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LuAnn Heinen:

That's Andy Slavitt, who most recently served as senior advisor in the Biden White House for the COVID-19 response. Previously, he led implementation of the Affordable Care Act in the Obama administration, where he was credited with fixing healthcare.gov, and then ran the Centers for Medicare and Medicaid Services (CMS) from 2015 to 2017. He's the host of *In the Bubble with Andy Slavitt*, which was named one of Apple's favorite podcasts of 2020. Andy founded United States of Care, a national health policy organization, and is a founding partner of Town Hall Ventures, a firm that invests in underrepresented and vulnerable communities.

I'm LuAnn Heinen and this is the Business Group on Health podcast, conversations with experts on the most important health and well-being issues facing employers. Today's guest is Andy Slavitt, author of the book, *Preventable: The Inside Story of How Leadership Failures, Politics, and Selfishness Doomed the U.S. Coronavirus Response*.

Andy, welcome. You've been on some high-profile news outlets lately – NPR, CNN. We're really honored and excited to have you on the podcast.

Andy Slavitt:

None more important than this.

LuAnn Heinen:

None more important. You went to the White House in January this year to help President Biden lead us out of the pandemic. As planned, you were there until early June. Let's start with what happened during those four pivotal months to bring us to where we are now, happily going to restaurants and stores without masks, seeing grandparents, having summer weddings, in my family's case.

Andy Slavitt:

Well, best wishes to you. If you go back to just put ourselves in how we were all feeling January 15th, January 20th, is a far cry from what it feels like today. There were thousands of people dying every day. People had felt that the vaccine was coming, but weren't able to get vaccinated because there just simply wasn't enough vaccine, there wasn't enough storage, and there were a lot of promises made, but it was very frustrating. Only about 40% of people said they would even take the vaccine if they got offered it. We had seen variants pop up both from England and from South Africa, so it felt like the race was going to get harder. It was a pretty harrowing time when we took over. I think the country has probably witnessed in the last four to five months, one of the most remarkable transformations of our well-being and as a country over these last few months. We are now in a place where a couple of hundred people are dying every day. Except for the young adults, the vast, vast majority of people have been vaccinated, there only 2% of people vaccinated when we came in, and people are, most importantly, getting their lives back and the things that they lost. Does COVID remain; sure it remains, but it's now what you'd call a manageable challenge instead of an overwhelming, anxiety provoking threat. We have plenty of manageable challenges in our life and this is just another one and we'll just continue to manage it, but it's no longer in the existential threat column.

LuAnn Heinen:

Pretty incredible. How did it make you feel when President Biden said 300 million shots went into arms in just 150 days since he took office?

Andy Slavitt:

Well, look, I got a chance to witness his steady leadership up close and, as I wrote in the preface of my book that just came out, *Preventable*, he had a very specific, definitive, clear leadership style, which was calm, steady, no over promises. He basically instructed me when I went out and talked to the public every day, "don't worry about making me look good, in fact, don't worry about anything except giving the public the information they need in the most direct, straight, clear, simple way possible." That made my job a lot easier. I think we're here because the President set goals, decided to be accountable. He's well ahead of where I thought. We're probably twice as fast as where I thought we would be when we came in.

LuAnn Heinen:

Recently you've said we ought to focus on the discrepancy in vaccination rates across states and communities. So we've got Maine and Vermont pushing, I think 90%, while other states are down closer to 40%. What do you think will change hearts and minds in states like Mississippi and Arkansas or do we just need to focus on reaching the moveable middle, wherever they are?

Andy Slavitt:

Well, I think by and large, the most challenging populations are our young people, people under 25, 18 to 25, because they just don't rate this as a priority. Then people in the Southeast, particularly non-college educated, they're also generally speaking slower to get vaccinated. It depends how you look at things. What I like to think about is that people are making an important decision, should I put a needle and a vaccine in my body? For some people that's a very easy decision to make. For me and maybe for you, it was something that you felt quite confident with. You felt educated, you felt informed, and you trusted the institutions involved. For other people, it's a more considered decision. They have questions they want answered. They may not know that the emergency vaccine took 20 years to develop. They may not know of the data quite the way other people are paying more attention to. That doesn't make them anti-vaccine. In fact, most of them have gotten the rest of their vaccines. It's not necessarily the case that they won't get vaccinated. What we need to do is to patiently allow people to get their questions answered, to get the information they need, and do it with a reliable source. We're losing if they're going on Facebook to make this decision. We're winning if they're talking to people in their local community, doctors, pharmacists, and others, and they're not going to do it as quickly as necessarily everybody wants them to, but then again, that's as it should be. I think we have to be a little bit patient, a little bit zen, and as helpful as we can to get people the information they need.

