



**MURIEL BOWSER**  
MAYOR

February 18, 2022

The Honorable James E. Clyburn  
Chairman, House Select Subcommittee on the Coronavirus Crisis  
2157 Rayburn House Office Building  
Washington, DC 20515

Dear Chairman Clyburn:

In response to your recent request for responses to post-hearing questions concerning the “A View from the States, Territories, and District: Governors Respond to the Omicron Variant” hearing held on Thursday, January 20, 2022, please find responses to your inquiry below.

Responses to questions posed by Ranking Member Steve Scalise (LA-1)

**1. In light of these facts, do you plan to follow the science and immediately rescind your vaccine mandate?**

The purpose of the vaccination entry requirement for certain indoor public establishments was to:

1. Reduce transmission of COVID-19,
2. Reduce serious illness by the virus, and
3. Reduce COVID-19 related deaths.

When the vaccination entry requirement was announced, the District’s case rates were very high, comparable to rates at the beginning of the pandemic and during the surge of December 2021. These rates were well above the Centers for Disease Control and Prevention’s (CDC) “low transmission” level (below 10 cases per 100,000). However, as of February 10, 2022, COVID-19 cases in the District have dropped by more than 90% and there has been a 95% reduction in hospitalizations. Due to the success of DC’s mandates, requirements, and public health mitigation efforts, the science now (as of February 15, 2022) supports ending the requirement to show proof of vaccination at certain indoor public establishments.

**2. If not, are you performing any type of data collection or tracking to compare the experience in D.C. to other locations that do not have such a mandate?**

The District of Columbia's public health authority, DC Health, monitors in real time the spread of COVID-19 in the District. DC Health regularly engages with regional and national partners to share data and develop and implement best practices to keep our residents and visitors safe.

As all jurisdictions' populations and demographics differ, the most useful data continues to be collected locally. With the District's current case rate and hospitalization rate having dropped by over 90% from the height of the recent surge, the District has ended the requirement to show proof of vaccination at certain indoor establishments..

**3. What metrics, if any, will you use to determine when the vaccination requirement should be rescinded?**

The District of Columbia and DC Health have consistently followed a comprehensive series of factors influenced by the case rate and transmission of COVID-19 to determine guidance, including the vaccination entry mandate. Additionally, our concerns are broader than a single data point and instead take into consideration population dynamics, current health behaviors, and hospital system capacity. Also importantly, we regularly examine evolving data on vaccine efficacy, while tracking the continued growth in the number of local residents who have been vaccinated. Accordingly, we examine multiple key data points on a daily basis to inform our decisionmaking. This data supported ending the proof of vaccine requirement for patrons of certain indoor public establishments on February 15, 2022.

Vaccine requirements remain in place for adults in schools and childcare centers, student athletes aged 12 and up, District government employees, contractors, grantees, and health care licensees and employees. We must take special care of children under five who cannot be vaccinated, and vaccination helps protect continuity of government operations by reducing hospitalization and death by over 90%. Vaccination will help reduce the numbers of people who have "long COVID" by reducing the number of people who get sick in the first place.

The Council of the District of Columbia has also enacted legislation requiring all students to be vaccinated against COVID-19.

Responses to questions posed by Rep. Carolyn Maloney (NY-12)

**1. During the hearing you testified that the District of Columbia was "shorted" \$755 million in CARES Act funding and that the Government of the District of Columbia does not have "full authority over its National Guard" because it is not a state. Please describe all of the ways in which lack of statehood has impacted the District of Columbia's capacity to respond to the coronavirus crisis?**

The lack of statehood in the District of Columbia has impacted our coronavirus response greatly. DC had to work with our congressional partners to ensure that we received the \$755 million we were shortchanged in the CARES Act and revise language in ARPA where DC would have been treated as a territory again in several sections of the bill. To date, we still face many attempts of Congressional overreach, including:

- 49 House and Senate Republicans vowing in a letter to vote against the next fiscal year 2022 appropriations bill unless it defunds the enforcement of both federal and District of Columbia COVID-19 vaccine mandates. None of the other states with vaccine mandates face this issue.

