

**Congress of the United States**  
**Washington, DC 20515**

October 5, 2021

The Honorable Xavier Becerra  
Secretary  
United States Department of Health of Human Services  
200 Independence Ave  
Washington, DC 20201

Dear Secretary Becerra,

We write to request additional Regeneron (REGN-COV) monoclonal antibody (mAb) doses for West Virginia. The recent U.S. Department of Health and Human Services' (HHS) September 13th, 2021 announcement transitioned allocations from a direct ordering process to a federally controlled distribution process. This process led to a federal redistribution for mAbs. While West Virginia saw an overall increase in mAbs, it saw a critical change in the number of REGN-CO doses the state received. As the state with the second highest rate of COVID-19 infections, as well as a primarily rural state, REGN-CO plays a critical role in responding to this pandemic.

As you know, the population of West Virginia is particularly vulnerable to COVID-19, as we have a high rate of comorbidities among our residents. The Delta variant has put an increased strain on our hospitals and healthcare providers. Many hospitals are having to delay or cancel non-essential surgeries because of the need to use the beds for COVID-19 patients. The West Virginia Department of Health and Human Resources (WVDHHR) is predicting that the WV health care system will remain at or near crisis level for several weeks which could not only impact the treatment and health of COVID-19 patients, but the health of all West Virginians.

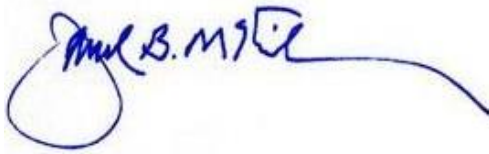
On September 23, 2021 West Virginia made a formal request to HHS for an increase in allocations of REGN-CO which was subsequently, denied by Dr. Meredith Chuk on September 29, 2021. The request asked for an allotment of 3,000 doses of REGN-CO each week through October 31, 2021, and then increases that amount to 6,000 doses a week beginning November 1, 2021. While West Virginia has seen a net increase in mAbs over the last few weeks, it has not met the increasing need in the state. Additionally, as strain has continued on our hospitals, delivery of the Bamlanivimab/etesevimab (BAM/ETE) doses has remained an impediment. The BAM/ETE doses can only be administered intravenously, while REGN-CO can be administered intravenously and subcutaneously. Many rural locations cannot administer BAM/ETE, slowing overall administration of mAbs. This is an important distinction, as it allows REGN-CO to more easily reach our rural and at-risk populations.

West Virginia has worked with state and local partners including hospitals, pharmacies, local health departments, and others to build a network of partners to administer mAb treatments. Just this week West Virginia has added over 40 new sites to administer mAb. With an increased allocation of mAb treatment we are hopeful some of the strain will be lifted off of our already struggling healthcare system. Without an additional allocation of REGN-CO West Virginia will continue to see crisis levels of hospitalizations and avoidable deaths.

West Virginians need this life-saving medication. We request you immediately accommodate our request.

Thank you for your swift attention to this matter. Should you have any questions please reach out to Kirsten Wing ([Kirsten.wing@mail.house.gov](mailto:Kirsten.wing@mail.house.gov)) of Congressman McKinley's staff.

Sincerely,

A handwritten signature in blue ink that reads "David B. McKinley P.E." with a long, sweeping horizontal line extending to the right.

David B. McKinley P.E.  
Member of Congress

A handwritten signature in blue ink that reads "Shelley Moore Capito" in a cursive style.

Shelley Moore Capito  
United States Senator

A handwritten signature in blue ink that reads "Carol D. Miller" in a cursive style.

Carol D. Miller  
Member of Congress

A handwritten signature in blue ink that reads "Joe Manchin III" in a cursive style.

Joe Manchin III  
United States Senator