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ONE HUNDRED THIRTEENTH CONGRESS  
**Congress of the United States**  
**House of Representatives**  
COMMITTEE ON ENERGY AND COMMERCE  
2125 RAYBURN HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515-6115  
Majority (202) 225-2927  
Minority (202) 225-3641

May 24, 2013

Mr. Michael Rose  
Vice President  
Supply Chain Visibility  
Johnson and Johnson Health Care Systems, Inc.  
1350 Eye Street, N.W., Suite 1210  
Washington, D.C. 20005

Dear Mr. Rose:

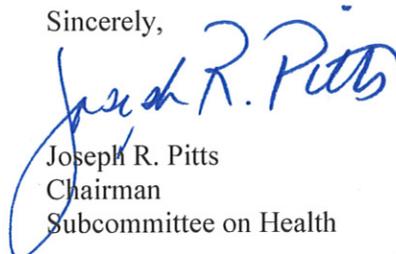
Thank you for appearing before the Subcommittee on Health on Thursday, April 25, 2013, to testify at the hearing entitled "Securing Our Nation's Prescription Drug Supply Chain."

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

To facilitate the printing of the hearing record, please respond to these questions by the close of business on Monday, June 10, 2013. Your responses should be e-mailed to the Legislative Clerk in Word format at [Sydne.Harwick@mail.house.gov](mailto:Sydne.Harwick@mail.house.gov) and mailed to Sydne Harwick, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,



Joseph R. Pitts  
Chairman  
Subcommittee on Health

cc: The Honorable Frank Pallone, Jr., Ranking Member, Subcommittee on Health

Attachment

## Additional Questions for the Record

### The Honorable Renee Ellmers

1. Mr. Rose, if Congress fails to act and the California law goes into effect, will the prescription drug supply chain still face numerous holes through which counterfeit drugs or fraudulent product could enter the supply chain and reach patients? Will patients in California still be at risk under that scenario?