The Honorable Robert R. Redfield, MD
Director
Centers for Disease Control and Prevention
1600 Clifton Road, Atlanta, GA 30329

The Honorable Stephen M. Hahn, MD
Commissioner
Food and Drug Administration
10903 New Hampshire Ave
Silver Spring, MD 20993-0002

Dear Director Redfield and Commissioner Hahn:

It is important for public health officials and policy makers to have a full understanding of testing capacity in order to appropriately plan. More importantly, for the United States economy to return to full operation, it will be necessary for localities to have sufficient testing capacity to trust and allow for free movement of people for those clear of COVID-19. I respectfully request that the administration provide daily, comprehensive updates on testing capacity for each State, Territory, and the District of Columbia.

Our public health labs, universities, hospitals, and commercial labs are all engaging on being responsive to this pandemic and building up testing infrastructure. However, it has been near impossible to get comprehensive data on how many samples or patients can be served. Offices have heard different answers from states and from the FDA about state testing capacity. There continue to be references for testing kits being shipped, but shipping means nothing when waiting for the kit. The only value is in on-demand testing capacity. Repeatedly, Congress has heard overestimations from this administration on testing capacity or the ability to get tested. We need easy-to-access, factual data we can work with.

I recognize that private labs will play an important role in scaling up our national capacity. But private labs are not restricted to state borders. Moreover, our ability to know how many patients are being served by private lab testing and how much capacity they have and for which areas is not being shared with us. I understand that private labs are now reporting, but we do not see that data nor do we see how many negative tests they have run.

I want our country to be able to match South Korea’s ease and capacity for testing. I am deeply concerned by reports that universities’ or other qualified entities’ ability to help with producing tests has been slowed down by FDA or that the Virginia Department of Health can only put in an order for a maximum number of two testing kits. I also hold deep concerns that our government
did not use World Health Organization test kits and has not reached out to South Korea for test capacity help while we wait to get our testing infrastructure strong enough to maintain population surveillance.

We need leadership from the CDC and FDA to publish daily testing capacity updates in terms of the number of patients or samples that our public health labs, university labs, hospital labs, and private labs have available, as well as the amount already used. I look forward to not only your response, but a reflection of my request either in daily emails to Congress or in daily updates on the CDC’s or FDA’s website.

Sincerely,

Donald S. Beyer Jr.
Member of Congress