



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

Featuring:

Lucy Gettman, Executive Director, Women In Government

Alaska State Representative Geran Tarr, Western Regional Director, WIG Board of Directors

Sharon Lamberton, MS, RN, Deputy Vice President, State Government Affairs, PhRMA

Mary Kosinski, Chief of Staff and Deputy Vice President for Science and Regulatory Advocacy at the
Pharmaceutical Research and Manufacturers of America (PhRMA)

Julia Worcester, PhRMA

Lucy Gettman: Welcome to WIG Wednesday, our weekly virtual series delivering timely information to help you better serve your constituents. I’m Lucy Gettman, Executive Director of Women In Government, a non-profit, non-partisan organization by and for women state legislators across the country.

Hopefully you all received our newsletter today, “[WIG At Work](#),” and if you didn't just shoot us a message into the chat box or go to the homepage of our website to sign up directly. If you did receive “WIG At Work” today, we hope you enjoy it and share it with someone who celebrates women political leaders and good public policy.

We are honored to have State Representative Geran Tarr of Alaska as our moderator for today's program. Representative Tarr is Western Regional Director for the WIG Board of Directors, and as such is a resource for all women state legislators in this 14 state region during a critical, critical time in our history.

Representative Tarr, thank you. We welcome you, we appreciate your leadership, and the virtual podium is all yours.

Representative Geran Tarr: Thank you so much, Lucy. It's a real pleasure to join everyone this afternoon. It’s early here for me in Alaska, and I’m really looking forward to our presentation today.

For those of you that are tuning in and that are new to Women In Government, I just want to take a moment and tell you a little bit about this organization. I started out first as a conference attendee, then moved on to being a State Director, and now I serve on the Board of Directors for the organization. It's been one of the best experiences of my legislative service and one of the greatest opportunities for learning. I think you'll see that in the discussion today.

I invite all of you new women legislators to share this resource with your colleagues, and I invite all of you to join us. Become a part of the organization at whatever level is going to work for you. Please take advantage of these learning opportunities. These WIG Wednesdays are happening every week. You're going to hear the bios of our speakers today, and you're going to see why this is worth your



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

time. We have impressive women here and have had impressive speakers in the prior weeks, so please check out the website.

I participated in a group that produced a [Mental Health and Substance Use Disorders](#) toolkit. I shared that with all of my colleagues, and people got model legislation from around the country. So please join us and become a part of our organization.

As we get started today, I want to point out how we're going to do questions. If everybody will look down to the zoom meeting toolbar at the bottom of your screen you'll see the chat box. If you would like to ask a question, please put your question into the chat box. We're going to be moderating that, and we'll try to get as many answered as possible. We can always try to follow up if we run out of time. When you type your question, please choose “To Everyone” from the drop-down menu so that we will all be able to see your question as we're going through.

Okay, let's get started and get on to these great presentations. We have two speakers with us today, Mary Kosinski and Sharon Lamberton, and they're going to both be speaking to us about the biopharmaceutical industry response to the COVID-19 pandemic. All of us have been dealing with this. I'm sure it's the number one issue every policymaker at every level of government is dealing right now. It's hit us like a storm we've never seen, so this is really timely. I'm so appreciative that that these women would take their time to join us today. I'm going to give the bios of the two women, and then I'm going to hand it off.

Mary Kosinski is the Chief of Staff and Deputy Vice President for Science and Regulatory Advocacy at the Pharmaceutical Research and Manufacturers of America or “PhRMA”, a pharmaceutical trade association based in Washington, DC.

Mary came to PhRMA after serving at the Biomedical Advanced Research and Development Authority (BARDA) as Chief of Staff and Senior Policy Advisor at the U.S. Department of Health and Human Services where she was responsible for a variety of functions including strategic management and financial guidance across product areas; guiding interactions with the biopharmaceutical sector; and directing relationships within the Executive and Legislative branches of the federal government.

Before joining BARDA, Mary served as the Senior Policy Advisor to the Assistant Secretary for Preparedness and Response (ASPR), the parent organization to BARDA created by the Pandemic and All-Hazards Preparedness Act of 2006. She was responsible for a portfolio that included international health partnerships across life science sectors and several U.S. partner countries. In ASPR, Mary led HHS policy development for the Global Health Security Initiative, coordinated international food safety engagement, and negotiated influenza viral sample-sharing directives with the World Health Organization (WHO).



