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PAHPRA-Supply Chain Principles

Public health events—both natural and manmade—occur regularly. Ensuring medical products are available when and where they are needed most is highly critical to any emergency or pandemic response. The Pandemic and All Hazards Preparedness Reauthorization Act (PAHPRA) must include provisions to support a more elastic healthcare supply chain so medical products are available during a public health event. The healthcare supply chain is further enhanced through a strong public and private partnership as all entities with a role in preparedness depend on the same supply chain. We urge Congress to include the following policy principals in the PAHPRA Reauthorization.

#1. Formalize public/private partnerships to ensure continuity during times of disaster.

"Ten years ago, incidents like the September 11, 2001 attacks on our country, the deadly anthrax letters, Hurricane Katrina, and the potential for an influenza pandemic all demanded that we improve the federal government's ability to assist state and local health authorities and mobilize the private sector in responding to future events. The need now is as real and urgent as it was then."

- Dr. Robert Kadlec, M.D., ASPR

2017 Declared Public Health Emergencies:

- Zika
- Hurricane Harvey
- Hurricane Irma
- Hurricane Maria
- Hurricane Nate
- California Wildfires

"Natural disasters caused $306 billion in total damage in 2017, with 16 events that caused more than $1 billion in damage each"

Washington Post, January 8, 2018

Medical products are critical to any emergency or pandemic response. The healthcare supply chain must be more elastic in order to adequately address demand during a public health crisis. A model has been developed with supply chain leaders and the Strategic National Stockpile (SNS) that needs to be operationalized so a commercial "cushion" of key products can be maintained and ready to be deployed when and where needed. For example, a core group of products are needed for virtually all responses including:

Infection Prevention and Personal Protective Equipment (PPE): The first step to containing an outbreak or responding to a biological event is to protect healthcare providers and first responders. The medical supply chain is critical to the supply of respirators, face shields, hoods, impermeable gowns, gloves and other protective equipment.

Diagnostics: Diagnosing a disease is difficult, as Zika has demonstrated, with 4 out of 5 people not having symptoms. However, public health officials need to understand what populations have been infected and rapid point-of-care testing such as flu-tests are critical to this effort.

Devices to administer therapies: Planning large vaccinations/dispensing campaigns to protect the public must include products such as gloves and needles and syringes which are needed to deliver many medications successfully.

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#2. Create a "national contingency healthcare system" which would allow the supply chain to divert needed product where it is needed most.

> *"We have an opportunity to better integrate Emergency Medical Services, the 'tip of the spear' of our national medical response into these efforts and to increase effective coordination across HHS and the federal departments, such as the Department of Defense and the Department of Veterans Affairs, to support state and local responders."*
>
> -Dr. Robert Kadlec, M.D., ASPR

During the Ebola outbreak in 2014, the CDC worked with state and local emergency response stakeholders to create a 3-tier hospital system. Acute care facilities were designated as either "Frontline Healthcare Facilities," "Ebola Assessment Hospitals," or "Ebola Treatment Centers." The CDC also provided guidance on the amount and type of PPE needed for each tier. Building and formalizing this approach would allow the supply chain to redirect critical products to the facilities and patients who need them most.

#3. Develop transparent communication pathways for both preparedness and response phases between public and private partners.

> *"I am particularly interested in finding ways to promote and implement effective partnerships between government and private industry as a way to do our work better and faster. This is certainly a strategy that government needs to continue to pursue during the next five years."*
>
> -Greg Burrell, Director, SNS

All stakeholders with a role in preparedness and response depend on one healthcare supply chain. Thus, all stakeholders including federal, state, and local health officials, providers, and the healthcare supply chain must consistently communicate capabilities and expectations in order to understand individual roles and quickly and adequately respond to emergencies.

#4. Create Emergency Response Fund and biannual appropriations for preparedness as stable funding is essential for training, planning, and stockpiling

> *"First and foremost [on the CDC to-do list] is the establishment of a rapid-response fund by Congress. I think there's good bipartisan support for this, but CDC needs to be able to move quickly when there's an emergency. FEMA [the Federal Emergency Management Agency] doesn't go to Congress every time there's an earthquake or a hurricane and say 'We need money.'…*
>
> *A rapid-response fund would allow us to do the equivalent of stopping an earthquake."*
>
> -Tom Frieden, former director, CDC

Public health emergency and response programs rely on government funding to

- ✓ Conduct exercises
- ✓ Respond quickly to public health emergencies and disasters
- ✓ Provide support to ensure healthcare system preparedness

Creating a multi-year funding and emergency contingency fund would allow faster response to aid those affected by disasters and provide stability during the full extent of recovery.

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