LuAnn Heinen:

What do you think about lotteries, vaccine lotteries that are underway in several states? Didn't hear you mention that.

Andy Slavitt:

I think anything that draws attention to vaccinations for people who aren't paying a lot of attention is a good idea. It will allow them to pan out all the great ideas, not necessarily any one thing, but if you're someone who's 23, 24, 25, the idea of getting the COVID vaccine is like, you may not object to it, but there's probably 10 things you can think of that you'd rather do. I have a 23-year-old and what motivates him, he'll spend two hours and walk three miles to save \$2 on a subway sandwich. He'll eat dinner at like three 3:30 if he could save \$2, because that's just kind of like how he's wired. You never know what motivates people. We worked with dating apps, we worked with Anheuser-Busch, we worked lotteries, we worked with bars and restaurants, all of those things that just help attract people's attention to this are things that can't hurt. Ultimately people have to make their own decisions.

LuAnn Heinen:

What can businesses be doing to advance vaccination and the health of their employees, their customers, and their business. We know that there are a lot of ideas out there and we can share some of what our members are doing, but do you have a playbook for business?

Andy Slavitt:

I think what I would do is I would strongly encourage my employees to get vaccinated. If they didn't get vaccinated, I would say, that's fine, but that means that three times a week you may have to come in and get a negative COVID test. I might not make that as easy as possible to do. They might have to go someplace that's a little bit off campus. They might have to go there a little bit before work, early in the morning, because I want to be able to assure all of my workforce and my employees, people who visit our facilities and customers, that it's safe. I can do that by saying you're either vaccinated or you've had a recent negative test. At some point in time people might say, I'm tired of going to get this test three times a week, why don't I just get vaccinated? I think that's an approach that kind of respects everybody.

LuAnn Heinen:

Are you aware of anybody doing that?

Andy Slavitt:

Yes, every approach out there is being done. I would also make sure to offer my employees paid time off for the days they get vaccinated and for any days that they need to be out if they're feeling a little bit under the weather. There's a lot of people, particularly people who are hourly, if you're a hotel worker or you're working at an Amazon warehouse, or you don't want to miss an hour of work, you just can't afford to. You've got to tell people, look, you shouldn't have to go without pay to do this. For smaller employers, we've got a tax credit for that purpose. Larger employers, I don't believe need that tax credit. But you just shouldn't assume that everyone has easy access. I would help that process. If you've got only half of your employees that are vaccinated, I would have the other half of people talk about what that experience was like. I would have that as part of the overall messaging, so people can get comfortable and get their questions answered. Everybody's corporate culture is a little bit different and so I don't think you need to be coercive, but I think it is helpful for people to feel like, wow, everyone I know around me that I respect seems to be getting vaccinated, so maybe I ought to consider it

LuAnn Heinen:

How much effort should we be expending to increase U.S. vaccination rates versus, not that it's an either/or, but help other, especially lower-income countries who don't have enough vaccine.

Andy Slavitt:

It's not an either/or. It's a separate effort. We need enough vaccines so that any American knows of the proper age and wants vaccinated can get vaccinated and get vaccinated easily, and we've achieved that. I wouldn't compromise on that. Now it is our priority to lead the effort around the globe. In particularly low and moderate-income countries, we're going to have a Herculean effort over the next 18 months. That's going to require billions and billions of vaccines. It's going to require tens of billions of dollars. It's going to require leadership from the United States and it's going to require participation from every wealthy nation in the world.

LuAnn Heinen:

I'm going to call this an Andy Axiom from the book. One of the things you said about managing in crisis is the importance of creating several paths to success. You gave a telling example of how failing to do that and instead putting all our eggs in one basket, really set us back. I want to talk about how that happened

with the CDC test and then if you've read the recent *New York Times Magazine* article, *Can the CDC Be Fixed?*, maybe we can chat a little bit about that.