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

Prior to these science and emergency preparedness-focused roles, Ms. Kosinski served in senior policy positions within the US Department of Health and Human Services, including as Special Assistant to the Counselor for Science and Public Health under Secretary Mike Leavitt and as Special Assistant to the Administrator at the Centers for Medicare and Medicaid Services (CMS).

Mary received her B.S. degrees in Chemistry and Policy & Management from Carnegie Mellon University and her M.S. in Health Care Policy and Management from the H. John Heinz School in Pittsburgh, Pennsylvania.

Our second speaker is Sharon Lamberton. Ms. Lamberton serves as Deputy Vice President in State Government Affairs for the Pharmaceutical Research and Manufacturers of America (PhRMA), a trade association of more than 38 biopharmaceutical companies located in Washington, DC. She provides clinical expertise, policy support, and strategy for multiple industry related issues, including cost and value of medicines, adherence, access to insulin, prescription drug abuse and the latest in research and development of new medicines and the value from those new treatments and cures. She works closely with the National Governors Association, National Federation of Women Legislators, and serves on the Corporate Advisory Council for the American Association of Nurse Practitioners.

Previously, Ms. Lamberton worked for the National Committee to Preserve Social Security and Medicare (NCPSSM), a large, national, grassroots seniors’ association on healthcare and long term care issues. Previous work experiences include: the General Accounting Office (GAO), the Congressional office of Senator Chuck Robb, the Center for Health Policy Research and Ethics at George Mason University, and the National Institutes of Health Clinical Center in Bethesda, Maryland, where she worked as a clinical research nurse in the National Institutes of Neurology, Disease and Stroke, where she provided direct patient care and helped lead research protocols in epilepsy, rare diseases like Fabry’s Disease, Syringomyelia (Spinal Cord disorder), Brain Cancer, namely Glioblastoma, and Multiple Sclerosis. Up until two years ago, Ms. Lamberton worked in the Emergency Room on the weekends at a northern Virginia hospital.

Ms. Lamberton holds a Bachelor of Nursing degree from Texas Woman’s University in Houston and a Master’s of Science in Health Systems Management from George Mason University in Fairfax, Virginia. She served as President of the Texas Nursing Student Association, an organization of more than 5,500 students, and President of the National Student Nurses’ Association, with more than 44,000 student nurses.

So both of these women are very, very impressive. We are so delighted to have both of you join us today. I'm going to hand it off to Ms. Lamberton, who's going to be our first speaker.

Sharon Lamberton: Thank you so much, Representative Tarr. I have enjoyed working with you for many years as I have with Women In Government. I just want to thank you all for attending and being



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

such an incredible part of service, whether you're a Senator or Representative or one of the incredible staff that works with and for Lucy Gettman, who's an astounding leader for Women In Government. Thank you to you, Laura, Maura, and Lindsey for arranging this, and thank you to my colleague Julia Worcester, my colleague at PhRMA who's been with our policy team for about a year. Before that she was at a law firm and supporting PhRMA as well as other clients. And so really, thank you Julia for asking Mary and I to do this.

Mary is our rock star here. You heard her background of where she has been and how she has spent her time since 2006 in emergency preparedness. So she and I are both going to have a dynamic flow, but my goal for today is to impart to you that in this time of craziness and crisis right now, this is America's time to shine. I am very proud of our industry because America is home to a vast dynamic life science industry, many of which produce jobs in your states. We're very proud that this is what many years of research and development and discovery have led up to - now we're looking for searches, for cures, for treatments, for vaccines. Mary and I are going to tell you why our industry is uniquely positioned to fight and defeat this nasty virus and also what we're doing with our collective partners.

I'll start with how is industry working right now to combat COVID? We've kind of split it up into four main areas with research and development being primary. PhRMA represents 35 member biopharmaceutical companies throughout the world, and we are working hard to develop some treatments and vaccines. We're also contributing over \$5 million in monetary and in-kind support - personal protective equipment, gloves, masks, surgical equipment, and other things. We've worked together to donate all sorts of things, including antibacterial medications which are used to treat secondary infections like pneumonia, which is related to COVID-19.

The third part is partnership - and this is where Mary's going to her background comes in exquisitely - because we are collaborating with China, European Medicines Agency, the CDC, FDA, and WHO. All of us are working together to try to figure out, having the best of public health authority minds, how we can cure this.