- Senator Rand Paul (R-KY) introduced a bill that would nullify DC's requirements that individuals present documentation of COVID-19 vaccination to enter certain facilities, and that students receive COVID-19 vaccinations. Again, no other state has had to endure this level of interference.
- Representative Matt Gaetz (R-FL) introduced a bill that would nullify DC's requirement that individuals present documentation of COVID-19 vaccination to enter certain facilities.
- Senator Ted Cruz (R-TX) introduced a disapproval resolution that would block DC's requirement that students receive COVID-19 vaccination. However, none of the other states with similar vaccine requirements face this issue.
- Representative Pat Fallon (R-TX) introduced a bill that would prohibit DC from requiring an individual to present documentation of COVID-19 vaccination to enter any building, facility or other venue.
- Representative Michael Cloud (R-TX) and Senator Mike Lee (R-UT) introduced a disapproval resolution that would have blocked DC's bill that permits minors to receive a vaccination without parental consent. The resolution has since expired, and DC's bill is now law.

As the elected Mayor of Washington DC, it is my duty to assume the responsibility of its people and to make the decisions that will positively improve their lives. It is clear that the lack of statehood for the District of Columbia creates an opportunity for members of Congress to intervene in our local decision-making processes and in local governance. These attempts undermine the will of our local government and thus undercut the quality of work designed to support the health and wellbeing of our residents. Until Washington, DC achieves statehood, it appears that we will continue to face real interference in our city's approach to governance and our ability to meet the health needs of its residents.

Lack of statehood includes lack of autonomy with respect to our judicial functions. Even judges on our local superior and appellate courts must go through Senate confirmation. While confirmations have just recently resumed, we are nowhere near over the crisis in our courts caused by the Senate's failure to act to confirm nominees. The District government strived mightily to maintain District services during the pandemic, but courts that were 30% vacant simply could not keep up.

Lack of statehood means much of our criminal justice system is in federal hands. We took numerous measures to safeguard those in our custody from COVID-19 at the Central Treatment Facility and Central Detention Facility, but we had no control over conditions at Bureau of Prisons facilities around the country where District felony offenders generally serve their sentences.

On a couple of occasions during the pandemic, we were able to rely on the National Guard for pandemic-related assistance, such as dispersing crowds by the Tidal Basin at the outset of the pandemic and helping to prepare test kits recently. Were we to have the control over the National Guard that other states have, we might have used their talents more.

2. **In your opening statement, you stated that you have established community coronavirus centers and vaccine requirements to advance the District of Columbia's vaccine and booster strategy. Have you seen evidence that vaccination requirements and other public health measures instituted by the District of Columbia have helped to mitigate the spread of the coronavirus and save lives?**

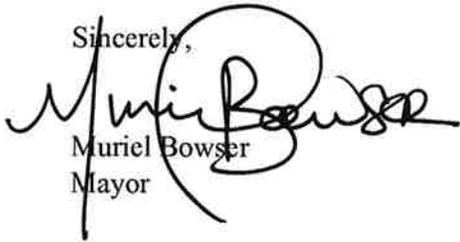
The District of Columbia has seen that the implementation of vaccine requirements and mask guidance has aided in mitigating the spread of the coronavirus and has saved many lives. The data shows that a person is 6 times less likely to get infected with the coronavirus if they are fully vaccinated, 13 times

less likely if they are boosted, and 30 times less likely to be hospitalized if they are boosted. With that information in mind, we have implemented 8 COVID Centers and 88 District-operated vaccination clinics located across DC, including school-based pediatric clinics. Since the height of the Omicron wave, we have seen cases drop by more than 90% and a 95% reduction in COVID-19-related hospitalizations. Unvaccinated persons in the District are 97 times more likely to die from COVID-19 than persons who are vaccinated and boosted. . This further shows that our vaccination and booster campaigns were able to provide our residents a level of protection from severe symptoms.

Thank you once again for the opportunity to testify and to clarify my record on the District of Columbia's ongoing response to the coronavirus pandemic. The COVID-19 virus and its variants forced us to confront new challenges, repeatedly change our operating posture, and think thru how we best protect our citizens, employees, workforce, and visitors. I am proud of the lives that we have saved through our efforts and proud of how Washingtonians have come together and sacrificed to bring us to this point.

While the future of COVID-19 remains unclear, I believe what we need from our federal leadership is also clear. We need sound policies based on science, a federal government focused on assisting cities and states, supports to ensure that our students can catch up, and a commitment to American families who lost a job or were otherwise impacted by the pandemic that they will have a brighter future. If you have additional questions, do not hesitate to reach out to me or my team.

Sincerely,

A handwritten signature in black ink, appearing to read "Muriel Bowser". The signature is written in a cursive style with a large, looping initial "M".

Muriel Bowser  
Mayor