Andy Slavitt:

At the beginning of this crisis, as outlined in the book, there were a number of fateful decisions made and the Department of Health and Human Services decided that they were going to make a proprietary test. When you had every lab in the country, commercial and academic, they were all willing to make and introduced tests. Because time was of the essence, you either catch this thing and contain it, or it explodes on you and you can't contain it. They made a bad decision. When it turned out that the test they made didn't work, they were out of options. I try never to go into any effort without multiple ways to get through it. I've led two major crisis responses. As soon as you can build multiple paths, you do that. You can't always do it, but here they had no backup plan and that cost the country severely and dearly. That was dysfunctional decision-making at every level, and at every level, some of it was within CDC, some of it was FDA, some of it was HHS, and certainly all of it was the White House. Plenty of opportunity for learnings to go around.

Can the CDC be fixed? It has to be. You don't take great institutions and throw them out the window. You reform them, you improve them, you learn lessons. You have to ask yourself, what would you do without a CDC? It would be chaos, because you want the people who have studied the data, making the decisions, giving you recommendations and being transparent about it. We should always look back and say, what did they get right, what did they get wrong, and how can we improve things? But the minute you dismiss institutions like this, then you're basically, "well, I listened to Tucker Carlson; well, I listened to Rachel Maddow," and that's no way to get through a crisis like this or make any big decisions.

LuAnn Heinen:

I think that we all realize that it's been underfunded as an agency and not performing to its global reputation as the premier public health authority. Our member companies were frustrated by some of the sometimes faulty and often unclear guidance during the pandemic. That's been an issue even as recently as May. We've heard from our members about the CDC's new, unexpected guidance and how employers should implement it, creating kind of some confusion and chaos.

Andy Slavitt:

The truth is that, first of all, they're not always going to get it right. They're going to get it as right as they can, based on the data at the time and they're going to put out estoppel recommendations as possible. They're going to be a little bit slower, or that some people like a little bit faster than other people. I can tell you from having run an agency, I ran CMS, you are always either too fast or too slow and sometimes you're too fast and too slow at the same time. Occasionally the same people tell you you're too fast and you're too slow at the same time. One thing I've learned is that critics don't bear the responsibility for getting it wrong and so the CDC has to get these decisions as right as possible. When they get them wrong, they have to backtrack. You have to separate what happened in May and ask yourself how much of that is that wasn't the right guidance versus, wow, this is a big adjustment.

LuAnn Heinen:

There's a bit of that.

Andy Slavitt:

Some of it is, yeah, we believe we've trained ourselves to the dangers of being in tight spaces and without masks and so on and so forth, that when things change, this is actually what happens. If you go back and look at 1919, for six to nine months after the pandemic was over, large portions of the population didn't believe it and they kept saying, I can't believe this is going on. I think some of the reaction you're seeing, not to say that the CDC necessarily gets everything perfectly, but some of the reaction you're seeing is reaction we were going to see anyway,

LuAnn Heinen:

There wasn't going to be scientific guidance on some of the operational questions about do we require documentation, how do we not ostracize the non-vaccinated, how do we do all these things?

Andy Slavitt:

We're sort of used to government playing a big role in our lives with this pandemic, but at some point I think the CDC wisely said, look these are all decisions all made before. We'll put some guidance out, but all these decisions are not going to be appropriate for the federal government to tell you what the right answer is. If you are a business and if you don't feel comfortable with people coming in unless they can show they're vaccinated, then it's perfectly legal and appropriate for you to have a policy which says it. If you're a business that doesn't feel that that's the case, you can do that. A customer may decide what businesses to enter and which ones aren't, but at some level, once we get past the emergency stage, do we really want the CDC saying this is how it's going to work? And by the way, if they did, I'm quite sure people would ignore them if they didn't agree - governors, large corporations, retailers. Once the CDC was confident in the conclusion that if you're vaccinated, you don't have to worry about indoor spread, once they reach that conclusion, they did the responsible thing and they said that. If you're vaccinated and someone comes in and chooses not to wear a mask and they're not vaccinated, they're putting themselves at risk maybe, but they're not putting you at risk. Once they were confident with that, I think the guidance made it a lot of sense.

LuAnn Heinen:

Here we are today. Let's pivot and chat for just a second. I want to hear about the chapter you wrote on the room service pandemic and equity issues and who gets room service and who provides it.

