

**A VIEW FROM THE STATES:
GOVERNORS RESPOND TO
THE OMICRON VARIANT**

HEARING

BEFORE THE
SELECT SUBCOMMITTEE ON THE CORONAVIRUS
CRISIS
OF THE

COMMITTEE ON OVERSIGHT AND
REFORM

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Written opening statements and the written statements of the witnesses are available on the U.S. House of Representatives Document Repository at: docs.house.gov.

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- * Congresswoman Cathy McMorris Rodgers' (WA-05) Statement; submitted by Rep. Scalise.
- * Letters from Governor Kathy Hochul (State of New York) and Governor Kate Brown (State of Oregon); submitted by Chairman Clyburn.
- * Questions for the Record: to Mayor Bowser; submitted by Ranking Member Steve Scalise.
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- * Questions for the Record: to Governor Pierluisi; submitted by Rep. Nydia Velázquez.

Documents are available at: docs.house.gov.

A VIEW FROM THE STATES: GOVERNORS RESPOND TO THE OMICRON VARIANT

Thursday, January 20, 2022

HOUSE OF REPRESENTATIVES
COMMITTEE ON OVERSIGHT AND REFORM
SELECT SUBCOMMITTEE ON THE CORONAVIRUS CRISIS
Washington, D.C.

The subcommittee met, pursuant to notice, at 3:05 p.m., via Zoom, Hon. James E. Clyburn (chairman of the subcommittee) presiding.

Present: Representatives Clyburn, Waters, Maloney, Velázquez, Foster, Raskin, Krishnamoorthi, Scalise, Jordan, Malliotakis, and Miller-Meeks.

Chairman CLYBURN. Good afternoon. The committee will come to order.

Without objection, the chair is authorized to declare a recess of the committee at any time.

I now recognize myself for an opening statement.

Since the coronavirus first reached our shores two years ago, governors have played a critical role in responding to the spread of the virus. We are fortunate to be joined today by the Governors of the state of Washington, the state of Colorado, the Commonwealth of Puerto Rico, and the state of Nebraska, as well as the Mayor of the District of Columbia, whose role is equivalent to that of a state governor.

To learn more about the instrumental role, these chief executives continue to play in our Nation's response to the pandemic.

This hearing comes at a pivotal moment in our Nation's response. As we gather today, we are facing new challenges from the highly transmissible Omicron variant, which is resulting in higher case numbers than ever before. However, there is a reason to be hopeful.

Earlier research indicates that Omicron causes less severe disease than previous strands of the coronavirus. We have more effective therapeutics at our disposal than ever to treat the disease. And, most importantly, all approved coronavirus vaccines and boosters continue to provide robust protection against severe disease and death from the Omicron variant.

If you are up-to-date on your coronavirus vaccinations, that is, if you have received your initial shots and then gotten a booster when eligible, you have the protection you need to live your normal

life at very low risk to your health and the health of your loved ones.

Unfortunately, the coronavirus pandemic remains a crisis because millions of Americans remain unvaccinated and are therefore at risk of the Omicron variant. Recent data show that unvaccinated Americans continue to account for a substantial majority of hospitalizations and deaths. Given the high transmissibility of the Omicron variant, these unvaccinated patients are pushing many hospital systems to their limits, threatening anyone who may need hospital care.

Many of the Americans who remain unvaccinated have made this dangerous decision because of coronavirus misinformation, which is reaching broad audiences and undermining the great work being done at all levels of government to protect communities from the virus.

Misinformation has also led to fraud too many Americans infected with the coronavirus to reject effective treatments. It is increasingly clear why so many Americans continue to doubt the safety and effectiveness of lifesaving coronavirus vaccines.

Republican politicians are among the most vocal proponents of the misinformation that has generated those doubts. For instance, Senator Ron Johnson stated last year that there had been, and I'm quoting him, over 3,000 deaths within 30 days of taking the vaccine, falsely connecting unrelated deaths to the coronavirus vaccines.

Congressman Matt Gaetz has dangerously encouraged people to get infected, saying, and I'm quoting him, the best vaccine we have found is Mother Nature's vaccine. It's contracting the virus.

Sadly, these are just two of many falsehoods coming from our colleagues across the aisle. Other Republican politicians simply emphasize your right not to be vaccinated, rather than presenting the decision to get vaccinated as the consequential patriotic duty that it is. Because getting vaccinated doesn't just protect yourself; it protects your loved ones, your communities, and your fellow citizens.

The ranking member of this committee has criticized the Biden administration's vaccine requirements as, and I'm quoting, increasing government control of your life, end of quote. This type of discouragement is legitimizing and perpetrating people's vaccine hesitance when we should be working together to vaccinate as many Americans as possible.

The Republican Party's promotion of misinformation has measurable consequences. One study found that political affiliation is the strongest predictor of whether someone is vaccinated, with unvaccinated adults more than three times as likely to lean Republican as Democrat. Since vaccines became widely available in May 2021, people living in counties that voted heavily for former President Trump in 2020 were three times as likely to die from the coronavirus as those who lived in areas that voted for President Biden. The irresponsible legitimization of vaccine misinformation by Republican leaders is tragically killing their supporters.

This vaccine resistance is among the top challenges facing leaders at the Federal and state levels as we enter 2022 at the height of the Omicron wave. I look forward to hearing from today's wit-

nesses to further understand how the Federal Government can work with states, territories, and the District of Columbia to overcome vaccine hesitancy, combat the Omicron variant, and prepare for any further challenges this virus may present.

The past two years have shown that Federal-state collaboration is critical to mounting an effective response to the coronavirus. We saw the dire consequences of the Trump administration's abdication of Federal leadership and refusal to provide support to states in acquiring and distributing critical personal protective equipment, tests, and other supplies during the first year of the pandemic, forcing states to fend for themselves.

Since taking office, President Biden has emphasized the importance of working with the states, territories, and the District of Columbia to respond to the pandemic.

Under Governor Inslee's leadership, Washington State recently set up a mobile vaccination unit in King County with capacity to administer up to 1,500 vaccines and booster shots per day, and is working to set up another high-capacity site.

Under Governor Polis, Colorado recently worked with FEMA to set up mobile bus units to administer monoclonal antibody treatments in rural areas of the state, congregate living facilities, and other high-demand sites.

Under Governor Pierluisi, Puerto Rico has worked hard to build vaccine confidence and get shots in arms, with result that nearly 80 percent of Puerto Ricans are fully vaccinated—one of the highest vaccination rates among the United States and its territories.

Using funds from the American Rescue Act, Mayor Bowser and the District of Columbia have helped families struggling with rent and housing security during the pandemic. Of course, Washington, DC's lack of statehood status has impacted the District's response. Republicans refuse to provide the District with \$755 million in relief funding via the CARES Act that it would have been entitled to if it were a state.

Now, I'm particularly concerned about this because this is not just people; these are Americans living in our Nation's Capital. They are family members. Scores of my family members left South Carolina and went to Washington, DC, Philadelphia, New York, other places looking to further—get further access to the greatness of America. And to be penalized living in the District of Columbia is just beyond the pale. These people are American citizens and should have been treated better. Fortunately, Congress restored this funding, and the Biden administration, in the American Rescue Act.

I would like to thank today's witnesses for taking the time to testify about these pressing issues. I look forward to hearing from our Governors about their responses to the Omicron variant and gaining more insight into how we can better protect Americans and end this crisis.

I now recognize the ranking member for his opening statement.

Mr. SCALISE. Thank you, Mr. Chairman. I look forward to hearing from our witnesses.

I want to start by making it very clear for those of us who have promoted the vaccine, who have talked about what President Trump started under Operation Warp Speed to create, not one, but

two, but three vaccines. The real flaw—and there have been many flaws with President Biden’s approach—has been to have a vaccine-only strategy where he’s tried to shame people based on whether or not they get the vaccine, trying to divide people on whether or not they get the vaccine.

It’s misinformation to suggest only unvaccinated are dying or only Republicans or Trump voters are dying. There is clearly all throughout our country right now a resurgence in COVID. Affects blue states, red states, Republicans, Democrats, Black, White, Hispanic, Asian.

What we should be focused on is how to confront it. Unfortunately, if you look where we are today, today marks the one-year anniversary that Joe Biden took the oath of office as President of the United States. Unfortunately, what we’ve seen is failure after failure and broken promise after broken promise. And, unfortunately, it starts with the vaccine and what President Biden said he would do about COVID and has failed to do a year in.

He promised Americans that he would, quote, shut down the virus. How many times did we hear Joe Biden say that, promise that as a candidate? Unfortunately, what we’re going to see is a very different candidate Joe Biden versus President Joe Biden. Words versus actions.

Shut down the virus was what he promised. Yet despite inheriting all three of those proven, safe, and effective vaccines from President Trump’s Operation Warp Speed, as well as numerous proven treatments, therapeutics. Millions of people, by the way, with natural immunity, which, Mr. Chairman, we ought to have a hearing about to see just what kind of protection natural immunity gives people.

He also had a well-established testing apparatus that he walked into. Right now, the United States, with all of that, is being hit with record highs for new cases. Testing shortages and delays. And there have been more deaths under Joe Biden’s Presidency than under Donald Trump’s. Again, a year in, and he walked in the door with three vaccines ready to go. President Trump didn’t have any of that.

And I know there’s been a lot of talk under the Trump administration about how many deaths there were by Democrats. Interesting you don’t hear them talking about the deaths right now, that Joe Biden has more deaths under his Presidency than we had under Trump.

A signature feature of then-candidate Biden’s campaign was a top-down Federal solution to the pandemic. How many times did we hear him say that he had a national plan, he was ready to go. On August 18 of 2020, he said, quote, Donald Trump still doesn’t have a plan to get this virus under control. His failure to lead is costing American lives.

On October 15 of 2020, he said, quote, What, eight months into this pandemic and Donald Trump still doesn’t have a plan to get this virus under control. I do.

That was Joe Biden as a candidate.

Never mind the fact that President Trump had a very successful plan. It was called Operation Warp Speed. It was a bipartisan effort, by the way, in Congress that helped fund Operation Warp

Speed. It should have been bipartisan credit where everybody bragged about the success of Operation Warp Speed. It yielded those three safe and effective vaccines. It yielded multiple therapies like monoclonal antibodies. And we had a robust testing network.

On President Biden's first day in office, he released a 200-page document titled, quote, National Strategy for the COVID-19 Response and Pandemic Preparedness. And he said, quote, For the past year, we could not turn to the Federal Government for a national plan to answer prayers with action until today.

Well, just a few weeks ago, in a stunning reversal, after almost a year of broken promises and failed strategy, and the virus raging worse than ever before, President Biden reversed course and abandoned that so-called plan.

On December 27 of 2021, just a few weeks ago, President Biden said, quote, There is no Federal solution. This gets solved at the state level. I am guessing that's why the select subcommittee is having this hearing today, titled, "A View From the States."

After campaigning on a national plan and congressional Democrats, including many on this committee, calling for a national plan, Democrats have now abandoned any hint of a plan and instead are trying to dump their failures into the Governors' laps.

Ironically, President Biden's first goal in his national strategy was to, quote, restore trust with the American people. Yet his policy shows he does not trust the American people. He does not trust the American people enough to be transparent about the policies and decisions his administration is making and the data that they are using to make those decisions. He does not trust the American people to make their own healthcare decisions. He does not trust the healthcare workers to make their own healthcare decisions.

Interestingly, if you look a year ago, we were all praising healthcare workers, unvaccinated healthcare workers as heroes. Today, President Biden is trying to fire those very same healthcare workers if they're unvaccinated.

What changed in a year? Why were they heroes a year ago and today President Biden wants those same people to be fired? Talk about trusting the American people.

He doesn't trust parents to make decisions about what's best for their children. He does not trust businesses to make decisions about what's best for the welfare of their employees. Trust is a two-way street, and this is but one reason why President Biden's COVID response plan is in tatters. Instead of trying to patch the holes in the Biden administration's messaging, this subcommittee should be fulfilling its stated purpose; that is, performing congressional oversight of the COVID-19 response.

The list of issues that we should be having hearings on is incredibly long. And, Mr. Chairman, you know, because I've asked many times, that this committee do get engaged in having hearings on some of the oversight that we're not doing. I'll just name a few that we've been calling on this committee to deal with.

