address the underlying epidemic and the harms posed by xylazine. Further criminalization of substances does nothing to connect people to treatment and recovery, and instead is likely to perpetuate a cycle of incarceration, broken communities, and rising overdoses. But the language in the bill represents an improvement over the bill as introduced, and I look forward to receiving stakeholder feedback on our proposed approach.

I'm disappointed, however, that Republicans have included H.R. 4056. This bill would weaken protections for foster children and create a financial incentive to place them in large institutional settings. I am concerned that it would undermine federal law that encourages placing foster children in the most family-like settings, while effectively exempting these institutions from important beneficiary protections in Medicaid.

Finally, I am deeply disappointed and actually appalled that Republicans are using reauthorization of the Children's Hospital Graduate Medical Education program as a vehicle to peddle their dangerous and discriminatory attacks against transgender youth. Democrats have pushed for a clean reauthorization of this important program, which, like PAHPA, has traditionally been done in a bipartisan fashion. Yet my Republican colleagues insist on making this a partisan battle over extreme and destructive language to ban medically necessary care for transgender youth. This is an attack on transgender youth, on their parents, and on providers. These decisions should be left to doctors and their patients, not to extremist politicians.

Thank you, Mr. Chairman. I yield back.