One of our important partnerships - and Julia will emphasize this at the end - is Healthcare Ready Now. [HealthcareReady.org](https://www.healthcare-ready.org) was started back with Hurricane Katrina, where we were not prepared as a country to get emergency care and medicines to those that needed it because of the awful hurricane. That was targeted. This is different. This is a pandemic. This is worldwide and nationwide. I implore you to look at that website as Representatives and Senators for your constituents, because this is the hotline that we use when we hear that constituents can't access their needed medicines, that because a lot of them are out of work they don't have access to their providers, their providers' doors might have shut their pharmacy doors.



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

[Healthcareready.org](https://www.healthcareready.org) provides a couple things. Not only does it facilitate that access to supplying the medications, it also serves as a resource hub to respond and quickly get all requests filled. It also has something called [Rx Open](#) that tells the patients and providers what pharmacies are open and which ones are closed. So again, really important portal and it in it there's a [hotline](#) there that you can call. No matter what state you're in or what county you're calling about, they will target it and help you.

The fourth area, the supply chain integrity, is something we're working very hard on, continuing to prioritize and make sure that we have continuity of supply chain. Before I go on to the next slide where we're talking about our goal of getting medicines and treatments, I want to just ask Mary to chime in here because of your background with [HHS BARDA](#) and the Office of the Secretary. Could you chime in on how we are positioning ourselves during this unprecedented time?

Mary Kosinski: Thanks, Sharon, and thank you Representative Tarr and everybody joining here today. It's such a privilege to be able to share with you the considerations of not just our partnership, but really what it means to have a drug development ecosystem at not just the federal and state but the local levels.

Everybody's playing an important role in bringing these therapies to not just the American but the global patient population who is affected by this pandemic. So as we go through these slides, you're going to hear about some of the unique and amazing science that's going into this innovative model. And I want to make sure that as we think about the underpinning of preparedness, we think back 10 to 15 years ago when your state and local governments were thinking through pandemic preparedness at the helm of 2009 H1-N1 and the work and infrastructure that you put into place at the local level to make sure that your governments and your emergency responders had the wherewithal to think through these scenarios and understand and anticipate some of the needs that you would feel at the local and state level.

So as we go through what we're doing, as the biopharmaceutical industry, I want you to know it's built strongly on the shoulders of the work that you've done and you've inspired us to do by identifying these questions. We can lead with science, but we need you to lead with the needs of your state and local governments.

So thanks, Sharon, I'll turn it back to you.

Sharon Lamberton: Thank you, Mary. Well that's a perfect segue way to the next slide thing for us talking about the factors contributing to our quick response. You might recall, as Mary had referenced, looking back at West Nile virus, SARS, Zika, and Ebola.



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

Just as an interesting example, back when we were combating SARS, it took 20 months for us to get the first medicine into clinical trials. Now with COVID-19 which appeared essentially in December, we within three months got our first medication underway into a clinical trial. So this is exciting because this represents the rapid discovery and the research processes that can be expedited and are being expedited in battling this.

Secondly, in addition to the deep scientific knowledge that we've gained from these previous global health emergencies, we're also drawing on the decades of investment in technology. This is where you all have been a partner with us, and I thank you all for recognizing that it is not just rhetoric. When we say there's \$2.6 million that goes into research and development of medicines and only 12% of medicines make it to market - vaccines are even more difficult where actually 94% of vaccines fail – when have you those scary statistics and you're facing a pandemic where we have to have a cure, and we have to have treatments, and we have to have vaccines, research and development is not an option.

All of these years that we've built on - strong years of research and development - must continue. So it's exciting that in these decades of investments, where we were looking at a number companies actually sharing, we have 35 member companies, but they're competitive. We're all in business and they're in business against each other, but we are working together. They're pulling together and sharing [adjuvants](#) which are basically boosters that actually reduce the amount of vaccine protein that's required per dose, so it allows us to make more doses.

Leveraging partners with a broad range of stakeholder companies – companies are working together - and they're also collaborating with governments, agencies, hospitals, doctors, and world government and agencies. Companies are working in close collaboration with National Institutes of Health and other public health authorities.

So that's exciting, and when we look at the next slide, this is perhaps my most exciting slide that we have to share. This slide has changed dramatically over the past couple weeks. We now have over 333 clinical trials in process. That is extreme hope for someone like me and all of us when we're looking at the devastating numbers elevating every day with deaths and new diagnosis of this nasty virus. 333 are in process - half of them are from our biopharmaceutical members - so that's exciting. They're all through many states, and we'll look at that in just a moment at the next slide, but that's as of today, the 15th of April.