The Biden administration's inaction with procuring tests, and rejection of a plan that was reported last October was provided to President Biden to provide millions—hundreds of millions of rapid

tests in time for the Christmas holidays. President Biden, by all reports, rejected that plan.

Americans are still wondering, did the President have that plan presented to him? Did he reject it? Who was involved in rejecting that plan and why? And, also, importantly, who's been held accountable if that really did happen? This committee should be getting to the bottom of that.

President Biden's plan of shaming and blaming the unvaccinated instead of focusing on a science-driven approach, to include not only vaccinations but natural immunity, other therapeutics. Stop dividing Americans over the vaccine and start providing Americans with an actual plan to confront this.

The Biden administration commandeered the distribution of monoclonal antibodies, causing states to jump through more hoops and making it harder for states to get access to these lifesaving treatments. We hear from states who are now being forced to compete against other states, and some states aren't being given what they need while others are. That's going on right now under President Biden.

Despite spending about \$200 billion to safely reopen schools, more than 5,000 schools have had some type of shutdown this month. Why isn't every school open? We've heard from scientists who said they all should be. Kids are much better off in the classroom.

We need to have a hearing to examine the severe student learning loss caused by remote and hybrid learning. We've heard about the mental health crises that's been caused by students not being allowed to be in a classroom. And, by the way, if a school took the money, like Chicago taking \$2 billion of taxpayer money to reopen and then closed their doors on those same students, shouldn't those schools have to give the taxpayer money back? Let's talk about having a hearing to give parents options to send their kids to an open school if their school doesn't want to educate their kids but wants to take the money.

And let's not forget that the teachers' union was caught manipulating CDC guidance on school reopenings. We should have a hearing on manipulating the science that happened by teachers' unions in the Biden White House.

The World Health Organization and the European Center for Disease Prevention and Control do not recommend masking kids under six years old. Why is America masking kids without evidence, and what impact is it having on their emotional and social development? What could be more important than protecting our kids' mental health which has been under attack this last year and a half?

The Biden administration has been sidelining the science on boosters. First, in the summer of 2021, the Biden administration announced the availability of booster shots for all adults by September. But amazingly, they made this announcement before the FDA and the CDC had even finished reviewing the data to determine the need for booster shots. Because of this, two senior FDA officials reportedly left the agency amid alarming reports of political interference with the science under the Biden administration.

This was obviously very confusing for the public. Misinformation clearly by the Biden administration.

Most recently, President Biden's administration chose to add to the confusion by bypassing the FDA and CDC's long-established vaccine advisory committee process for updating booster shot eligibility.

Then, there's the Biden's Operation Snail Speed on Covid Therapies, as The Wall Street Journal editorial board called it. Instead of taking a multifaceted approach to ending the pandemic, President Biden went all in on vaccine-only approach and neglected to focus on therapeutics and natural immunity.

In fact, one year after taking office, President Biden still to this day does not have an FDA Commissioner in place. That should have been a day-one decision. President Biden a year and still doesn't have anybody heading up the FDA. And many people have called the FDA a rudderless ship on things like testing, alternative therapeutics.

Republicans on the select subcommittee still are the only ones in Congress that have held a hearing on the origins of COVID-19. We've asked, Mr. Chairman, that this committee, the full committee have a hearing on the origins.

We've seen a lot of scientific data out there that it started in the lab in Wuhan. There are even reports that some of Dr. Fauci's own advisors said that it started in the lab in Wuhan, and then amazingly days later reversed course. Shouldn't we have a hearing on that? Did somebody interfere with the science to make those scientists reverse course from emails that were hidden and just became public?

The U.S. appears to have funded gain-of-function research at the Wuhan lab in China. Taxpayers should know the truth about that. And we should have a debate and discussion about whether we should be funding those types of research if that was the case.

And, last, newly released unredacted emails, as I talked about regarding Dr. Fauci and Dr. Collins, say that they were warned that COVID-19 came from the lab. We need to do our jobs and look into all of these items. This country spent, through Congress, over \$6 trillion of taxpayer money, some of it directly on COVID relief. Some of it was directed into other places that had nothing to do with COVID. But we should be having oversight into all of that.

If we sit idly by as the Biden administration keeps fumbling this pandemic response, then things will only get worse.

Americans want accountability, Mr. Chairman. Let's have hearings to get to the bottom of all of these crises that have been created by this President's failed response to the pandemic.

Look forward to hearing from our witnesses, and I yield back.

Chairman CLYBURN. I thank the ranking member for his remarks.

I would like now to introduce our distinguished witnesses.

Governor Jared Polis, a former colleague, has served as Governor of Colorado since 2019. Governor Polis has taken bold action to lead his state through the pandemic, working tirelessly to ensure children and teachers can attend school in person safely. His administration has distributed millions of medical-grade masks and

also onsite vaccine clinics at schools. I would expect no less from a former colleague.

Governor Pierluisi, also a former colleague, has served as Governor of Puerto Rico since 2021. Under his leadership, the Commonwealth of Puerto Rico has worked tirelessly to educate residents about the importance of vaccinations, helping to achieve one of the highest vaccinated mission rates and one of the lowest death rates in the country. His administration has also implemented effective testing and contact tracing efforts, helping to slow the spread of the virus while sustaining Puerto Rico's vital tourism industry.

Mayor Muriel Bowser has served as the Mayor of the District of Columbia since 2015. She has recently overseen an expansive effort to provide residents free at-home testing kits and established multiple coronavirus centers around the city dedicated to expanding access to vaccines and testing. Mayor Bowser's administration has also implemented commonsense vaccine requirements which will save countless lives.

Governor Pete Ricketts has served as Governor of Nebraska since 2015. He has developed a fantastic reputation as one who is compassionate and sensitive to what needs to be done to get beyond this pandemic. He also currently serves as a co-chair of the Republican Governors Association.

Another of my former colleagues and congressional classmate, Governor Jay Inslee, has served as Governor of Washington since 2013. Governor Inslee showed tremendous leadership in responding to one of the earliest coronavirus outbreaks in the country in February 2020, helping to slow the spread of the virus and save lives. Governor Inslee's administration continues to take action to expand access to testing, increase vaccinations, and distribute masks to the public for free.

Now I would like for the witnesses, please, raise your right hands.

Do you swear or affirm that the testimony you're about to give is the truth, the whole truth, and nothing but the truth, so help you God?

Let the record show that the witnesses answered in the affirmative.

Without objection, their written statements will be made part of the record.

Governor Polis, you are now recognized for five minutes for your opening statement.

STATEMENT OF GOVERNOR JARED POLIS, STATE OF COLORADO

Mr. POLIS. Thank you, Chairman Clyburn, Ranking Member Scalise. It is good to see my friends and former colleagues and an honor to be invited to share Colorado's experience fighting the COVID-19 pandemic.

Over the last two years, we have relied on data and science to guide our response to the virus. We have taken a balanced approach, prioritizing the health and safety of our fellow Coloradans, working to lessen the psychological and social impact of the pan-

demic, while minimizing any negative impact on the economy or on our kids' education.

This has led Colorado to have one of the shortest shutdown stay-at-home periods in the entire country. One of the lowest death rates in the entire country as well in the bottom 10 states.

When the lifesaving vaccine became available, we aggressively launched efforts to protect as many Coloradans who wanted to be protected. We were proud that we vaccinated 70 percent of Coloradans by—70 and older—early on. And we reached President Biden's goal of vaccinating 70 percent of all Coloradans by July 4. And we brought that same intensity to protecting our kids, our 5- to 11-year-olds, as well as administering third doses shown to be even more important against the Omicron variant.

The lifesaving vaccine is our single best tool against the virus, especially against severe illness and death from the virus. But early detection also helps prevent the disease spread, and through more and more effective treatments, also save lives. And that's why we have worked to make testing free, quick, and easy. Over 100 community testing sites.

Last year, we made rapid tests available through an at-home delivery program that continues to this day. We're really thrilled to see a similar national home test delivery program rolled out as well. And we're happy to see the Federal Government step up in that regard.

We also used testing to protect state employees, working with many of the vulnerable workers under our care, including at veterans' nursing homes, youth detention facilities. And we worked with schools to make free testing available onsite for students and staff to help improve the level of safety in the classroom.

Earlier this week, Colorado launched a new mask delivery program that provides free medical-grade masks to every Coloradan who wants them. They are at dozens of public libraries, fire stations, recreation centers, YMCA's, depots that have agreed to be part of a distribution hub. And Coloradans can pick up five medical-grade masks to add additional protection to themselves.

These programs are examples of how we've worked to tackle the virus from every angle. I'm very proud of everyday Americans, everyday Coloradans, the way that they have stepped up to protect themselves and their family during this crisis. But the simple truth is that states alone cannot spearhead these efforts indefinitely. COVID-19 is no doubt with us for years to come. And while early data suggests we're entering the endemic phases of this virus soon, we should also be prepared for the inevitable lulls and subsequent waves that will continue to impact hospital capacity as well as, of course, the threat of future mutations.

Protecting hospital capacity has always been our North Star in Colorado. We wanted to make sure that if anybody gets a heart attack, a stroke, a car accident, or sick with COVID has access to the very best care to make sure that they can recover. What we simply cannot allow how we live and work and how our children go to school to be determined by whether or not our hospitals can keep up or hire staff or maintain adequate supplies.

We need a national standard of hospital and healthcare system readiness. And we know that with the disruptions in the work

force, especially in healthcare, like people across the country, we're losing many nurses, doctors, and staff, and we need national focus on a plan to improve work force readiness around the healthcare work force for the future.

Colorado is working on a plan with our providers, with legislators to invest in our healthcare work force, but we can't stand alone. This truly needs to be a national effort.

It's not just about the need for hospital beds and workers; it's also about integrating the pandemic response as an endemic response into our healthcare system where it belongs.

Colorado, of course, like many states, set up testing sites, vaccine clinics, distributed therapeutics. But moving forward, our medical system—doctors, pharmacies, urgent cares, hospitals—should be providing this care, as they do for all other conditions.

Coloradans trust their primary care doctors and turn to them first. But because FEMA is not reimbursing costs associated with equipping primary care and pediatric physicians to provide vaccines, many doctors are still not offering this critical protection to their patients, putting a further onus on the states and, of course, hospitals and pharmacies.

Similarly, far too many schools in Colorado and across the country don't have a designated school nurse; someone to administer tests onsite, take temperatures, catch cases in their infancy. But because of this, we see a lot of outbreaks and children needlessly getting sick and contributing to their family members getting sick who might be more vulnerable.

Colorado has worked to get schools the supplies they need, including masking. We've distributed over 2 million masks to teachers, as well as to students, at school and onsite testing. But both, of course, are opt-in programs. And we need our schools to have onsite, high-quality care to make sure the kids get the uninterrupted safe education they deserve.

We know what we need do. It's going to take all of us working together to get it done.

I want to thank Chairman Clyburn. I want to thank the subcommittee for inviting me here today. I hope that this perspective from Colorado can help spur national action to help our country move forward, protect lives, and keep our economy growing.

And I yield back.

Chairman CLYBURN. Thank you very much, Governor Polis.

We'll now hear from Governor Pierluisi. Governor, you are now recognized for five minutes.

**STATEMENT OF GOVERNOR PEDRO PIERLUISI,
COMMONWEALTH OF PUERTO RICO**

Mr. PIERLUISI. Chairman Clyburn, Ranking Member Scalise, and members of the subcommittee, thank you for inviting me to testify before you today.

As Governor of Puerto Rico and former resident commissioner of Puerto Rican Congress, I'm honored to represent the unique viewpoint of the island's 3.2 million American citizens as we enter the third year of this pandemic.

When my administration took office in January 2021, I put together a team of highly qualified professionals and scientists to ad-

wise me on how to lead our fight against COVID-19. We worked tirelessly to educate our citizens on the value of the vaccine, which bolstered vaccine uptake and staved off skepticism. Because of these efforts, over 91.4 percent of our vaccine-eligible population over the age of 5 have received at least one dose, and an astounding 81.5 percent of our vaccine-eligible population is fully vaccinated or boosted. Puerto Rico stands as the leader in the Nation's vaccination effort.

