

116TH CONGRESS
2D SESSION

H. R. 8555

To direct the Secretary of Health and Human Services to submit to Congress a weekly report on COVID–19 vaccine distribution, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

OCTOBER 9, 2020

Ms. CRAIG introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To direct the Secretary of Health and Human Services to submit to Congress a weekly report on COVID–19 vaccine distribution, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Vaccine Fairness Act
5 of 2020”.

6 **SEC. 2. COVID–19 VACCINE DISTRIBUTION REPORT.**

7 (a) IN GENERAL.—Not later than 7 days after the
8 date on which the Federal Government begins distributing
9 COVID–19 vaccines for administration to the public, and
10 every 7 days thereafter, the Secretary of Health and

1 Human Services (in this section referred to as the “Sec-
2 retary”), in consultation with the Secretary of Defense,
3 shall submit to Congress a report on the effectiveness of
4 efforts relating to the distribution of COVID–19 vaccines
5 to the public.

6 (b) CONTENTS OF REPORT.—Each report submitted
7 under subsection (a) shall include, with respect to the 7-
8 day period preceding the date on which such report is sub-
9 mitted, the following:

10 (1) The number of doses of COVID–19 vaccines
11 distributed for administration to the public.

12 (2) A description of any substantial purchase of
13 COVID–19 vaccines by a Federal Government agen-
14 cy or private organization.

15 (3) The number of doses of COVID–19 vaccines
16 that were distributed to State or local health depart-
17 ments.

18 (4) A description of the progress made in dis-
19 tributing COVID–19 vaccines to the following:

20 (A) High-risk and other priority groups,
21 including—

22 (i) racial and ethnic minorities;

23 (ii) individuals who are pregnant or
24 breastfeeding;

25 (iii) individuals with disabilities;

- 1 (iv) homeless individuals;
- 2 (v) newly resettled refugees; and
- 3 (vi) individuals in rural communities.

4 (B) High-risk facilities, including—

- 5 (i) long-term care facilities;
- 6 (ii) group homes; and
- 7 (iii) jails and prisons.

8 (5) A description of any deviations from Fed-
9 eral distribution plans, including issues relating to
10 the following:

11 (A) Sites administering large numbers of
12 COVID–19 vaccines, such as pharmacy chain
13 stores, schools, and primary health care pro-
14 viders.

15 (B) Tracking procedures for COVID–19
16 vaccines, particularly in areas of greatest need.

17 (C) Outreach to health care providers and
18 the public about the availability, benefits, safe-
19 ty, contraindications, and costs of receiving
20 COVID–19 vaccines.

21 (D) Outreach to health care providers re-
22 garding the responsibilities of such providers to
23 track vaccine administration and monitor ad-
24 verse events.

1 (E) Uniform record keeping relating to the
2 administration of COVID–19 vaccines (includ-
3 ing Federal support for State and local immuni-
4 zation information systems).

5 (F) Overuse or gaps in treatment.

6 (c) BRIEFINGS.—On each date on which the Sec-
7 retary submits to Congress a report under subsection (a),
8 the Secretary shall be available to brief Congress on the
9 contents of such report.

10 (d) TERMINATION.—This section shall cease to have
11 effect on the date that is 18 months after the date on
12 which the initial report is submitted to Congress under
13 subsection (a).

14 (e) STATE DEFINED.—In this section, the term
15 “State” means each of the several States, the District of
16 Columbia, each commonwealth, territory, or possession of
17 the United States, and each federally recognized Indian
18 Tribe.

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