Just a quick note as we're looking at the map and hopefully identifying a state where one of those 37 states where the clinical trials are taking place now, but when you're looking at that we're pulling from existing medicines off the shelves of libraries of medicines that we have are looking at scaling up screening or partnering with each other. We're looking at vaccines that will not only prevent COVID-19



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

but also antivirals that target the virus and block replication. We're pulling old antiretrovirals off the shelf and rapidly testing them to see if that's something that will work. We're looking at treatments - and not just the antiretrovirals needed to interfere with the way the virus infects the cells and reproduces – but using convalescent plasma from blood from survivors of COVID-19 that can be infused in patients to boost their immunity and help survive that virus and hopefully borrow the antibodies of somebody who's already been through that condition.

Antibody based drugs could be used to mobilize the immune system, as I just mentioned, and one of the most promising things made by Regeneron was targeting virus surfaces and we use that with Ebola as a prophylaxis to prevent infection, but this is just a little bit of a screenshot of where those clinical trials are taking place.

For those of you that have questions offline, we're happy to address them. But that's probably one of the most hopeful pieces of news that we could deliver today, in addition to some of the things Mary will touch on. And then finally, the next slide, I want to talk about just a snapshot of what some of our member companies are doing in the way of research and development, starting with Gilead. All of us have heard a lot about Remdesivir which is an investigational medicine that has not been approved yet, but there are a number of trials underway, and there are some promising things that we have to look forward to.

Johnson & Johnson began work on a vaccine back in January, literally early January 2020 when the viral sequence became public, and they're actually working at upscaling production of a vaccine that could be ready near the end of this month to test.

Sanofi Pasteur has a SARS vaccine type platform that they're working on. They could have a vaccine ready in six months and then ready for clinical trial in six to 18 months, leveraging a recombinant DNA platform. That could be a potentially great candidate,

On the next slide we're talking about Takeda, Pfizer, and GSK. Takeda is working on an existing plasma treatment that really contains those antibodies we were talking about earlier that work against the virus and has been shown effective.

Pfizer has an unusual partnership working with a third party to screen their antiviral compound library to look at mRNA vaccine candidates, and GSK had a new venture that they're announcing as well, working with the [Coalition for Epidemic Preparedness Innovations](#) trying to broaden the global effort. So those are just a snapshot of things.

You also will see as I transition now to Mary that we have had a number of announcements from our member companies you might ask us about in the Q&A about free medicines or nearly free medicines



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

that our companies are or can give away, especially during this time, in addition to what we did previously before this pandemic.

We had a [MAT.org](https://www.mat.org) medication assistance tool. Those companies, our member companies, have broadened and extended and given more latitude for those that could qualify for those free programs. A lot of them are giving away product if you can show that you've been unemployed or impacted by this pandemic, and just yesterday we saw Novo Nordisk, one of the three insulin manufacturers, say that they will be giving away free insulin product to those impacted by the pandemic. Depend on it, there's lots of good news coming on that way, but I want it now turn to Mary who's talking now about the diagnostic capabilities. Thank you, Mary.

Mary Kosinski: Thanks, Sharon, and I want to just echo the fact that this is an evolving situation as any pandemic. We're going to see additional states being engaged in clinical trials, additional academic research centers, an opportunity for your local and state engagement in the ecosystem to really come through in a meaningful way. So as we go through this know that with every day with additional therapeutic investigational candidates and vaccines as well as the diagnostics I'm going to reference here now coming into the fruition, we're looking forward to engaging with everybody.

So I'll just talk quickly about the diagnostic capabilities. Diagnostics are the most immediate need in the battle to determine if an individual is infected. Companies both large and small are quickly developing these tests, with several that have received emergency use authorization, otherwise known as an [EUA](#) from the US Food and Drug Administration to be marketed commercially.

One of the things that you have probably seen in the news and hopefully have taken great comfort in is that big companies who are experts in diagnostics like Roche and AstraZeneca and GlaxoSmithKline have identified a diagnostic platform. Roche has committed to producing millions of these diagnostic tests, and Abbott has recently just launched a test that can diagnose a positive case in five minutes, which is really reassuring as you're thinking about treatment modalities, and the “worried well” which is someone that we're trying to keep at home during the stay at home movement.