An important aspect of Puerto Rico's successful vaccine rollout was the connectivity amongst the healthcare providers on the island. When monoclonal antibody treatments became widely available, thanks to the hard work of HHS, Puerto Rico leaned heavily on our strong pharmacy networks to ensure that there was a coordinated request for therapeutics needed each week.

Puerto Rico engineered one of the first electronic vaccine card programs in the United States, the VacuID. Our department of health, led by Dr. Carlos Mellado, deployed strong contact tracing teams and effectively monitored visitors, identified positive COVID patients, and slowed the spread. These efforts enabled us to sustain much of our tourism industry, an important component of Puerto Rico's economy.

Puerto Rico is regularly asked to do more with less. However, with the right leadership and depoliticization of healthcare, our island stands as proof that it is possible to achieve successful outcomes. We can only envision just how resilient our island could be if there was less disparity in Federal funding for our healthcare programs.

When treated equally with the states, as we have been for much of the COVID-related Federal disbursements, Puerto Rico has been able to accomplish a high standard of care for the citizens of our territory. We have been able to achieve the near impossible, having no hospitals closing their doors during the COVID-19 pandemic.

Over the last two years, while cases have spiked in the U.S. and around the world, we have been able to keep Puerto Rico's case counts comparatively low. However, with the rise of the Delta and Omicron variants, we have seen the highest case counts reported to date. We have had approximately 239,000 confirmed cases recorded on the island, with our daily case count continuing to decline now to less than 2,000 confirmed cases per day. Throughout the pandemic, we have had 3,593 confirmed deaths due to COVID-19, with our daily average continuing to decrease. These numbers are comparatively low due to our high rates of vaccination.

However, given that we are an island, the possibility of overburdening our health system has always been a concern, as our people cannot be diverted to a neighboring state hospital. My administration has been very proactive and creative with mandates throughout this pandemic. Since midsummer of 2021, we have required most of our work force to be fully vaccinated. Although we have always given our citizens the option to provide negative COVID test results in lieu of proof of vaccination, we have continuously advocated for vaccination across all sectors of our society.

In addition, we have not been shy about requiring restaurants and bars to ask for proof of vaccination or a negative test result to their clients at all times. And every time we have faced spikes

in cases, we have promptly restricted both capacity and business hours at our gastronomic and entertainment venues.

As the U.S.' most populous territory, Puerto Rico's differential treatment in total healthcare programs creates gaps in the services we can provide our citizens.

While Congress passed legislation to increase Puerto Rico's Federal medical assistance percent, the FMAP in the Medicaid program from 55 percent up to 76 percent, that number has been allowed to lapse since the December 3 CR. This unanticipated reversion to a lower FMAP percentage has triggered severe consequences on the island, potentially causing newly enrolled Medicaid beneficiaries to lose their health coverage if this is not addressed.

As the February 18 government funding deadline approaches, I urge this subcommittee to work with your colleagues to set Puerto Rico's FMAP to at least 76 percent.

Sustained progress is made difficult by short-term or altogether insufficient funding. I mention this because it emphasizes the mountain we in Puerto Rico must climb when responding to any health crisis. We must lift ourselves to equal footing with states that have just as many American citizens to care for.

I assure you that with the Federal funding, Puerto Rico can prosper and continue to provide Americans a safe place to invest in, visit, and live.

Thank you, and I look forward to answering any questions you may have.

Chairman CLYBURN. Thank you, Governor.

The chair now recognizes Mayor Bowser.

STATEMENT OF MAYOR MURIEL BOWSER, DISTRICT OF COLUMBIA

Ms. BOWSER. Thank you, Mr. Chairman. And I want to thank the ranking member as well. And I am delighted to present Washington, D.C.'s experience with our COVID response. We have prepared a few slides to go through our response and recovery from COVID.

Are you able to see those?

And like my colleagues who have already presented, I am grateful to the outstanding team that has supported our response in the District, led by Dr. LaQuandra Nesbitt at D.C. Health, and Chris Rodriguez at D.C. HSEMA. They have led 37,000 D.C. government employees and grateful residents, businesses, and visitors in the District.

We are showing here our experience over the four waves of COVID and how we focused on six pillars of D.C.'s COVID response—we can advance the slide—to flatten the curve—we can go to the next slide—being the first charge to D.C. residents.

How we have focused on proven public health interventions throughout these four phases, including what the tools that have been at our disposal as chief executives, including from in early days relying on stay-at-home orders, masking, social distancing requirements and, of course, very timely community health guidance, travel advisories, and now vaccine requirements throughout several sectors in the city.

We have also been very focused on our testing and vaccination capability. I'm very proud. I call it the gold standard of testing that we've been able to set up throughout our pandemic response. Including on tapping into other first responders, we set up PCR testing at our firehouses early in the pandemic. We've also called on our libraries to be distribution points for our at-home testing and now our rapid test distribution.

We have conducted in our city over 800,000 tests that are walk-up testing sites. And since this surge in Omicron, we have distributed 329,000 free rapid tests to D.C. residents since December 2021.

We also are proud that D.C. residents are getting vaccinated, but we know we continue to have work to do, and so we are still coming up with new strategies to get more people vaxxed and boosted.

We also know that the work that we have done in our human services helped us bend the curve and save lives among our most vulnerable residents, including those who are experiencing homelessness, by setting up isolation and quarantine hotels and alternate accommodations for people who have high-risk health conditions.

And that work, I must say, has been aided by a very abled FEMA who worked hand-in-hand with us to make sure that those pretty significant expenditures would qualify for reimbursement.

Contact tracing has been a key part of the work that we have done. And we hired over 500 people to get that work done.

And we have also—next slide—been very focused as it has been key to our work with COVID at giving our residents direct, timely, accurate information and dispelling any misinformation that's out there. We have done that, front and center, with situational updates that I have delivered on a pretty frequent cadence. We have experienced significant views on our website of people wanting to follow the data and listen to the science so that they can make decisions that keep their families safe.

We're also very proud of the work that we did door-to-door. You will hear a number of us talk about how to deal with misinformation and give people—get people to make the decision to get vaccinated. And we did that by empowering a community Ambassador corps. So, neighbor-to-neighbor conversations to get people vaccinated. And we knocked over a quarter of a million doors to do exactly that.

Next slide.

We, of course, have been focused on making sure our healthcare system could support, of course, flattening the curve until the vaccines were available and distributed, and they were able to do that. And now, we are also working to make sure that the system can support this Omicron variant that we've experienced the last several weeks and anything else that we will see with COVID as the months go on.

We, as has been mentioned, established community COVID centers which are in retail spaces that will give D.C. Health some permanent space to work out of as we try to advance our vaccine and booster strategy. Residents will also be able to go to those locations for testing kits, masks, and to ask questions.

We have, throughout the pandemic, as I mentioned, also supported a huge testing program where we use firehouses and our libraries. And we've partnered with our faith communities, especially in hesitant communities throughout the District.

Gratefully, we did not have to use our 430 seven-bed alternate care site, but we did set that up in the case that we had an influx in the early days of the pandemic.

Next, we have been very focused on all of our social services as well, and that should be emphasized throughout this. No chief executive wants to shut down her city, send people home from work and school and away from their doctors and other trusted individuals that can help with nutrition, emergency commodities, and family assistance in a lot of areas.

We did—D.C. residents did—we lost over 1,200 of our residents to COVID. And many of them were able to take advantage of the funeral assistance offered by FEMA.

We also were very quick in getting our dollars out that came through the American Rescue Plan for rental assistance. Keeping people in housing during this emergency has been one of our top priorities. We distributed \$352 million in our STAY D.C. program, and more than 50,000 families received assistance.

So, as we talk about what the Federal Government will continue to be called on to do, we know that the economic crisis that COVID created is going to have some long tails, and so we want to make sure that we're paying attention to that.

And, next, I just mentioned the types of things that it takes for a government to pivot on a dime to transition to remote work, to make sure that our facilities are safe for children to return to school and workers to return. We were very proud that our government, 37,000 D.C. government employees returned to in-person work in July 2021.

You're going to, Mr. Chairman, hear us talk about another thing that the Federal Government can do, and that's get back to in-person work in the Nation's Capitol as well. And so we'll continue to talk about ways that Federal agencies can implement their return-to-work strategies.

We also were able, as I mentioned, to work hand-in-hand with you, Mr. Chairman, and other Members of the Congress to restore \$755 million in CARES Act funding that the District was shorted. And that is very important to how we were able to implement all the testing strategies and responses to COVID that we've been able to do.

Next slide.

And we also have some—we put this in the category of unexpected things that have happened as we were also responding to COVID. Our city was still running. All of the things that happened in cities were happening. We, of course, in the District had to deal with large-scale First Amendment protests in the summer of 2020 that consumed a lot of our emergency resources and police resources. We, of course, responded to support the United States Capitol Police on January 6 and supported the inauguration of 2021.

We continue to be in a posture where we can respond to these variants and any variants that come in the future. We should also

not forget that we had a very active hurricane season in 2020. So, I mention those things because the strain on our response, emergency response, first responders and police in the summer of 2020 was very significant.

We are—

Chairman CLYBURN. Mayor Bowser?

Ms. BOWSER. Yes.

Chairman CLYBURN. You've gone far beyond the five minutes.

Ms. BOWSER. OK. Let me just say, finally, Mr. Chairman, that the return to school has been a priority for us. We like others have dealt with Omicron. We saw, we think, our daily cases peak at the end of December or first part of January. And now we see all of our daily metrics improving from weekly case rate, daily case rate, hospitalizations, and all of the—and even our vaccination numbers improving as we speak.

Chairman CLYBURN. Well, thank you very much, Mayor Bowser.

Ms. BOWSER. Thank you.

Chairman CLYBURN. I feel that all those who have some questions, you may expand at that time.

It is now my pleasure to recognize Governor Ricketts. Governor Ricketts, you're recognized for five minutes.

STATEMENT OF GOVERNOR PETE RICKETTS, STATE OF NEBRASKA

Mr. RICKETTS. Thank you very much, Chairman Clyburn, Ranking Member Scalise, members of the committee. I appreciate the opportunity to be here today. It's an honor.

My name is Pete Ricketts, and I am the Governor of the state of Nebraska. And as has been pointed out already, the COVID virus and pandemic has changed the way we do business, where we learn, the way we go about our daily life. And through it all, Nebraskans have done the right thing, they've taken care of themselves and come through this strong.

In fact, one of the recent demonstrations of this was a Politico report that looked at the state pandemic response. And across four areas, including health, social well-being, education, and economy, Nebraska came out ranked No. 1 as far as overall best response to the pandemic.

And this really goes back to how it all started for us. We got some great advice early on from the officials at University of Nebraska Medical Center who told me, Hey, there's a virus. You can't stop it. You can only slow it down until you can buildup the resources to fight it, and you have to protect your hospital capacity.

So, along that line, we were one of the first states to focused on hospital capacity as driving all of our pandemic response. And it's been true from the moment this started back in March 2020 to today.

So, we put together a seven-point plan to be able to address the pandemic. The first started with create testing capacity. We set up TestNebraska, which more than doubled our testing capacity here in the state. We hired over a thousand contact tracers to supplement our local public health departments and their efforts. We purchased PPE for our hospitals and first responders and anybody else

who needed it. In fact, we were one of the first states or the first state to have 120 days' worth of PPE on supply.

We also created a quarantine space for folks who couldn't go home for whatever reason, using dormitory rooms or hotels so that we wouldn't have people spreading the virus.

We focused on at-risk communities, long-term care facilities, or meat processing, with additional attention to make sure in those congregate settings we were reducing the risk of spreading it.

And then, of course, we had our directed health measures which put restrictions in place early on, such as limiting restaurants to have only carryouts and so forth. In fact, part of that was to give them also tools, businesses tools to remain flexible like allowing for carry-on alcohol, which by the way was the most popular thing I've ever done as Governor was allow for that.

And then, of course, we've got the vaccines. And that's something we've been continuing to emphasize with citizens here in Nebraska is the importance of getting vaccines. In fact, the state of Nebraska just released a report last week that showed with our data that if you are unvaccinated and unboosted, you were 46 more times likely to be in the hospital, and if you were just vaccinated but unboosted, that you're 11 times more likely to be in the hospital. And that's part of our campaign of continuing to educate people. And that's been a key part of this throughout the whole thing is communication.

