

EDWARD J. MARKEY
MASSACHUSETTS

COMMITTEES:
ENVIRONMENT AND PUBLIC WORKS

FOREIGN RELATIONS

RANKING MEMBER:

SUBCOMMITTEE ON EAST ASIA, THE PACIFIC,
AND INTERNATIONAL CYBERSECURITY POLICY

COMMERCE, SCIENCE, AND TRANSPORTATION

RANKING MEMBER:

SUBCOMMITTEE ON SECURITY

SMALL BUSINESS AND ENTREPRENEURSHIP

CHAIRMAN:

U.S. SENATE CLIMATE CHANGE TASK FORCE

United States Senate

SUITE SD-255
DIRKSEN BUILDING
WASHINGTON, DC 20510-2107
202-224-2742

975 JFK FEDERAL BUILDING
15 NEW SUDBURY STREET
BOSTON, MA 02203
617-565-8519

222 MILLIKEN BOULEVARD, SUITE 312
FALL RIVER, MA 02721
508-677-0523

1550 MAIN STREET, 4TH FLOOR
SPRINGFIELD, MA 01103
413-785-4610

May 28, 2020

The Honorable Alex M. Azar II
Secretary
U.S. Department of Health & Human Services
Hubert H. Humphrey Building, Room 509F
200 Independence Avenue, SW
Washington, DC 20201

Dear Secretary Azar,

I write today to urge you to develop a national plan to build surge capacity of personnel — both with and without medical training — to address the novel coronavirus pandemic. Our country needs hundreds of thousands of workers to support our health care facilities and implement contact tracing and supported isolation of individuals infected with or exposed to the virus. Without a significant mobilization, we will be unable to safely ease social distancing and reopen our economy before a vaccine is available and in widespread use.¹ I call on you to expand existing programs under your jurisdiction that were established for precisely these types of purposes, including the Medical Reserve Corps, the Emergency System for Advance Registration of Volunteer Health Professionals, and the Public Health Service Ready Reserve Corps.

There are two key areas in which we need large numbers of additional personnel to fight this pandemic. First, as hospitals and health care facilities respond to new outbreaks of the disease, they often struggle to provide services and treatment to COVID-19 patients because of widespread worker shortages. Thousands of health care workers are sidelined when they are infected with the virus or become ill from it, and must self-isolate to prevent its further spread.² Thousands more are laid off or furloughed due to a

¹ Maggie Fox, *'We need an army': Hiring of coronavirus trackers seen as key to curbing disease spread*, STAT News (Apr. 13, 2020), <https://www.statnews.com/2020/04/13/coronavirus-health-agencies-need-army-of-contact-tracers/>; Crystal Watson et al., *A National Plan to Enable Comprehensive COVID-19 Case Finding and Contact Tracing in the US*, Johns Hopkins Bloomberg School of Public Health, Center for Health Security (Apr. 10, 2020), https://www.centerforhealthsecurity.org/our-work/pubs_archive/pubs-pdfs/2020/a-national-plan-to-enable-comprehensive-COVID-19-case-finding-and-contact-tracing-in-the-US.pdf.

² Emma Loop, *Nearly 3,000 Health Care System Employees In The Detroit Area Have Confirmed or Suspected Coronavirus Infections*, BuzzFeed News (Apr. 12, 2020), <https://www.buzzfeednews.com/article/emmaloop/coronavirus-detroit-nurses-doctors-employees>; Shane Harris et al., *Cash-starved hospitals and doctor groups cut staff amid pandemic*, Wash. Post (Apr. 9, 2020), <https://www.washingtonpost.com/health/starved-for-cash-hospitals-and-doctor-groups-cut-staff-amid-pandemic/2020/04/09/d3593f54-79a7-11ea-a130-df573469f094story.html>.

reduction in routine care. According to one report, in the first month of the COVID-19 outbreak, 43,000 health care workers were laid off nationwide.³ In Massachusetts, the Boston Medical Center was forced to furlough up to 10 percent of its staff to stay financially afloat.⁴ And nurses are reaching the breaking point in some hospitals, stressed by a lack of needed personal protective equipment, long hours, and directives to come to work even when sick.⁵ As new hot spots erupt, our nation needs a force of health care workers who can step in to support response efforts. Second, our nation will need upwards of 100,000 new public health workers to perform contact tracing and infection control.² According to the Centers for Disease Control and Prevention (CDC), that requires a “substantial expansion of public health fieldworkers,” but the agency plans to add only 650 workers to the existing 600 public health workers out in the states.⁶

We must immediately address these gaps in medical and public health workforce capacity. Medical workers such as nurses and physicians can be placed at the front lines to support the workforce that is already stretched thin. Although medical workers need years of training and special medical licenses, public health workers could be rapidly trained and deployed for a variety of tasks, including performing contact tracing, setting up COVID-19 testing sites, transporting the elderly to testing sites, decontaminating spaces, coordinating vaccine administration sites, and more.⁷ The federal government can tap into the recently laid off or furloughed workers as a resource to help build needed surge capacity.