I'll also underscore the fact that with the diagnostics, there's also the important efforts that are being done by companies like Eli Lilly that have opened their research laboratories for testing in the state. So if you're from my home state of Indiana, you can take great comfort during the Stay At Home Indiana movement that companies like Eli Lilly are taking it into their own backyards, in terms of what it means to bring diagnostics to the patient.

We have every day the ability to see more and more vaccines coming into the preclinical and clinical stages of development. I want to talk quickly about this slide and highlight some of our companies that



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

are engaged, knowing that there are many – over 70 in fact - that are coming into the conversation from a regulatory capacity.

You can see that six vaccines are currently in preclinical testing. On the next slide I'll talk about the different types of vaccines, but I do want to highlight the platforms that they're using so that everybody can have a fair degree of confidence and comfort knowing that the science that's going on in your states is really translating into things that we as the biotechnology and biopharmaceutical industry are using. So Johnson & Johnson is leveraging technology they developed in partnership with the U.S. government for an Ebola vaccine - they're testing this against the coronavirus strains, and so we're acknowledging that this partnership has a lot of potential and we're looking forward to hearing about their timelines in terms of development 12 to 18 months out.

Similarly, both GSK and Sanofi have recently announced partnerships that include adjuvants, which Sharon mentioned earlier, which are basically boosters that can add to existing vaccines. That can make them not only more effective but also, it could be called “dose sparing” in that you can get more vaccines out of what's been developed.

That adjuvant technology is partnered with the platforms that Sanofi and GSK have used for influenza vaccine, so that's a really exciting way to build on the investments of the previous pandemic influenza and scaffolding that was used in Ebola.

Pfizer is partnering to develop a novel mRNA vaccine, and Sanofi is partnering to develop one as well. These new innovative vaccines - what's really important to understand here that makes them different from the vaccines that we think about every day, not just like seasonal influenza, but also like our TDAP or the pertussis vaccine - is that this is an opportunity to really take innovation to the next level, which will hopefully speed the vaccine through the clinical and research stages so that when we get to the manufacturing scale, which is really where we're thinking about being the most time consuming process, that we've done everything in our power to determine that we've got a safe and effective product to prevent or prophylact.

This next slide is what I just talked through quickly, and there are previously utilized and approaches being pursued. It's important to know that the concept of many shots on goal or multiple vaccines which was just discussed by the World Health Organization today as part of their initiative being led by former pharmaceutical executive leaders who are familiar with the ability to bring vaccines to market quickly, involve taking lots of different approaches because every virus is different, and knowing what's going to work and be able to be scaled up or made is a manufacturing capability that's possible to have lots of doses - millions and millions made - is variable. So we're trying to do that giving as many opportunities as possible for success.



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

I mentioned earlier that there are preclinical phase one and phase two and then further down the pike. I'd like to focus us just for a moment on the vaccines that are in preclinical testing that are supported by our member companies because we're really excited by the fact that not only our companies, as Sharon mentioned, partnering with one another, they're making this information available as quickly as possible. And I think that's a really strong testament to what we've learned in pandemic preparedness, so that 15 years ago when your state governments encouraged us to think about making vaccine information available -for what that's going to mean for the individual providers, I think our companies have heard that, and you're seeing it in the news with the constant stream of communications, the partnering with the governments and the academic medical research centers. Sharon mentioned that over half of the clinical trials that are ongoing today involve pharmaceutical member companies' products - and that includes these vaccines - and we're excited to see and we'll be bringing more to market soon.

A lot of our companies' efforts have focused today on investigational therapies. We call them investigational therapies because they are, as Sharon indicated, not approved for the uses that we're indicating today. So the novel coronavirus is just that - it's new. We don't have approved therapies for it. Several companies already have approved products on the market, however, that hold potential for treating patients with COVID-19. Other experimental drugs are also being included in these clinical trials and because they've been tested for other viruses like Ebola, they could be effective in targeting the novel coronavirus infection as well.

I'll just quickly highlight the fact that we have some really exciting pieces that hopefully bring you comfort to know that we've had the ability as innovative biopharmaceutical companies to think about this already. There are currently 29 clinical trials testing a product known as Kaletra which has been approved already for HIV. Now - I think that this is important - AbbVie is based in my neighboring state of Illinois, so I like to make sure folks understand how much your individual states have really contributed to the underpinning science of what it is we're talking about today.