During the height of the pandemic, we had seven press conferences a week, two in Spanish. We translated our materials into multiple languages to be able to reach people. We had, as I mentioned, different groups that we worked with directly, whether it was folks who were bilingual to be able to help get the message out, community leaders, and so forth to really help Nebraskans understand how they can take care of each other and take care of themselves. And so that's been a big part of this is doing the communication.

And now, as the chairman pointed out, we've got Omicron, which is far more transmissible. And certainly as the chairman pointed out, our experience in Nebraska is also that it is not as virulent as the previous strains were. So, for example, even though on January 10 we saw a record amount of testing, over 28,000 tests, we saw that also with the record amount of cases, as I think some of my colleagues here have expressed, we're not seeing that turn into the same number of hospitalizations we would have expected, say, in November 2020.

In fact, we continue to monitor hospital capacity such that we know that, you know, emergency rooms, for example, typically operate at 95 to 97 percent capacity. And in Omaha, our large metropolitan area right now, our emergency rooms are operating about 90 percent capacity. I know Lincoln is a little over 80 percent.

So, again, we continue to focus on that hospital capacity to supply that hospital bed, that ICU bed, or that ventilator to anybody who needs it. We're also seeing from our health officials, who we stay in constant contact with, that, for example, the people who are in our ICU beds tend to be more Deltas—predominantly more Delta. And the folks who do have Omicron and are on, say, a ventilator are staying on those ventilators for a shorter period of time.

So, what are we doing here in the state of Nebraska with regards to this new surge of Omicron? Well, one of the things we're doing is to supplement the Federal administration's testing that they're sending out to everybody. We're also implementing our own at-home testing that includes video links with medical professionals. And then, as I think one of my previous colleagues mentioned, importantly it links back into our health systems so we can track those, should the person agree to do that. We want to make sure that with that at-home testing, we're capturing that data as well.

We're also doing something that we did during the pandemic, which is opening up more hospital capacity by finding spaces for people who are in the hospitals but don't need that acute level of care. Maybe they need a skilled nursing level of care, and they don't have a facility right now, or maybe they just need that rehabilitation discharge being home. So, we're looking to be able to expand that by about a hundred hospital beds in Omaha, Lincoln, and Grand Island to be able to create more capacity for our hospitals.

And then, of course, we're also looking to be able to not only increase the testing through the home kits, but using a vast public health plan with our private partners who are doing testing, to be able to help them be able to find the ability to be able to get the test done and turnaround quickly.

So, I see that I have already run out of time with regard to it. So, Chairman, I'll be respectful of the committee here. But happy to answer any questions. And, again, thank you very much for giving us the opportunity to talk about what we've done here in Nebraska to be able to help keep Nebraskans safe without lockdowns, mask mandates, vaccine passports.

We've asked Nebraskans to do the right thing. We've taking a balanced approach to be able to slow the spread of the virus, protect our hospital capacity, and let Nebraskans live a more normal life. And that's how we're going to continue to manage the pandemic in our state.

Thank you.

Chairman CLYBURN. Thank you very much, Governor.

Finally, we will hear from Governor Inslee.

Governor Inslee, you are recognized for five minutes.

STATEMENT OF GOVERNOR JAY INSLEE, STATE OF WASHINGTON

Mr. INSLEE. Thank you, Mr. Chairman.

It's a joy to be here. It's a joy to be with my old colleagues. It's a joy to see three members of the 103d Congress. You were rookies, now you're running America, so it's a joy to join you.

You know, our perspective, I think it's interesting, because we had the very first case on January 21, 2020. We had our first death in America, which was on February 29. And we started this with no template. We didn't get to, you know, cadge ideas from Colorado or anywhere else. We were the first. And we made some really early decisions that I think have served us well.

No. 1, we did decide to follow science and the data and our public health experts, and to be very vocal against the profoundly malicious efforts to not spread the truth about this vaccine that had been so damaging.

No. 2, we made a valued decision that saving lives was our first priority, and it should remain unwavering.

And third, we made the decision that the best way we could possibly reopen our economy is to knock down the virus.

Now the question is, did those strategies work? They worked big time. And I want to talk to you about that.

We believe that we saved perhaps 17,000 lives because of following these policies. I want to show you a graph that I think is instructive. If we can put up the COVID graph, if you will, please, on or screens. I look forward to seeing that, if you can get that up for us. I hope that that can come up fairly shortly. Are you guys seeing it, because I'm not.

Here we go. OK. So, we're looking at a graph. On the right, our deaths per 1,000 were about 133. We wish it was zero. But put that in perspective to other states, many of whom have not followed the measures that I just talked about. You'll see the national average is 256. That's in the gray bar. So, our death rate per 100,000 is just about half what the national average is.

But it gets more depressing than that. You look at some of the other states, working up to the left, where the furthest one on the left has almost, you know, three times the death rate. Think about that. And so when you look at this from a national perspective, if the Nation had succeeded the way Washington State has succeeded, perhaps 400,000 people would not have lost their lives. Think about that. That's almost the number of people we lost in World War II.

So, these measures that we have adopted have had profound success in saving lives. And I just want to talk to you about the things we've done that I believe have had success.

Let me start with masks. We believe—thank you, you can put the slide down, I think.

The most successful thing we've done is masks. They have been embraced throughout Washington. There has been very high compliance with some of our mask mandates. They have kept our businesses open. They're now keeping our schools open. And people have embraced it, and I'll tell you why.

People talk about freedom? I think Americans should have freedom not to be infected by their coworker, or infected by their student, their fellow student. That's a freedom. And my state has embraced that concept that has saved lives big time. We've made over 5 million masks just available in the last two weeks. They're readily available and people are using them.

Second issue, vaccinations. We're now at about 80 percent. This is pivotal because 80 percent of the people that are in our hospitals are the unvaccinated. This is a serious disease of the unvaccinated at this moment. And one of the things we've done has been very successful, which is we have increased vaccination rates amongst our state employees, our hospital workers, and our educational community by making it a condition of employment. That has increased our vaccination rate from 50 percent to 96 percent. Twenty-eight thousand people who are employees of mine are now protected who were not protected. And we only lost about three percent of our state employees as a result, and saved massive amount

of time off from these folks who otherwise would have been hospitalized.

Look, my DOT had 17,000 days lost due to COVID hospitalizations. We're saving people to keep them on the job. This has worked big time.

We're helping our economy. Now, some folks thought the things we proposed would hurt our economy. If you can put up the economy slide just for a moment. Some folks posited that the things we did of masking and vaccines would hurt our economy. I just want to show you what our economy is doing relative to the rest of the state—country. If you can just put up that economy slide. I hope you can shoot that one up there for us in due time.

This is significant. Our unemployment rate dipped about a percent. Compare this to some other states that took the position that perhaps they weren't willing to take some of these measures. You'll see that we have done very well. The USA average is three percent. Our economy has boomed relative to other places when we have done these things to keep this down.

Brief note on schools. Ninety-six percent, really about four percent of our schools are not in person right now. We've been very successful with our masking requirements. And we reordered our schools to go back to school in person in June, and this has worked very, very well.

Last comment on testing. We have increased our capacity. We do about 500,000 tests a week through our schools. And now we have—or in the next couple of days, we're going to have, I think, a unique ability to get your tests through Amazon. So, you'll be able to go online, and Amazon has helped us distribute these masks. We're moving forward on that.

Last comment of how you can help, besides sending money, which, of course, Governors always do, that's our bottom line. But I would make a note, and I'm following Governor Polis on this, we need nurses, we need mental health treatment in our schools for our kids. This is a big time need right now. I'm proposing a whole bunch in my budget. You can help where you can.

With that, look forward to your questions.

Chairman CLYBURN. Thank you very much, Governor.

Thank you so much to all of the witnesses today.

Now each member will have five minutes for questions, and the chair recognizes himself for five minutes.

I have one question for, that I would like a quick response from all of the Governors and the Mayor too, and that is this: Since we've been putting up charts—Governor Inslee you put up a couple of charts—I hope that we can get a chart that I have pertaining to the state of Washington. And this chart showed something that I wanted to bring everybody's attention to. It's clear. And this is from the state of Washington.

Among the unvaccinated, literally the numbers are clear as to what's happening with unvaccinated as opposed to the vaccinated. And that's a big problem for us. Now, though the deaths are less, hospitalizations, not as severe, but the problem is people are getting sick and they're filling up the hospitals. And hospitals are now complaining that it's going to be a problem.

These high hospitalizations are a problem for us. Now I want to know from you, Governor Inslee, why do you believe that the unvaccinated residents in the state of Washington continue to remain unvaccinated? What do you suggest? What can we do to deal with this issue?

And I'm going to come to you next, Governor Ricketts, and the rest of that. I just want to know what you think we can do.

Governor Inslee?

Mr. INSLEE. There we go. Yes. Well, the first thing we can do is make vaccination as easy and convenient as possible. We've done that with our max vaxx sites. We've opened up another one. And it's very important to get people boosted.

Before I leave here, I want to say, look, boosting is everything right now. It is so much more effective than just the first two shots. So, focus on the educational component of that, of letting people know the value of getting boosted.

Second, we can do some of the things for appropriate parts of our community to make this a job requirement. And as you've indicated, this has been very successful saving lives of people who are in the educational community. I believe that if you're a public servant, you shouldn't go around infecting the public. So, we decided our folks would be vaccinated to avoid that and keep you from getting sick so you couldn't work for the state.

And third, in healthcare, obviously, that's been successful as well. But there is an important point I want to talk, if I may, just a moment. I know this is a \$64,000 question: Why have about 30 percent of Americans not decided to get the vaccination right now? And I do tell you it is extremely frustrating to me to look at this fact. Of the top reddest counties compared to—areas compared to the top 10 blue areas in the state of Washington, you have a six time higher death rate, six time higher death rate because you're not getting vaccinated amongst people who share more of the red persuasion. And this is an enormous tragedy.

And we have to ask ourselves, why is there such a disparate difference between these two groups of people? And, unfortunately, it is because a lot of folks in the red camp have created an identity that in order to wear the red jacket, you shouldn't be vaccinated. And that is a persistent problem of identity. It's not lack of information. My folks have information coming out their ears.

It's an issue that the Republican Party has created an identity, unfortunately, that has bred a mistrust of science, a mistrust of governmental actions in this regard, and a sense that you can't be a good Republican if you get vaccinated. I think this is a tragedy in our country.

And I urge all my Republican colleagues to resist that. Shoot, I saw the Governor of Florida the other day didn't even want to admit he was boosted. He thought somehow that would make him a bad Republican. This is a tragedy. And it's this issue of identity we've got to get out of our teams and just help our people save their lives.

Chairman CLYBURN. Thank you, Jay.

I believe in equal time. I'm not one of those people who wants to get rid of equal time, so I'm going to give Governor Ricketts

equal time. And I ask the indulgence of the ranking member as I do.

Mr. RICKETTS. Well, thank you very much, Mr. Chairman.

You know, as I travel the state of Nebraska and talk to people why they're not vaccinated, the No. 1 thing they tell me is because they don't know who to believe. And I think one of the things that we all need to remember is that typically it takes 10 to 15 years to develop a vaccine. The previous record time to develop a vaccine was four years, and that was the 1960's and that was mumps. And I am very grateful that this only took eight years to develop under Operation Warp Speed—or, sorry, eight months to develop under Operation Warp Speed. But it also hasn't given the public the time to have this information disseminated and to be digested, which normally happens with other vaccines. So, I think that's one thing we've got to keep in mind.

I think we also have to keep in mind that there's been, even from the sources like the CDC, you know, different information coming out. Just start with masks. First, we weren't supposed to get masks for people and then we were supposed to get masks for people and so forth.

So, I think that it is one of those cases where we have to continue to be able to educate people. Again, that's one of the reasons why we released our report last week.