Three existing Department of Health and Human Services (HHS) programs were built for a rapid surge in medical and public health workers, but HHS has not utilized them effectively in its response to the novel coronavirus. The Medical Reserve Corps is a national program of 175,000 volunteers, most with medical training, who contribute to community health activities and may prepare for and respond to natural disasters or health emergencies. Principally coordinated at the state and local level, it has proven successful in rapidly recruiting medical professionals. The Emergency System for Advance Registration of Volunteer Health Professionals, established after the September 11 attacks, allows for the rapid recruitment of medical professionals in exigent circumstances such as this pandemic. The United States Public Health Service (USPHS) Public Service Ready Reserve Corps is a program devised exactly for our current needs, to stand up surge capacity on short notice for a public health emergency response. Indeed, the Coronavirus Aid, Relief, and Economic Security (CARES) Act included funding for the Ready

³ Dylan Scott, *Hospitals are laying off workers in the middle of the coronavirus pandemic*, Vox (Apr. 8, 2020), <https://www.vox.com/2020/4/8/21213995/coronavirus-us-layoffs-furloughs-hospitals>.

⁴ Priyanka Dayal McCluskey, *Boston Medical Center furloughs 10 percent of its workforce as part of cutbacks across the health care industry*, Boston Globe (Mar. 31, 2020), <https://www.bostonglobe.com/2020/03/31/business/boston-medical-center-furloughs-10-percent-its-workforce/>.

⁵ Ken Alltucker, *‘Can’t expect nurses to be miracle workers’: Mask, equipment shortages push nurses to brink across nation*, USA Today (Apr. 11, 2020), <https://www.usatoday.com/story/news/health/2020/04/11/coronavirus-nurses-reach-breaking-point-amid-ppe-face-mask-shortages/2973881001/>.

⁶ Selena Simmons-Duffin & Rob Stein, *CDC Director: ‘Very Aggressive’ Contact Tracing Needed For U.S. To Return To Normal*, NPR (Apr. 10, 2020), <https://www.npr.org/sections/health-shots/2020/04/10/831200054/cdc-director-very-aggressive-contact-tracing-needed-for-u-s-to-return-to-normal>; Joe Neel et al., *CDC To Fund 650 Health Experts To Help States Trace, Stop COVID-19*, NPR (Apr. 21, 2020), <https://www.npr.org/sections/health-shots/2020/04/21/840539685/cdc-to-fund-650-health-experts-to-help-states-trace-stop-covid-19>.

⁷ Anna Maria Barry-Jester, *How Do We Exit The Shutdown? Hire An Army Of Public Health Workers*, Kaiser Health News (Apr. 13, 2020), <https://khn.org/news/how-do-we-exit-the-shutdown-hire-an-army-of-public-health-workers/>.

Reserve Corps through the Public Health and Social Services Emergency Fund and provided clear authority to HHS to make “enhancements to the U.S. Commissioned Corps” and stand up the Ready Reserve Corps.⁸ HHS also has available the United States Public Health Service (USPHS) Commissioned Corps, with more than 6,000 trained public health professionals, of which HHS has already deployed 1,500 in the COVID-19 response.⁹ Yet, HHS has not taken any serious steps to expand any of these programs to provide critical surge capacity during this crisis.¹⁰

We need a national plan to mobilize a large-scale public health and medical workforce. Although many states have crafted individual plans to recruit medical and public health volunteers,¹¹ state-by-state efforts will not facilitate a nationally coordinated response that can adjust to needs in different states. Public health experts are sounding the alarm, explaining that the only way to achieve a safe reopening is to hire an army of public health workers.¹² Accordingly, I ask that, by June 5, 2020, you respond to the following questions about HHS’s plans to build surge capacity of medical and non-medical personnel to respond to the ongoing public health crisis.