10 clinical trials are testing Gilead's Remdesivir, as Sharon mentioned earlier. And we acknowledge that with products that have already gone through a certain amount of investigation under Ebola, we're hopeful that they are timely, and that they could potentially be available as early as later this summer or the fall, recognizing that time limits and scale up capacity are going to be drivers into how we are able to bring these treatments' availability to market.

And then finally, I'll mention the fact that there are other drugs as we've talked about including Genentech's Actemra, which is been approved as an IL-6 inhibitor for arthritis, that could be potentially available for severe COVID-19 pneumonia related complications. We're looking at this across the spectrum, not just thinking about treating COVID-19 but also some of the severe complications like



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

pneumonia. We're trying to wrap our arsenal of our compound libraries for not just things that we're seeing in the immediate term, but the downstream effects as well.

On the next slide you can see the kind of breakdown as of last week because there's so many trials coming on board. We've got trials that are testing the convalescing plasma, which Sharon derived from the treatment modality from patients who have already recovered. We have unique therapies that are being tested across a couple different categories. There are things like Takeda's plasma antibodies. We have monoclonal antibodies that are protecting us against the virus. So like Eli Lilly's there are the monoclonal antibodies for the inflammatory molecules like the IL-6 inhibitors that we talked about from Genentech.

I think it's also important, and I just want to flag here because the antimalarials like Hydroxychloroquine and Chloroquine might interfere with the viruses' ability to infect the cell and an Emergency Use Authorization (EUA) was issued by the US Food and Drug Administration, but nothing has been proven yet. There are clinical trials underway, but I did want to make sure that because there's a lot of questions about the antimalarial that I threw that out there for comparison.

Again, just another way to look at things. I like to have lots of different charts available, and hopefully this gives us something to talk about and follow up with additional questions. But as you can see here, there are a lot of different trials going on, and they're talking about different phases of the viruses in progression and the different complications that patients in your local hospitals may be experiencing. So everything from monoclonal antibodies against the virus to antibodies that are going to prevent the virus from entering the cell, which could be a bridge to a vaccine, and then as we talked about those antimalarials and antibodies for the IL-6. So I'm really excited for the possibility that our industry is bringing to the table to treat this pandemic.

We acknowledge that we are in fact all in this together. You've seen multiple different partnerships - consortium and collaborations - both domestically and internationally among scientists in the biopharmaceutical industry within your academic medical research centers. We look forward to using this ecosystem to continue these conversations, and we know that this pandemic is something that we have the ability and the science to beat.

I want to turn over the last slide to my colleague, Julia. Just quickly to remind you, I know we have some things that we want to send via email following our webinar today. But I did want Julia to just give you a quick reference, please.

Julia Worcester: Thank you, Mary. Hello everyone, my name is Julia Worcester. I'm one of the State Directors of Policy for the Mid-Atlantic and I'm based out of Maryland. A little shout out to my local Delegate Sheree Sample-Hughes, who I know is on the phone. I love working with her in the Maryland



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

State Legislature. I know that all of you are working so hard in your states, and I'm so happy that we could have been here today and invited by WIG to do this for you all.

As you can see, one of our critical missions is being a resource to both our member companies, stakeholder groups, the public, and patients. We want you to be able to take these resources and get out there and use them in your communities and also be able to come back to us if there's more information that you need. That's what we do as PhRMA.

During this time of uncertainty with information coming out rapid fire, you can find these resources when you go to our special landing page. It's pharma.org/coronavirus, and if you just plug that in and save that as a bookmark in your browser, you'll be able to keep coming back and getting this information updated. We will also be sending it out to Women In Government and many of our other stakeholder groups, and we're going to be posting these online as well.

We've created these special landing pages of what we're doing in the industry going over things like diagnostics, new treatments, and what each company is doing, and we just wanted to make sure that you all are aware of that.

And last but not least, again, I want to make sure that everyone is aware of our medication assistance tool (MAT) or mat.org. That's a great hub of so much information that's growing on through this pandemic. We have been partnering with our companies and making sure that there's a resource for patients who can get the information that they need as well as their medication.

I am a new liaison to WIG, and I'm really much really looking forward to working with all of you in the future and meeting you whenever we get a chance to do at a conference in person again. I want to thank you all for having me today.