I think also one of the things at this point—you asked what more can we do to get people to get vaccinated. I think that really when it comes down to it, it's going to have to be that friend, family, neighbor, somebody close to the unvaccinated person who makes the case for why they should get vaccinated. I certainly continue to go out and tell people and make the case why they should get vaccinated. As I mentioned, providing the data for vaccinated and boosted versus unvaccinated to people so that they know the risks they're taking by not being vaccinated.

I personally tell people who've been—I've had people who tell me, I got the virus, I don't need to get vaccinated. I'm like, no, you still need to get vaccinated because it will help you build the antibodies to fight a virus in the future. So, we are going to have to engage people.

One of the things we've tried to do here at the state of Nebraska is find local people and run local ads. You know, we—people who have—you know, we recognize within the community, and talk about, for example, how severe COVID was for them, and how it knocked them down and so forth, sent them to the hospital, so that people they can hear locally and know will see that and say, oh, OK, that's a local person. I understand. Maybe I will go get vaccinated.

In fact, I'd say actually just a week or so ago, we had a record date for people who haven't been vaccinated getting their vaccine.

So, I do think that we have to continue to educate people. I think it's got to be local people.

I would disagree with Governor Inslee's characterization that this is a Republican Party thing. I think what we have to do if we really want to get past this is we have to get past the partisanship on this and have to focus on, you know, why are people are not doing it. And in my experience in Nebraska is because people still

have to have time to digest this information, and it really needs to be somebody locally telling them, hey, this is something important to help protect your health.

Chairman CLYBURN. Well, I thank you very much. I know my time is up.

I just want to say, as I go to the ranking member for his questions, I've watched over several days ago, as you know, the lead researcher for the Moderna was a relatively young African-American woman who was given credit for having come up with that vaccine. What was interesting to me listening to her when she talked about how quickly they were able to get the final product. They had been working on it for years, working on it for years. They didn't have press conferences every morning saying, we're going into the lab and do some research today. For years, they've been working on this, and they had things all lined up.

So, when they got the information from China and South Africa, they were able to do things rather quickly because they had been working for a decade. And people say it happened too quickly. It did not happen quickly. What happened quickly was the end result.

With that, I yield to the ranking member.

Mr. SCALISE. Thank you for that, Mr. Chairman.

And I know we've got a few of our former colleagues that are testifying.

I'd ask—Cathy McMorris Rodgers, who's the ranking member of the Energy and Commerce Committee, also from the state of Washington, asked if she could have a statement submitted into the record. So, Mr. Chairman, I'd ask unanimous consent if Congresswoman McMorris Rodgers' statement could be entered into the record as well?

Chairman CLYBURN. Without objection, so ordered.

Mr. SCALISE. Thank you.

I'll start with former colleague Jared Polis, Governor Polis. I appreciate you being here. I know I've watched, in your state of Colorado, you've talked about after the vaccine how that's helped alleviate some of the health crisis in Colorado. You had said that, quote: Public health officials don't get to tell people what to wear, meaning face masks; that's just not their job.

I know with your state, you've gotten rid of the mask mandate, no vaccination mandate statewide. How has that worked out in your state and, you know, continued to keep your state going and protect the health of your people?

Mr. POLIS. Yes. This is really a matter—thank you, Representative Scalise—of us having a lot more tools than we had in the early days of the pandemic. In the early days of the pandemic, there was no vaccine. There was not even widespread ability—availability of medical-grade masks. The few masks we had had to be used in the hospital setting. There were not effective treatments. Later on, steroids came, somewhat effective. But nothing like what we have now in terms of the monoclonal, the new drugs coming online.

So, it's a very different situation we were in than early 2020. And so it demands a different kind of response that employs all of the above, right? First and foremost, encouraging people to get vaccinated, all three doses. Incredibly important.

If I looked down for a moment while the others were speaking it was because a friend of mine has COVID. She's in her 70's, and I think she's only alive now because she was able to get vaccinated [inaudible].

Mr. SCALISE. And I know my time's limited. And, yes, we've all seen people who get COVID, as you mentioned, you know, your friend. I know a friend who's vaccinated who got COVID. You know, anybody who suggests that if you get vaccinated, you're not going to get it; only the people unvaccinated pass it on. That's not science, actually; that's misinformation. But I appreciate that.

Let me go to Governor Ricketts because—Governor Ricketts, first, for anybody to suggest that it's a political party spewing anti-vaccination information. Frankly, it was Joe Biden and Kamala Harris as candidates for President and Vice President who tried to put doubt on when Donald Trump was heading up Operation Warp Speed on what might come out of that. But it's not a political party that owns it, even though they did that.

I want to go to success rates. Look, Politico did the report I think you cited in your opening statements. They ranked every single state, all 50 states, on how they faired through COVID. And your state came out No. 1 as the best state to respond. Frankly, I think if we should be hearing from anybody about what to do, some Governors shut everything down. Some Governors have kept things open and mixed results. You've done both. You've kept things open and you've protected your people all combined better than anybody. You kept your schools open, helping those kids, millions of kids across this country whose lives are being destroyed because of that.

How did you do it so successfully? What can we replicate with other states who haven't done it as successfully, while keeping everything open?

Mr. RICKETTS. Yes, I think it gets back to, you know, I laid out that plan that we had, that seven-point plan. And it is—a lot of that plan also evolves around communication, just reaching out, as I mentioned, doing it in multiple languages, getting to different groups that would be more at risk, like long our-term care facilities. We had a plan from the University Nebraska Medical Center to address that. Meat processing plants. We had weekly calls for nearly three months with those facilities to talk about best practices, to change the way they were doing things, to slow the spread there.

We worked with our schools on what they could do, helping them all come up with plans for how they could get kids back in classrooms. I really want to credit our teachers who were double-planned sometimes, right, from the kids in the classrooms and the kids who still wanted to be remote.

So, we really—and then, of course, we looked at areas where we had folks who were going to come from a disadvantaged socioeconomic background and work with community health centers, for example, to make sure that folks had access to the testing and the contact tracing and the PPE and vaccines when they became available. But it was a lot of communication to be able to get that message out.

And then we focused on things such as, you know, keeping our mortality rate down. According to the Kaiser Family Foundation,

we were tied for the seventh lowest mortality rate of any state where people have gotten COVID, you know, among people who got COVID.

We won as best state for kids in classrooms. I think we were No. 6. Politico ranked us No. 4 as far as kids', you know, learning loss. We had almost no learning loss in Nebraska.

And, of course, with regard to, you know, protecting livelihoods, giving people the tools to be able to function in this new environment, giving them flexibility, whether it was waiving licensing restrictions or supervising restrictions or, you know, providing guidance to houses of worship of how they could still have services and so forth.

All those things allow people to have a more normal life. And that's what led—you know, for example, we've got the lowest unemployment rate not only in state history, but in the history of the United States. So, it really was striking this balance among all these things that allowed us to really address this.

And, frankly, it gets back to Nebraskans who, when we communicated out the right thing, they did the right thing. You know, over 90 percent of our seniors are vaccinated. That's where 80 percent of our fatalities come from. So, again, targeting the most at-risk communities is really one of the things that helped us be successful.

Mr. SCALISE. Thanks a lot for that.

Mr. Chairman, appreciate it. I yield back.

Chairman CLYBURN. Thank you, Mr. Scalise.

I'll now yield to Ms. Waters for five minutes of questions.

Ms. WATERS. Thank you very much, Mr. Clyburn. I thank you so much for this hearing. It's so important.

And let me thank all of our witnesses today for the hard work that they're doing to save lives. Our cities and our states with representatives like you have today literally have been doing the kind of work that not only saves lives, but it also helps us to understand what else we need do in order to be of assistance to them.

I am one that understands very thoroughly that resources make a difference to the degree you have the resources that you need to fight the fight, and in this case, it means masks. It means all of the testing materials that are needed. It means the vaccinations. To the degree that they have this, they can continue to do the kind of work that they're doing.

I am so worried, however, that this growing political movement by these anti-vaccine activists and pro-Trump Republicans, it's undermining their work. We find, I'm told, in some of the research that's done, that it is found that there's a huge correlation between belief in misinformation and being unvaccinated. This was said by a woman named Liz Hamel, who heads public opinion research for the Kaiser Family Foundation, a nonpartisan healthcare think tank.

Between conservative media and GOP politicians, many Republican voters are being pummeled with bad science about vaccines almost daily. Kaiser's polling found that 94 percent of Republicans think one or more false statements about COVID-19 and vaccines safely might be true. Over the past eight months, Hamel has

watched as Republican vaccination rates have fallen further and further behind the rest of Americans.

While Republicans tracked other groups in terms of vaccination rates earlier this year, Kaiser's research shows that now an unvaccinated person is three times as likely to lean Republican as they are to lean Democrat.

A new analysis by NPR suggests that Republicans are probably dying at a higher rate as a result. A nationwide comparison of 2020 Presidential election results in COVID-19 death rates since vaccines became available to all adults found that counties that voted heavily for Trump had nearly three times the COVID-19 mortality rate of those that went for Joe Biden. Those counties also had far lower vaccination rates. Counties that went heavily for Donald Trump have seen much lower vaccination rates and much higher death rates.

Now, to our witnesses here today, while you talk about some of the things that you're doing, you know, having some Ambassadors, volunteer people going out talking with folks, do you think that you can be more definitive?

For example, you have someone who is advising people—and I'm going to see if I can get his name—to drink their own urine. And so when you have this kind of misinformation that is constantly, you know, bombarding folks, it undermines all the work that you're doing.

Can you get more definitive? Can you describe better? Can you have in your ads, you know, real life information about people who are not vaccinated are dying at a later rate. Can you put that up and out as we should be thinking about how we should do it?

Let me go right to any one of our—Mr. Inslee, since you're from us and you've worked with us, you know what we try and do. What do you think about being tougher, more definitive, and using the words that need to be used in order to dissuade people from not getting vaccinated?

Mr. INSLEE. Well, let me—first, I want to congratulate Governor Ricketts. He's done some good things in Nebraska, congratulate him for some of his successes. But I do think there just is a sad reality we have to recognize, and that is that there has been a profoundly different approach to this whole pandemic, you know, based on whether you're red or blue. That's just the reality.

And when we started this, the defeated President continually belittled the importance of this, said it's going to be over by Easter. And I remember asking him for help early on in this pandemic. He said it wasn't his job to help the states. And now we've got a President I think who's really helping out every time we ask for help. And it started there.

But I just want to suggest that this is a larger problem than just COVID. The virus of deception about our organs of democracy, there's two viruses: one is a virus of COVID and one is falsity. And that falsity is not just about COVID. It's about who won the last election.

Listen, if you have one party telling their Members that you can't trust government enough to even decide who won the last election, it's pretty certain they're not going to trust government when government shares the truth about this virus and the effectiveness of

vaccines. And the sad truth is we have one party that has created the big lie certainly about who won the last election and significant mistruths for many—and I'm not counting Governor Ricketts this camp—but many of his colleagues have continued to belittle the effectiveness of these measures. And that's just a sad reality.

Now, how do we change that situation? We try to appeal to the better angels of their nature to knock it off and stop supporting and nominating candidates who want to continue to lie about basic truths in our democracy. That's the infection we have of willing to infect people with falsity. And we saw it on January 6—

Ms. WATERS. Yes.

Mr. INSLEE.—and we saw it every day when I can't get Republicans to get vaccinated. And by the way, in my state—unfortunately, I just have to share you this—in my state, there is a profound difference in the vaccination rates between the red and blue counties in my state. That's just a reality. And I can't get Republicans enough to respond to that. Maybe Governor Ricketts can convince them.

Chairman CLYBURN. Thank you, Governor.

Ms. WATERS. Thank you, Chairman.

Chairman CLYBURN. The gentlelady's time has expired.

Ms. WATERS. Thank you.

Chairman CLYBURN. The chair now recognizes Mr. Jordan for five minutes.

Mr. JORDAN. Thank you, Mr. Chairman.

It's good to see some of our former colleagues. I want to thank all our witnesses for being here.

I first want to go to what the chairman said in his opening statement a couple hours ago. He attacked Senator Johnson and Representative Gaetz about statements they had made. And then we just heard Governor Inslee say that government shares the truth. That is—I mean, think about what we have been told about this virus that turned out not to be true.

