# <sup>116TH CONGRESS</sup> 2D SESSION S. 3738

AUTHENTICATED U.S. GOVERNMENT INFORMATION

To require the Secretary of Health and Human Services to provide updated information about COVID-19 testing to the public, and for other purposes.

### IN THE SENATE OF THE UNITED STATES

#### MAY 14, 2020

Ms. SMITH (for herself, Ms. WARREN, Mr. BLUMENTHAL, Mrs. GILLIBRAND, Mrs. SHAHEEN, Mr. MARKEY, Mr. MERKLEY, Mr. PETERS, Ms. HARRIS, Ms. KLOBUCHAR, Mrs. MURRAY, and Ms. HIRONO) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

# A BILL

- To require the Secretary of Health and Human Services to provide updated information about COVID-19 testing to the public, 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 "COVID-19 Testing5 Inventory Act".

3 The Secretary of Health and Human Services, in consultation with the Administrator of the Federal Emer-4 5 gency Management Agency, the Commissioner of Food and Drugs, the Director of the Indian Health Service, and 6 7 other Federal agencies, as appropriate, shall develop a 8 public-facing inventory, which shall be made available on 9 a single internet website, that provides real-time data and 10 information on in vitro diagnostic tests (as defined in section 809.3 of title 21, Code of Federal Regulations (or 11 12 successor regulations)), for the detection of SARS-CoV-13 2 or the diagnosis of the virus that causes COVID-19, or for the detection of antibodies from COVID-19 (re-14 ferred to in this section as "COVID-19 diagnostic tests"), 15 16 including—

17 (1) the number and type of COVID-19 diag18 nostic tests that are available for use in each State,
19 territory, or Indian Tribe, by—

20 (A) county;
21 (B) sites of care where the tests are avail22 able for use;

23 (C) type of tests, including molecular, anti24 gen, and serological tests; and

25 (D) percentage of tests that deliver rapid
26 results at the point-of-care;

1	(2) for each laboratory, hospital, or other health
2	care facility that receives COVID–19 diagnostic
3	tests, the number and type of COVID–19 diagnostic
4	tests received;
5	(3) each hospital or other health care facility
6	that has the capability, capacity, and testing-related
7	supplies to process COVID–19 diagnostic tests, in-
8	cluding test type and location by State, territory, or
9	Indian Tribe;
10	(4) each laboratory that has the capability, ca-
11	pacity, and testing-related supplies to process
12	COVID–19 diagnostic tests, including test type and
13	location by State, territory, or Indian Tribe;
14	(5) for each COVID–19 diagnostic test listed
15	under paragraph (1), the time required to receive
16	test results, including any time for processing and
17	shipping, measured in the smallest unit of measure-
18	ment reasonable for the particular test, whether
19	minutes, hours, or days;
20	(6) for each COVID-19 diagnostic test listed
21	under paragraph (1), the approximate time per em-
22	ployee required to run the test;
23	(7) for each COVID-19 diagnostic test listed
24	under paragraph (1), each test that the Secretary
25	has authorized, cleared, or approved under the Fed-

1	eral Food, Drug, and Cosmetic Act (21 U.S.C. 301
2	et seq.), or is marketed in accordance with applica-
3	ble guidance issued by the Secretary;
4	(8) a list of each laboratory, hospital, and other
5	health care facility that has reported a shortage of
6	testing-related supplies, and which such supplies re-
7	ported to be in shortage;
8	(9) for each COVID–19 test manufacturer—
9	(A) the number and type of COVID-19 di-
10	agnostic tests for which such manufacturer
11	has—
12	(i) current inventory and projected
13	production capacity for the next 180 days
14	for at least the 180-day period following
15	the date on which such information is sub-
16	mitted; and
17	(ii) received orders, including orders
18	they do not have capacity to deliver; and
19	(B) a description of materials that are in
20	shortage that are hindering production of
21	COVID–19 diagnostic tests by amount and type
22	of test; and
23	(10) for each laboratory, hospital, and other
24	health care facility that receives COVID-19 diag-
25	nostic tests, the number of samples collected per day

and the number of results transmitted to patients
 (including results transmitted to health care pro viders for patients) per day.