Representative Geran Tarr: Thank you. Really great presentations and very timely. I really, really want to thank both of our speakers for their time today.

We are going to continue on, because we want to make sure if anybody does have questions that we take questions from you. I'd like to make a couple of announcements. We are going to continue these week WIG Wednesday sessions, so stay tuned!

April 22 will be “Next steps ahead for COVID-19: Research and Development, Vaccine Manufacturing, and BARDA Partnership,” moderated by WIG Board Member Nevada Assemblywoman Lisa Krasner and featuring Clem Lewin of Sanofi-Pasteur as speaker.



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

April 29 will be “What the CARES Act Means for Small Businesses, Individuals and Non-profits” featuring Katie Vlietstra Wonnberg, Principal, Public Private Strategies as speaker.

More sessions will be announced in the coming weeks, so keep an eye on your inboxes and on WIG social media #WIGWednesdays for more!

Our materials will be available online after the session, and you can see all of our ways to connect with Women In Government on social media.

Sharon Lamberton: Thank you, Mary and Julia. I know time is limited for everyone and everybody's busy, but Julia as our liaison from PhRMA to Women In Government pledges to be available any time for questions. And if you think of one later in the shower tonight or something, please reach out. I think the world of Women In Government. It's one of my very favorite third party groups that we have worked with for years, and again I appreciate the leadership of Lucy and all of the WIG staff.

Representative Geran Tarr: Well, I have one question that I want to ask. You mentioned some of the partnerships that are happening with universities, and I just wondered if you could talk about that a little bit more. When you have to sort of upscale so quickly, I wasn't thinking of the value of that research partnership that maybe all the time isn't as important, but how important it may be right now.

Mary Kosinski: Thanks, Representative Tarr. That's an excellent question. I know that Sharon is much more articulate here, so I'll just give a quick historical perspective and just highlight a couple things that are going on because all of our companies maintain amazing connections within their local academic medical communities.

I don't want to pick on Boston, but I will say as the hub of a number of our companies' research, I know that there are many universities that are partnering with them on some of the underpinning activities. I think that as we're focused today on some of the diagnostic capabilities and the immediate term need of that particular set of medical countermeasures, which is really just a fancy way to group on all of the conversational pieces we're touching today, I know that a lot of the academic medical centers have been critical in that.

I also have to give a shout out to Pittsburgh and the University of Pittsburgh, acknowledging that they have also entered into the vaccine candidate race, and so I think they are talking with some of our pharmaceutical companies. I think there are a lot of partnerships that are under the surface as well as those that are probably a little bit more formalized in the media and the consortium.



#WIGWednesdays

April 15, 2020

**“Bio-Pharmaceutical Industry Battle Against COVID:
Progress Update and Hope”**

I think it's important for us all to think about what that means in our communities and encourage everybody to be curious and ask those questions, because I think that's one of the things that we as the innovative biopharmaceutical industry are most interested in understanding is how we can be constructive partners as well. So I think it's a two way conversation.

Sharon Lamberton: That was amazing. I'd only add another piece of this, which is unfortunate that we're having to talk about - part of the pandemic concerns that industries are working with universities and other partners on is the stockpiling issue and the gray market. There is a huge concern that when there is a pandemic and when there are prospects out there that that seem to be promising that people will start hoarding and stockpiling. We've seen there are problems with that with hoarding already taking place. PhRMA is facilitating some of these conversations, many led with and among university partners that we've worked with in the policy circles for years.

And addition, looking at the impact on Medicaid, we would be remiss if we didn't mention that. Today, we're very concerned with the pandemic and the loss of jobs and the quick expansion of Medicaid and burden on Medicaid that's taking place now and over the next couple months - that people have access to the medicines and treatments that they need. So again, that's represents additional partnerships that we have with universities. Happy to talk further offline for anybody interested.

Representative Geran Tarr: Thank you. That's a great point. I wasn't even making that connection that that last point. We do have a couple comments here. This is Representative Kristin Bahner from the Minnesota House - she needed to go, but thanks you. Nevada Assemblywoman Lisa Krasner says thank you as well.

Please stay connected with us on social media and join us for next week's WIG Wednesday! Thank you to Ms. Lamberton, Ms. Kosinski, and Ms. Worcester. Thank you to Lucy and the amazing staff at WIG: Maura, Laura, and Lindsey. Thank you for everything today, and everyone, please stay safe and keep lifting each other up as we get through this together.