The President of the United States said we have a plan. The President of the United States said we would shut down the virus. Dr. Fauci and CDC and the government said it didn't start in the lab. They all said it wasn't gain-of-function research. They said, we'll never impose a mandate, but they did, so much so, it went to the Supreme Court and the Supreme Court struck it down.

They told us that the vaccinated can't get it. They told us that the vaccinated can't transmit it. They told us there's no such thing as natural immunity. The last thing you want to do is trust what these people have told us, because everything they've told us has turned out to be misleading and not accurate.

Governor Ricketts, are there more people vaccinated now than there were a year ago?

Mr. RICKETTS. Yes, absolutely. As I mentioned, we just had a record day for the number of people who have never been vaccinated to get vaccinated. So, it's a—

Mr. JORDAN. Are there more people who—nationwide, are there more COVID deaths this year than there were last year?

Mr. RICKETTS. You know, I have not tracked the COVID deaths. I heard earlier on a call there were more deaths this year than last

year, but I can't tell you. I've been focused on my state. I can't tell you.

Mr. JORDAN. Are there an uptick in cases, as we speak now, nationwide than compared to a year ago?

Mr. RICKETTS. Well, certainly in Nebraska, we've got an uptick in cases, absolutely.

Mr. JORDAN. Yes. There's an uptick everywhere. So, I think the simple question is, how can that be? I mean, if mask mandates and lockdowns work, then why didn't they work? I mean, we've seen all kinds of restrictions placed on the American people, all kinds of limits placed on their freedom. If those things all work, how can we have higher caseloads at a time when there are more people vaccinated and, unfortunately, more people have lost their lives this year than before?

Do you have a mask mandate on schools in your state, Governor Ricketts?

Mr. RICKETTS. No. We've never had a statewide mask mandate ever throughout the pandemic. Different school districts will choose to do mask mandates, but that is the—that is up to the local school districts. We've never done it at the state level.

Mr. JORDAN. You haven't mask mandated businesses in your state.

Mr. RICKETTS. No, we do not.

Mr. JORDAN. Do you have a vaccine passport mandate in your state, as many cities are now imposing on citizens?

Mr. RICKETTS. No, we do not.

Mr. JORDAN. And in your state, by just about any metrics and measure, I looked at some of this prior to the hearing, you've done very well in all kinds—I mean, one of the things I noticed is you've actually had more families move into your state over the time of the pandemic, which cannot be said for New York, New Jersey, California, and D.C., the hardest lockdown states in the country. They've actually seen families and individuals leave their state, move out of their state, and move to states where they actually had freedom.

So, you actually went up in people moving to your state. Is that right?

Mr. RICKETTS. Yes, we've certainly got anecdotal evidence to show that there are a lot of people who moved to Nebraska for the quality of life here.

Mr. JORDAN. Quality of life there. That's—I would just call it freedom and quality of life. It's a great state. I've been to your state as many of these other places where people are moving.

When COVID first happened, did you have some regulations you placed on your economy and on your—on the citizens early on like most of the country did when we didn't know a darn thing about this virus? Did you do that?

Mr. RICKETTS. Yes. Absolutely. So, it gets back to what I said earlier about slowing the spread of the virus so we could buildup the capacity and ultimately get the vaccines, all with the goal of protecting our hospital capacity. And as we built up that capacity and got the vaccines, we did not need to have those restrictions in place. So, we've loosened those up significantly, really taking almost all of them off in June.

And then with the staffing emergency, we do have some directed health measures, specifically around hospital capacity and staffing again, releasing the restrictions on occupational licensing and supervision requirements, that sort of thing, to give hospitals more capacity and more flexibility in managing their caseloads.

Mr. JORDAN. Well, I guess maybe one of the questions I asked too is when you—when you did have those restrictions early on in this—during the virus, did you follow, you as the leader of your state, did you follow the restrictions you had in place?

Mr. RICKETTS. Oh, yes, absolutely. I had to quarantine twice. Most recently, I was exposed and had to wear a mask for 10 days.

Mr. JORDAN. Yes. But this is—this is one of the things that dri—at least the people I talked to in the Fourth District of Ohio, one of the things that drives them crazy is this double standard. I mean, Mayor Bowser, she had a quarantine requirement in place and didn't follow it, because she had to go visit with Joe Biden after the election last year when she left the state and didn't follow. The very requirement she put on her citizens, she wouldn't follow. And time and time again we have seen elected officials, most often they seem to be from the other party, who won't follow the very restrictions they place on the people they're supposed to represent and the people who pay their salary, won't follow the very restrictions they put on those people.

So, it's—I'm glad that you—you did that.

Any idea—last question, Governor Ricketts, any idea how many people work at the CDC?

Mr. RICKETTS. I have no idea how many people work at the CDC.

Mr. JORDAN. Ten thousand people, 10,000 people work there. Any idea how many studies they've done on natural immunity at the CDC or, frankly, at the NIH?

Mr. RICKETTS. I'm not aware of any on natural immunity. In fact, I think we're the only major country in the world that does not recognize natural immunity.

Mr. JORDAN. Could you hazard a guess of why the NIH and CDC, with combined over 30,000 employees and an annual budget combined of over \$56 billion, why they wouldn't do a study on natural immunity? Any idea? Could you hazard a guess?

Mr. RICKETTS. I have no idea. I can only imagine they just were not told to do so.

Mr. JORDAN. Yes. OK.

With that, Mr. Chairman, I yield back.

Chairman CLYBURN. I thank the gentleman for yielding back.

The chair now recognizes Ms. Maloney for five minutes.

Ms. MALONEY. Thank you, Mr. Chairman. And I want to thank you for having this very important hearing.

And it is great to see three of my former colleagues here today. Congratulations on all the good work you're doing.

But I'm going to address my questions to Mayor Bowser. I have a special relationship with D.C., having spent so much time there. I would like to explore, Madam Mayor, how Republican efforts to block D.C.'s statehood could have possibly hampered the District's response to the coronavirus pandemic.

Throughout 2020, as the virus crisis took hold across the District and the country, D.C. residents and businesses received less than

half the amount of CARES Act relief funds they would have been entitled to as a state, depriving the District residents of roughly \$755 million in pandemic relief for a year. Thankfully, congressional Democrats, including myself and those of us on the Oversight Committee, worked with the Biden administration to retroactively restore this funding through the American Rescue Plan.

But that critical funding came a year late for the residents of the District. D.C. residents pay more in Federal taxes per capita than residents of any other state, and they have been disproportionately impacted by the pandemic and its outsized harm on communities of color.

So, Mayor Bowser, how did the delay in relief funding impact the District's ability to respond to the coronavirus pandemic?

Ms. BOWSER. Well, thank you, Representative Maloney. And thank you for your leadership and all of your support for the District.

And it was a huge distraction, first and foremost, \$755 million, three-quarters of a billion dollars is a lot of money for anybody, and it's especially a lot of money for us. For some reason we're yet to figure out, in the CARES Act, our state level funding, which we received for all matters of Federal funding, was limited. And we received \$755 million less than we should.

What we did in its place not to hamper our building up our capacity, as you've heard all of the Governors mention, we were able to tap into some of our reserves so that we could continue to advance our response. However, your efforts to get that money restored allowed us to maintain our very critical government operations and the emergency response.

Ms. MALONEY. Thank you.

Now, also D.C.'s lack of statehood creates additional barriers for its pandemic response efforts. For example, Governors in other states, including those with us today, have deployed members of their National Guard to support hospital staff and testing efforts during the recent Omicron surge. But as we know, D.C. does not have full authority over its National Guard and cannot activate them without approval from the Secretary of Defense.

My question, Mayor Bowser, is: How has the lack of statehood created unique hurdles for the District? And how has this undermined your efforts, D.C.'s response, to the coronavirus?

Ms. BOWSER. Thank you, Representative Maloney. It's true that calling the D.C. National Guard is kind of a misnomer. It's really the President's Guard. Unlike all of the 50 states, our Guard is basically under the command of the President of the United States.

When we use our Guard, I submit a request to the DOD to get that request met. In years past, that has been pretty pro forma and it's happened quickly. We saw, however, in the last four years, that those requests were delayed, sometimes limited, as with our request for support on January—on the events leading up to January the 6. They're also limited in the fact that we can't change them mid-mission, which, you know, circumstances change, as we saw on January the 6. And the Mayor of the District cannot direct those changes.

There have been proposals. Our Congresswoman has, you know, advanced legislation to change that. It's been supported in the Sen-

ate to change that. Unfortunately, that didn't get done this year, but it needs to get done.

Our National Guard, I had called them up to support the coronavirus efforts, and they were very helpful in setting up our testing. We have recently called for them to again to support testing in Omicron.

Ms. MALONEY. Well, also, Madam Mayor, over the recent holidays, Omicron drove cases and hospitalizations to new highs in D.C., one of the epicenters of the latest wave of the virus. And although the District's vaccination campaign has thankfully worked to reduce the rate of severe diseases and death compared to prior waves of the pandemic, our colleagues across the aisle have taken steps in recent weeks to try to impede these efforts to save lives.

Republicans have introduced no fewer than five bills in this Congress in an effort to undermine D.C.'s critical work to increase vaccinations among District residents. Madam Mayor, how do these efforts risk endangering your government's response and the health and safety of District residents?

Ms. BOWSER. Well, I think the whole point—

Chairman CLYBURN. Madam Mayor, cut it real short.

Ms. BOWSER. Yes.

I think the whole point of what we've been talking about is the Governors, the chief, and the mayor here know best for our states. And we know best for the District of Columbia what works. We're not all the same. We're urban, we're dense, and we have to have strategies in place that will keep our residents and our city safe. And is that is what we have advanced.

Ms. MALONEY. Thank you.

My time has expired. Thank you. I yield back. Thank you, Mr. Chairman.

Chairman CLYBURN. Thank you very much.

The chair now recognizes Ms. Miller-Meeks for five minutes.

Ms. MILLER-MEEKS. Thank you, Chair Clyburn.

And first off, I want to thank all of our witnesses for testifying before us today and sharing their experiences.

As we all know, the Trump administration under Operation Warp Speed developed three safe and effective vaccines. And as a physician, former director of public health, I can say that it's nothing short of miraculous and it was built on decades of research.

I also want to be abundantly clear, I am fully vaccinated. I've admitted the vaccine in vaccine clinics in all 24 of the counties in my district. And I've encouraged people, persuaded people to be vaccinated, talked with family members of people who ask for guidance in helping their family members to become vaccinated, and will continue to recommend to people to seek guidance from their healthcare providers or physicians about vaccination should they have hesitancy.

However, I don't stand for government mandates and political overreach into the healthcare decisions of individuals. I was pleased to see that the Supreme Court struck down the OSHA mandate, because—in regards to private employers because I felt that that was an unconstitutional overreach of OSHA.

Governor Ricketts, you—can you briefly discuss your states's participation in the lawsuit to stop the mandate?

Mr. RICKETTS. Yes, absolutely. So, again, as I've talked about on this—in the testimony here that, you know, I encouraged people to get the vaccines. And we wanted people to—you know, educate people about doing the right thing, but I also am opposed to the mandates. In fact, as I talk to people, again, who have not been vaccinated yet, one of the really detrimental things that, for example, the mandate on businesses had was there were a number of people who told me—again, this is all anecdotal evidence—but they told me that they were going to get vaccinated but now there is no way they were going to get vaccinated if the Governor was going to be telling them that they had to get vaccinated. So, I think that's one of the downsides when you try to push something.

And, of course, our state, my attorney general and myself, both agreed that trying to use OSHA and really jam, as I think even the chief of staff for the White House, to work around through this to use OSHA to, you know, push down these vaccines was really outside the law and very detrimental. And it could be used in so many bad ways in the future with an executive branch who then would take this and say, well, I've got a policy I want to enforce. I'm going to find an emergency to declare, and I'm going to tell OSHA to go push my policy through their regulations. That is something that I don't think Republican or Democrat that we want to see the executive branch having that kind of authority to without the—know, going to Congress asking for this kind of authority.

So, that's one of the reasons why our state was one of the states that was taking this to, you know, court because we felt that this was an overreach of the Federal Government and also set a really, really bad precedent for the future. Not—you know, set aside whether or not you think the vaccines are right or not, you're expanding the power of the executive branch hugely by allowing them to go around Congress to enforce this vaccine.

