Congress of the United States Washington, DC 20515

September 22nd, 2021

The Honorable Jay Inslee Governor of Washington State 416 14th Avenue Southwest Olympia, Washington 98504

Dear Governor Inslee,

Monoclonal antibodies have proven to be an effective treatment for patients infected with COVID-19. In fact, monoclonal antibody treatments have been shown to reduce the risk of hospitalization by up to 70% for unvaccinated COVID patients at risk of developing severe disease. While four different monoclonal antibody treatments have been granted Emergency Use Authorization by the Food and Drug Administration (FDA), there is an overwhelming lack of availability for, and adoption of, these treatments in central Washington.

In his newly unveiled COVID-19 action plan, President Biden called for an increase of monoclonal antibody treatment availability, boosting the shipment of said treatments to states by 50%. That plan also includes expanding the role of COVID-19 surge response teams to now include monoclonal antibody response teams, designed to assist hospitals and healthcare systems in administering monoclonal antibody treatments to patients. To greater expand the reach of these treatments, COVID-19 Surge Response Teams have and will continue to conduct in-person technical assistance and virtual trainings for physicians and staff to speed up the administration of monoclonal antibody treatments.

One of the biggest challenges in standing up a monoclonal antibody clinic is the fact that all the patients would be known COVID-positive. This drug is most effective when given early in the course of the disease, when patients are highly infectious. They would have to receive the treatment in an area separate from uninfected patients.

According to data from the U.S. Department of Health and Human Services, monoclonal antibody treatments have been distributed to only 30 health centers across Washington state. At the same time, as of September 9th, the statewide ICU occupancy of COVID-19 patients was over 34%. I continue to hear from hospital CEOs, doctors, nurses, and support staff that they are overwhelmed with COVID-19 cases, mostly as a result of the spread of the Delta variant.

While some hospitals have been able to administer monoclonal antibody treatments to patients, I have heard from other providers that while they stand willing to participate, they are lacking proper state support to do so. I have also heard from hospitals and other providers who wish to administer the treatments via injection rather than via infusion. The infusion method is time,

resource, and labor intensive – three things that our hospitals simply do not have enough of given the Delta variant related influx. Further, many providers outside the hospital setting are simply not equipped to provide infusions but could provide injections. The injection method of monoclonal antibody treatment is as effective, allows more providers to participate, and saves providers valuable time and resources.

Since Operation Warp Speed initiated a rapid development of vaccines to prevent COVID-19, I have been an advocate for vaccination and encouraged my constituents, in consultation with their healthcare providers, to get vaccinated. However, the surge of the Delta variant has continued to inundate our rural hospital systems, overwhelming doctors, nurses, and support staff. Across the state, hospitals beds are full, and the hospitals need to utilize *all* FDA-approved treatment options in order to help people recover and ease the strain that our hospitals are facing.

Monoclonal antibody therapeutic treatments are currently available at over 30 hospitals throughout Washington. While I understand the method of allocation is now again being directed by the federal government, there are important steps the state can take to ensure the availability of these lifesaving therapeutics in Washington State and to have them administered in non-inpatient facilities to lessen the burden on our hospitals. However, there are challenges that our area providers face in administering these treatments to patients. On behalf of my constituents, I ask the following questions:

- 1. Why has the Washington State Department of Health not yet provided monoclonal antibody subcutaneous injections to some local providers as a form of treatment, and what plans does the Department have to meet the demands of these providers?
- 2. How is the Washington State Department of Health supporting, equipping and standing up local pharmacies and clinics with the necessary supplies and staff to provide this service to our communities, including those in remote areas?
- 3. How is the Washington State Department of Health enabling providers such as home health agencies, nursing homes, and freestanding clinics or infusion centers to be able to administer these treatments to our most vulnerable population?
- 4. Will the Washington State Department of Health issue standing orders for treatment in order to expedite access to monoclonal antibodies?
- 5. Given the Biden Administration's renewed allocation strategy through the federal government, which may limit our state's access to monoclonal supplies, what efforts have you taken with the Administration to prioritize Washington State and ensure our hospitals receive said treatments in a timely fashion?
- 6. How do you plan to inform Washingtonians of the availability of monoclonal antibody treatments, and what resources will you make available to them in order for them to make informed decisions about their health?

I urge you to prioritize and publicly acknowledge the success and the availability of monoclonal antibody therapy as a tool that has the ability to save lives and reduce the number of breakthrough COVID-19 cases that are currently overwhelming our healthcare system.

Further, to whatever extent possible, I encourage you to join me in urging the Biden Administration to prioritize monoclonal antibody treatments in rural communities in our region, which is facing the highest numbers of documented COVID-19 cases in the state, to help them address their immediate needs.

As our hospitals and healthcare systems continue their fight against COVID-19, I urge you to prioritize this safe and effective method of treatment and equip our state with the resources possible to administer it to patients in need. It is crucial that Washingtonians have accessibility to this life-saving therapy, and I look forward to working with you to help them overcome this challenge.

Sincerely,

Dan Newhouse

Member of Congress