1. Medical workforce

- a. How is HHS using the Medical Reserve Corps (MRC) and what is HHS doing to coordinate this program at the national level?
- b. Has HHS established a plan for deploying medical professionals across the country through the MRC or other avenues, if needed? If so, please describe those plans. If not, why not?
- c. Identifying gaps in health care workers across the nation:
 - i. How is HHS identifying surplus or deficits in medical professional capacity?
 - ii. Has HHS engaged with state licensing boards to see what licensed health care workers are available in each state that are not currently working?
 - iii. Does HHS plan to combine data on health care worker availability with COVID-19 needs across the nation to establish real-time estimates of resource availability and gaps? If so, please describe those plans. If not, why not?

⁸ *Coronavirus Aid, Relief, and Economic Security Act (CARES Act)*, Title VIII, Sec 6002 (2020).

⁹ Tom Jurkowsky, *Protect a national treasure: The US Public Health Service*, The Hill (Apr. 5, 2020), <https://thehill.com/opinion/national-security/490735-protect-a-national-treasure-the-us-public-health-service>.

¹⁰ Liz Essley Whyte, *There’s A Federal System For Signing Up Medical Volunteers — But It’s Neglected*, NPR (Mar. 21, 2020), <https://www.npr.org/sections/health-shots/2020/03/21/819172512/theres-a-federal-system-for-signing-up-medical-volunteers-but-it-s-neglected>.

¹¹ Nicole Hong, *Volunteers Rushed to Help New York Hospitals. They Found a Bottleneck.*, N.Y. Times (Apr. 8, 2020), <https://nytimes.com/2020/04/08/nyregion/coronavirus-new-york-volunteers.html>; Amanda Eisenberg & Shannon Young, *Frontline volunteers caught up in red tape, wooed to private hospitals instead*, Politico (Apr. 15, 2020), <https://www.politico.com/states/new-york/city-hall/story/2020/04/14/frontline-volunteers-caught-up-in-red-tape-wooed-to-private-hospitals-instead-1276252>; Martha Bebinger, *Massachusetts Recruits 1,000 ‘Contact Tracers’ To Battle COVID-19*, NPR (Apr. 13, 2020), <https://www.npr.org/sections/health-shots/2020/04/13/832027703/massachusetts-recruits-1-000-contact-tracers-to-battle-covid-19>; Christine Vestal & Michael Ollove, *Reopening Means Contact Tracing. Many States Aren’t Ready*, Pew Charitable Trusts (Apr. 29, 2020), <https://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2020/04/29/reopening-means-contact-tracing-many-states-arent-ready>.

¹² Anna Maria Barry-Jester, *How Do We Stop the Shutdown? Hire an Army of Public Health Workers*, Kaiser Health News (Apr. 13, 2020), <https://khn.org/news/how-do-we-exit-the-shutdown-hire-an-army-of-public-health-workers/>.

2. Public health workforce
 - a. What is HHS doing to mobilize unemployed, furloughed, or other available workers to assist in the public health response to the novel coronavirus?
 - b. For what types of response activities is HHS currently recruiting surge workers?
 - c. How is HHS utilizing the United States Public Health Service (USPHS) Commissioned Corps to respond to this pandemic?
 - d. What is the status of the USPHS Commissioned Ready Reserve Corps, which was fully authorized in January 2020 and funded through the CARES Act in March 2020?
 - i. What steps has HHS taken to stand up the program and expand it to meet the immediate needs of the novel coronavirus crisis?
 - ii. How fast can HHS implement this program with the funding and authority Congress provided?
 - iii. Does HHS need additional funding or authority to effectively implement this program? If so, please describe any additional needs.
 - e. How is HHS using funds from the CARES Act to provide enhancements to the U.S. Commissioned Corps?
 - f. Does HHS plan to provide rapid recruitment opportunities for the USPHS Commissioned Corps, for example through expedited training programs such as a modified and accelerated version of the USPHS Commissioned Officer Student Training and Extern Program (COSTEP)?
 - i. If so, please describe those plans.
 - ii. If not, why not?
 - iii. Has HHS considered options for rapid recruitment of high school diploma- or bachelor's degree-level staff that can be deployed after a rapid 1-2 week training period?
 - g. How is HHS coordinating with the CDC for recruiting public health surge capacity?
 - i. Does HHS have a plan for rapid recruitment into modified CDC fellowship programs that can provide rapid surge workforce capacity? If so, please describe those plans. If not, why not?
 - h. Does HHS have a plan for responding to workforce surge requirements in the next one month, three months, six months, and twelve months? If so, please describe those plans. If not, why not?

Thank you for your attention to these requests. If you have any questions, please contact Georgia Lagoudas at georgia_lagoudas@markey.senate.gov or Adam Axler at adam_axler@markey.senate.gov.

Sincerely,



Edward J. Markey
United States Senator