Ms. MILLER-MEEKS. And I thank you for that. And I think what your state and, you know, the other Governors have indicated from their states shows that the Federalist system has worked because different states have different makeups, different rural areas, different population areas, different densities, and so that approach did work.

The Supreme Court in ruling on the OSHA mandate said the right to refuse medical treatment could be overcome when society needs to curb the spread of a contagious epidemic. Vaccines should prevent transmission. As we saw in the Delta variant—and this was CDC, Dr. Walensky, this summer, with the Delta variant and from the Israel study, 45 percent of people would still transmit and have high—high viral loads. And Dr. Walensky said that people infected with Delta is indistinguishable from that—vaxx—unvaccinated people and what the vaccines can't do anymore is present—prevent transmission. We've especially seen this with the Omicron variant, that in the Omicron variant, highly transmissible, less ill.

So what—you know, in mandating a vaccine when there is no longer a public health benefit, i.e., we're not preventing transmission of the virus in the Omicron variant, and we may, in fact, if you read some of the literature on the Danish study that just

came out, that there is a negative effect with the vaccine lasting 30 minutes. We may, in fact, create more super variants.

So, I thank you for the job you did, Governor Reynolds

[sic]. And our state also did an admiral job. We know in schools that there is increased suicide, increased mental health problems, a detriment to learning, a detriment to not being able to participate, learning loss, school lunches. And I think—can you discuss your decision to allow families to decide what’s best for their students and your children in opening schools?

Mr. RICKETTS. Yes. Well, some are like—every state’s different and every school district is going to be different, so what we encouraged was I got together with the commissioner of education, who actually is not a cabinet member. He is in a separate elected state Board of Education in Nebraska, so they don’t report to me, but we work very closely to come out and set the expectation, in the summer of 2020, that we expected kids to be in classrooms, because we know that it’s not just about academic progression but also about, as you mentioned, physical health, mental health, nutrition, socialization. All those things are a benefit. And really worked with our school leaders to—the Department of Education published a book that they worked with us on as well to say here’s a roadmap for how you can open up your school.

And so that’s what we really did is allowed the school districts to make those decisions, and then, of course, encouraged parents to weigh in with their school boards with regard to that. But that’s really how we got to the point where I think one study or one group said that we were the sixth best state for kids in classrooms. As I mentioned, we came out fourth in the Politico study for learning loss. We had very little learning loss in Nebraska, because we did really place an emphasis to try and get those kids back in the classrooms.

Ms. MILLER-MEEKS. Thank you so much, Governor Ricketts.

And I know my time is up. Chair Clyburn, I just know Nebraska and I were

[inaudible].

Chairman CLYBURN. I understand. Thank you so much.

The chair now recognizes Ms. Velázquez for five minutes.

Ms. VELÁZQUEZ. Thank you, Mr. Chairman.

And it is great to see the many former colleagues on this call. Thank you so much for the great work that you’re doing in your respective states.

I would like to ask my first question to Governor Pierluisi. You announced that the American Rescue Plan funding will be used to invest in essential workers and domestic development initiatives. How impactful was this funding for these purposes? And can you please provide specific examples of how your office allocated and prioritized the disbursement of these funds?

Mr. RICKETTS. Yes. So, specifically when it comes to the American Rescue Plan Act—I think this question was addressed to me. Is that right?

Ms. VELÁZQUEZ. Governor, I relayed my question to Governor Pierluisi from Puerto Rico.

Mr. RICKETTS. Oh, I’m sorry. My apologies.

Ms. VELÁZQUEZ. OK.

Mr. PIERLUISI. I'll start, and if you want to followup, it'll be fine with me. I'll try to be brief.

It is great to see Congresswoman Velázquez participating at this hearing. She was born and raised in Puerto Rico, and she knows the challenges we face, as well as anybody in Puerto Rico.

Actually, the American Rescue Plan has been a blessing for us. We used it, for example, premium pay, hazard pay for workers, essential workers who were out there in the middle of this pandemic last year. I'm talking about, of course, the hospitals, the clinics, but also even restaurants, the entertainment industry, first responders and so on. All workers who were doing in—rendering in-person services while being exposed to this virus deserved this premium pay or hazard pay, and we did it.

We are now doing it still, because this Omicron variant has hit us quite hard. Puerto Rico did so well last year. We had mandates. We had business restrictions and capacity restrictions on businesses at various times during the year. Yet our economy grew, because we were a safe destination for doing business and for visiting us as tourists and so on.

Yet I have to admit, this has been a rough start this year, because the Omicron variant, as has been mentioned before, is very transmissible. And we're seeing—we've just seen case counts that—record case counts, record hospitalization rates. Finally now, it's starting to come down. But I just decided recently to give yet another premium pay to clinic workers at our hospitals and clinics, because we were lucky, Congresswoman, last year, our hospitals were never compromised. But this year, they're quite congested with COVID patients.

Last, I'll just say very quickly—

Ms. VELÁZQUEZ. Governor?

Mr. PIERLUISI. I'll keep quiet and I'll let you—

Ms. VELÁZQUEZ. I just have another question and my time is limited.

Mr. PIERLUISI. I know. I know.

Ms. VELÁZQUEZ. [Inaudible] You know, for the members of the committee to see how important the American Rescue Plan and the impact, the positive impact that it has played in Puerto Rico. And imagine where Puerto Rico would have been today if it had not been for the fact that the Trump—during the Trump year, he withheld disaster relief money appropriated by the Congress of the United States.

Governor, Puerto Rico established also the local Earned Income Tax Credit in 2019. And the American Rescue Plan provided a \$600 million supplement for the program. Can you please expand on how the supplemental funding for Puerto Rico's EITC will help strengthen its labor market and help reduce poverty?

Mr. PIERLUISI. Yes. That's the best anti-poverty program in the states. And we've never had a comparable program in Puerto Rico because of our limited resources. We never had access to the EITC. So, what Congress did, and it's great, Congress is basically funding now 75 percent of our local version of the EITC. This is going to give our workers up to about \$6,500, up to that amount, as an incentive to join the labor force, to increase our labor participation

rate, which has always lagged the one you have in the U.S. mainland.

So, it's going to start this April. When we file tax returns in Puerto Rico, our taxpayers will start getting this for the first time.

We also, as part of the American Rescue Plan, got fully included in the child tax credit program. Because, believe it or not, only families with three children or more had access to the child tax credits. Now, all families will. And that's another great help from the American Rescue Plan.

And so what I'll say to just close is that—and I was kind of mentioning it before, the booster is so important. One thing we did in Puerto Rico, Congresswoman Velázquez, is that science and medicine have been driving our government decisions. I have been relying on the medical and scientific community in Puerto Rico for my decisions. And that has allowed us to keep politics out of the way.

You know that we're very passionate about our politics in Puerto Rico. But since my decisions have been driven by science and medicine, that's why we've had a lot of support from the public at large, from the political class at large. And if I have any recommendation or suggestion for the mainland would be that one.

Ms. VELÁZQUEZ. Congressman—Governor, I went to Puerto Rico. I spent two weeks for the holidays. I didn't get Omicron. I came back to the United States. I went to Washington, DC, and I came back with Omicron here. So, even after being fully vaccinated.

So, thank you so much for the work that you are doing.

I yield back.

Chairman CLYBURN. Thank you very much. Thank you, Ms. Velázquez.

I don't see Ms. Malliotakis. Has she come back?

The chair now recognizes Mr. Foster for five minutes.

Mr. FOSTER. Thank you, Mr. Chair. And thank you to our witnesses.

You know, as a scientist, I find it sort of—well, I had a number of things that I was tempted to react to, but I found it absolutely remarkable to hear one of my colleagues claim that there was no public health benefit of vaccines.

You know, also, I'd like to point out that there's a pretty big difference between absolutely preventing transmission, which, of course, no vaccine ever does, compared to reducing transmission, which they unquestionably do. And I think that the—the fundamental reason why we seem to be talking back and forth past each other is that—is the question of whether or not a government of a country has a right to ask its citizens to take even a small risk or inconvenience for the greater good of its citizens, or whether this is simply viewed as an outrageous intrusion on individual freedom.

You know, my draft number was 321. And so—and Hanoi fell in 1973. And I—my number would have come up in 1974, so I was never asked to serve. But I had long discussions with my dad. I would have served. And when the—the soldiers who got drafted for World War II, they did not get to say, my body, my choice. You know, they were asked to take a risk—a significant risk to fight the Nazis. They were not allowed to say, well, I'm going to wait for more scientific data to see if it is safe to fight the Nazis or not.

They were asked to take—you know, take a risk and to do something for their country to keep their fellow citizens safe. And it seems as though, frankly, today's Republican Party has raised individual, not freedom, but selfishness to a level that it would be inconceivable to the greatest generation.

Anyway, so I just—maybe I can see if this—I had a question actually for Governor Inslee. When you were talking about what you viewed as the partisan tilt and you're seeing it even in the death rates in different—do you think that this is to the extent that it may actually have electoral implications downstream?

Mr. INSLEE. I'm sorry, Bill. I lost the last part of your question.

Mr. FOSTER. Do you think that when you look at the differential death rates in the counties, depending on the partisan lean of the counties, do you think this is large enough to have maybe differential, you know, effects on elections downstream when you just look at very close elections? That'd be an interesting analysis to do.

Mr. INSLEE. Well, here's the tragedy of this, and I do believe it is a tragedy. We have a disproportionate number of members of the Republican Party dying in my state. Now, one would think, if you're Republican, you'd really want to be aggressive to prevent losing your people. But we hear voices like Congressman Jordan's, who are continuing to spread disinformation, which is causing health jeopardizing to his people that are in his party. That's a real tragedy.

And then—and when other colleagues, frankly, like Governor Ricketts, who will stand up and try to share valid scientific information, people don't trust them because the members of that party has been telling people for 10 years, don't trust the government. So, that's the situation we're in.

What are the electoral consequences? I'm not sure that's relevant to this particular discussion, but we have to try and save everybody's life here. That's what I'm for.

Mr. FOSTER. Yes. OK. Let's see, there's been also some mention of the parts of the response that were Federalized, the part that were left to the states. Do any of you have any comments on things that the Federal Government should have taken a bigger role in, just particularly in relation to collecting data? Governor Polis?

Mr. POLIS. First of all, I think, you know, many of my fellow Governors, including myself, when the Federal Government can do it well, we welcome them to do it. And that's why I'm glad you're offering testing. We've been doing that for a couple months. We're glad somebody—once we see the Federal Government can do it right, we're happy to stop doing and fold that in. Same with masks.

The FEMA crews have been indispensable. Our state's used them during surges. The National Guard has been indispensable. We've used that during our surges. So, there have been key components where I just don't know where we would be at. It would be—not only would it have been much more fatal to members of the public in many states; it also would have been much more devastating to the economy without all those areas of Federal support.

Mr. FOSTER. Yes. Governor? Yes.

Mr. INSLEE. One of the things that is really important in the healthcare system is to have a robust scale of opportunities in the long-term care system. That's the one thing I might suggest we can

certainly use more dollars for. Because if you don't have enough places in your long-term care facility, you can't discharge people from your hospital. We're experiencing that problem, so we've been building up our long-term care facility.

But help from Congress to get more long-term care facility opportunities for people, this is pivotal for the healthcare hospital access that we now have shortages of.

Mr. FOSTER. OK. There appears—OK. Quickly, my time has actually expired.

Ms. BOWSER. I just wanted to say quickly, I think the Federal Government getting income in people's hands—

Chairman CLYBURN. Madam Mayor, I'm sorry, the time has expired.

Ms. BOWSER. OK.

Chairman CLYBURN. The chair now recognizes Mr. Raskin for five minutes.

Mr. RASKIN. Thank you, Mr. Chairman, and thanks for conducting this very important hearing.

One of the things we've learned during this grim period in our history is that propaganda works on a lot of people. So, misinformation and disinformation are actually undermining the public health. They promote vaccine hesitancy, they generate social discord, they've destroyed the cohesiveness of our public health efforts. And yet to this day, Members of Congress are spreading anti-public health propaganda.

Let's take a look at some of the examples, if you'd be kind enough to put it up on the screen.

Last month, Representative Gaetz said that, quote: The best vaccine we've found is Mother Nature's vaccine. It's contracting the virus.

Well, this is false and dangerous. The best vaccine we have is a vaccine. Yesterday, the CDC published a study which found that vaccination remains the safest strategy for averting COVID-19 infection, hospitalization, and death. So, his statement is like saying the best vaccine for polio or the German measles is contracting the disease.

Representative Boebert said: Biden has deployed his Needle Nazis to Mesa County.

This is a dangerous lie. It equates state, local, and Federal public health efforts with history's worst fascist dictatorship, a regime responsible for genocidal violence against millions of people. The analogy is an affront to millions of doctors, nurses, and medical personnel, and government workers on the front lines of the struggle to protect us against COVID. And it's an insult to the memory of millions of people slaughtered by the Nazis.

Representative Marjorie Taylor Greene told her supporters, quote: Biden is going to homes to push shots. Just say no.

This kind of propaganda and anti-public health advocacy has created dramatically higher vaccine hesitancy among Republicans than Democrats, and even contributed, as we heard from Governor Inslee, to the disproportionate rates of COVID-19 deaths among Republicans.

And, finally, as the Omicron variant was spreading, the House Judiciary Committee Republicans amplified false insinuations

about the effectiveness of booster shots, tweeting: If the booster shots work, why don't they work?

These are just a handful of numerous examples of politicians spreading dangerous misinformation and confusion.

Governor Polis, do you think that false statements like these have undermined vaccination efforts in your state? What have you done to combat them?

Mr. POLIS. Look, I think that everybody should look at the data and make factual statements. Obviously, we have free speech in our country, but we've seen the danger in the tunnels of misinformation that people will go down, spread through, often through social media; sometimes amplified by people in positions of power and authority.

I hope that everybody takes a hard look at the data and uses whatever soapbox they have, however large or small, to really use a fact-based approach to save lives and move past this pandemic.

Mr. RASKIN. And, Mayor Bowser, what would you say to fellow elected officials who continue to spread propaganda that discourages Americans from getting vaccinated or from wearing masks?

You got to unmute.

Ms. BOWSER. I think it's especially problematic, Congressman, because they themselves have been vaccinated and boosted and are enjoying the benefits of those vaccines. And they know better. And they also, probably more than most of their constituents, know of people who have suffered and died because of this virus.

Nobody should die in our hospitals attached to a ventilator and have to say goodbye to their families when there is a safe and effective vaccine. And we all need to be saying that.

We've heard it said that the vaccine should stop—public health has always said that the vaccine was effective against serious illness, in hospitalization, in death. That has always been the promise of the vaccine, and it is working.

Mr. RASKIN. Thank you.

Governor Inslee, about 75 percent of coronavirus deaths in your state since February 2021 have been among unvaccinated people. And a study conducted last year found that the highest rates of coronavirus death in Washington State were concentrated in the 15 most Republican counties, which is an alarming statistic.

How do you account for this dramatic divide, and what does it tell you about what we need to do?

Mr. INSLEE. Well, No. 1, you mentioned at the outset that propaganda works. Propaganda worked, you know, in the forties, but it works a hundred times more now because of the internet and the algorithms that we have and the ability of the internet to spread a lie. If a lie went 25 miles an hour two decades ago, it goes 250 miles an hour now. And we have seen the impact of that. Just some of the quotes you showed up are certain somebody made egregious things.

But, listen, we have a guy who's been appointed by the Republican Party to sit on the Subcommittee on the Coronavirus Crisis, Congressman Jordan. He's been given by the Republican Party a soapbox to talk about this, and he comes before this committee and spends his five minutes basically saying, you shouldn't trust science. You shouldn't trust the CDC. You shouldn't trust people

who tell you vaccine works. And that's what the Republican Party put up as their spokesperson.

We need the Republican Party to take some responsibility here and not put their Members, who are spreading this dangerous filth, to America. And I'm urging all Republicans in good faith to do that.

Mr. RASKIN. Thank you.

And, Mr. Chairman, we've got to stop inflaming people's misunderstandings with propaganda, with conspiracy theory. Let's invest in the health of all Americans.

Thank you for this hearing, and I yield back.

Chairman CLYBURN. Thank you, Mr. Raskin.

The chair recognizes Mr. Krishnamoorthi for five minutes.

Mr. KRISHNAMOORTHI. Thank you, Mr. Chair.

Governor Ricketts, you've been vaccinated, correct?

Mr. RICKETTS. Yes, I've been vaccinated and boosted.

Mr. KRISHNAMOORTHI. Excellent. And I presume that the reason that you were vaccinated and boosted is because you believe in the vaccines, right?

Mr. RICKETTS. That is correct.

Mr. KRISHNAMOORTHI. Now, President Trump recently said, according to The Hill, that elected officials and politicians should disclose that they received a vaccine and booster. And I agree with that sentiment too. And I'm glad that you've publicly stated your vaccination status.

I want to turn to another subject. On June 18, 2020, according to the Omaha Herald World, you told local government officials that they won't get Federal coronavirus relief funding if they require individuals to wear face masks in government buildings.

Now, Omaha, the capital—I'm sorry. Omaha, the largest city in Nebraska, has a mask mandate, including in buildings, and it renewed that mask mandate last Wednesday.

Have you withheld any coronavirus Federal funding from Omaha?

Mr. RICKETTS. So, with regard to that, specifically, actually, Omaha let their mask mandate that passed by city ordinance expire. The county health official has tried to implement a mask mandate illegally, and we're actually going to court over this one.

Mr. KRISHNAMOORTHI. But have you withheld any coronavirus funding from either the county or the city?

Mr. RICKETTS. No, I have not.

Mr. KRISHNAMOORTHI. OK. And how about Nebraska Medicine? Both Nebraska Medicine and the University of Nebraska Medical Center both have mask mandates. Have you withheld any Federal coronavirus funding from either of those two entities?

Mr. RICKETTS. No. And getting back to Omaha as well, the difference in the Omaha one that they did, they also exempted government services from the mask mandate as well. So, again, they were compliant with what I asked, which is don't prohibit people from getting government services because of the mask mandate.

Mr. KRISHNAMOORTHI. No. But in your pronouncement, you said wearing a mask in a Federal Government—I'm sorry—in a government building would be enough to trigger your not giving them relief funding that was provided to you by the Federal Government. Now, has that—

Mr. RICKETTS. Right.

[Crosstalk]

Mr. KRISHNAMOORTHY. Has there been any entity—has there been any entity in Nebraska that did not receive Federal coronavirus relief funding because of your policy that you put in place?

Mr. RICKETTS. No.

Mr. KRISHNAMOORTHY. OK. So, that was just political rhetoric. I get it. Now, in—

Mr. RICKETTS. No. It was because they—no, it wasn't political rhetoric—

Mr. KRISHNAMOORTHY [continuing]. response to the—

Mr. RICKETTS.—the government services, was what I requested.

Mr. KRISHNAMOORTHY. In response to the President's vaccine mandate—let me repeat it. A tweet that you put out on September 10, 2021, at 11:10 a.m., you said—in response to the President's mandate, you said: Vaccine mandate. President Biden has forgotten we live in America, quote/unquote.

Quote: He thinks we live in the Soviet Union.

Now, Governor Ricketts, I just want to ask you this question: You don't really believe that President Biden has forgotten we live in America, do you?

Mr. RICKETTS. No. I believe that he forgot that the Federal—the executive branch does not have the authority to issue that—

Mr. KRISHNAMOORTHY. No. I'm just asking you—

Mr. RICKETTS.—which is consistent with what happens in an authoritarian regime.

Mr. KRISHNAMOORTHY [continuing]. you don't believe—you talked about a lot of heated political rhetoric. You don't stand by those statements that you made in that tweet, do you?

Mr. RICKETTS. The point of the tweet was to say that the executive branch does not have the authority to issue a vaccine mandate such as he was doing, similar to what happens in authoritarian—

Mr. KRISHNAMOORTHY. I'm just reading your tweet, Governor, and you said: He thinks we live in the Soviet Union.

That's what you said in that tweet. You don't really believe that he thinks we live in the Soviet Union, do you?

Mr. RICKETTS. As we all know on this, we've heard plenty of it today, there's plenty of political rhetoric to go by.

Mr. KRISHNAMOORTHY. And you are one of the primary sources of this heated political rhetoric.

Now, sir, you are against government-mandated vaccine mandates, correct?

Mr. RICKETTS. That is correct.

Mr. KRISHNAMOORTHY. And you are also against employer-mandated vaccines?

Mr. RICKETTS. No. Actually, I believe employers have the ability to do that, but I discourage it.

Mr. KRISHNAMOORTHY. You discourage it.

Now, sir, you and I share something in common. We are Cubs fans. Did you know that?

Mr. RICKETTS. I did not know that. Thank you for being a fan.

Mr. KRISHNAMOORTHY. And you are a part owner of the Chicago Cubs. Isn't that right?

Mr. RICKETTS. Well, no, not me personally, but a family trust, yes.

Mr. KRISHNAMOORTHY. I understand a family trust owns the Chicago Cubs that you benefit from. Now, you know that the Chicago Cubs have mandated vaccines for their employees, right?

Mr. RICKETTS. Actually, I'm no longer a part of the management of the Cubs, so I was not aware that they had actually mandated vaccines. But as I mentioned before.

Mr. KRISHNAMOORTHY. Well, hold on. Hold on a second. Hold on a second, Governor. The Ricketts family owns the Chicago Cubs. You benefit from the ownership of the Chicago Cubs. The Chicago Cubs requires vaccines and they require masks indoors. I know. I'm a lifelong Cubs fan, and my friends and family all know that you wear a mask when you go to a Chicago Cubs-owned facility, a Ricketts-owned facility.

Thank you, and I yield back.

Chairman CLYBURN. I thank the gentleman for yielding back.

Unless I have missed someone, I think that all attendees have asked their questions, and we've come to the closing.

And I don't see the ranking member. If he's here, I'm going to yield to him.

I don't see him.

So, let me thank all of the witnesses for being here today.

And before we close, I want to enter into the record the letters to the committee which were received from Governor Kate Brown of Oregon and Governor Kathy Hochul of New York. I ask unanimous consent that these letters be entered into the official hearing record. So ordered.

Chairman CLYBURN. I want to once again thank Governor Inslee, Governor Polis, Governor Pierluisi, Governor Ricketts, and Mayor Bowser for testifying before the select subcommittee today. We appreciate your insight, your expertise, and your advice on how Governors are responding to the Omicron variant.

I applaud the Biden-Harris administration for its leadership in responding to the Omicron variant and working hand-in-hand with states to support their pandemic response efforts. Among other steps, the Biden-Harris administration has worked with our states to add 10,000 more vaccination sites, to open additional testing sites, to deploy medical personnel, to help healthcare providers, to order and administer millions more doses of coronavirus treatments, and to make available hundreds of millions of high-quality N95 masks and rapid at-home tests to Americans for free, starting later this month. We are in a better position today than we were a year ago.

As this chart shows, the Biden administration has increased the number of daily tests performed from 1.7 million per day in January 2021 to more than 11.7 million per day in January 2022, a number that is expected to continue rising.

The Biden administration has increased the number of free testing sites around the country eightfold, and worked with the private sector to get 375 million at-home rapid tests on the market this month when there will be zero available just a year ago.

The Biden administration has presided over a historic vaccination campaign that administered more than 500 million vaccines

and booster doses over the last year, helping get more than 73 million of adults fully vaccinated.

Our vaccines remain the most powerful tools we have to fight all variants of the coronavirus. Vaccines are free and readily available at more than 90,000 convenient locations across the country.

I encourage everyone to get vaccinated immediately and get their boosters as soon as they are eligible.

All of these steps have helped to reopen more than 95 percent of schools and our economy safely, and will remain critical to our effort to quickly and decisively combat the Omicron variant.

I look forward to working together with leaders at all levels, including and especially today's witnesses, as we continue this progress.

With that, without objection, all members will have five legislative days within which to submit additional written questions for the witnesses to the chair which will be forwarded to the witnesses for their response.

This hearing is adjourned.

[Whereupon, at 5:26 p.m., the subcommittee was adjourned.]