Andy Slavitt:

One of the dirty little secrets of the pandemic is it wasn't equally hard on everybody. It was hard on everybody and in some ways, of course. We all lost social connections; it disrupted our lives. I had two sons graduated and then didn't get to go to graduations. I'm not saying those things are easy, but there were a lot of people who were able to basically live in some amount of comfort. Parts of the economy did quite well. There's people who made lots and lots of money. If you're living on one side of the room service pandemic walls, you can get Zoom and Amazon packages and Netflix and so forth, and you didn't feel extremely at risk every day. There were other people, and 70% of the population in some states, 40% in some states, 50%, that we called essential workers. Essential workers were the people that were doing all the other things to keep us in Zoom and Amazon and everything else. Some of those things were people working with hospitals, you need them. Some of those things were people working in meat packing plants, and working to deliver us food, and so on and so forth, and putting themselves at substantial risk. People weren't always conscious of what it was like on the other side of that wall, where people of color or people who get paid by the hour, people who were in occupations where they, by definition, had to get exposed to more people, were out there. In the rest of the world, the percentage of people that were in "essential obligations" was much, much, much lower. One of the reasons why we had much more spread and why the spread wasn't reduced is because we really did find to be the essential part of living through the pandemic was making sure that our standard of living for people who are used to things didn't suffer a lot.

There are some questions we need to look at about how we manage this. The book isn't out to say necessarily right and wrong, but it's to call attention and say, this is who we are.

LuAnn Heinen:

What many of us thought was hardship was really perhaps more of an inconvenience and a small constraint on our liberty for a greater good.

Andy Slavitt:

If you told me I could save some people's lives, even if I didn't know them, I don't know what decision I wouldn't make to do that. If you told me, Andy, you've got to give up your business or suffer some setbacks or keep your kid out of school, I would say that those are all horrible and life changing, but my kids can recover, I can build a business back, theoretically. When someone dies, you can't undie them. Sometimes it's happening to other people we don't see, but the truth is, I don't know anybody that wouldn't go out of their way to save people's lives if they could. We lost 600,000 people. We lost two to three times the amount per capita that we probably should have. There's a lot of reasons for that. What the book just says is, hey, let's take a look at some of the things that went on and ask ourselves, what do we need to talk about to make sure we do this better next time. Some of it's about who was President, but not all of it. Some of it's about just the structure of our society. Some of it's about our experience with public health crisis. The book doesn't try to hit you over the head with a moral lesson. It follows the life of an Amazon warehouse worker, follows the life of a doctor and a nurse, it follows the life of a few people in the White House who were making decisions all during the pandemic. By the time you're done reading the book, you need to draw your own conclusions.

LuAnn Heinen:

With all the passion and the mojo that you bring to this ginormous problem and believing that you burn the candle on both ends when you're working and particularly when you're fighting COVID, without your family in Washington, and you once said, I'll sleep when the pandemic is over. Are we there? Is turning COVID into a manageable challenge letting you sleep at night. How are you sleeping?

Andy Slavitt:

It's interesting you ask it that way, because we were obviously working hard and working long hours when I was in the White House. I found that even when I was done for the few hours that I would sleep, I didn't really sleep very well. I was just stressed. It was just very stressful. I actually reached the conclusion that sometimes on some occasions, you're actually probably not supposed to have a good night's sleep and if you're asked by the President to help end this pandemic and save lives because so many Americans were not having a good night's sleep, probably made sense for us not to have a good night's sleep until we conquered this. Again, I don't think it's fully conquered, but I do feel a lot better. I should be getting back to the mode soon where I'm able to sleep through the night again, but working on it.

LuAnn Heinen:

What are your big takeaways when it comes to preventing a future pandemic from scaling so disastrously?

Andy Slavitt:

There's three different types of mistakes made. One was a set of technical mistakes. We need to correct those and we need to do better with the CDC and the FDA, etc., that's not the most complex. We need better political leadership. Populism does not go well with running a pandemic, but if people want to make decisions that please everybody, there is just too many tough decisions required. Then third is, I think we need to have a dialogue, actually before you even get to the next pandemic, it's what happens after the pandemic. I would just give you one quick example before I go, which is, we saw with our own eyes during the pandemic that there are a number of kids that don't have internet at home, so they couldn't study. We saw that there were a number of kids that couldn't eat lunches because they got lunch through school. Okay, that was true before the pandemic. That was true during the pandemic. It's entirely up to us whether it's going to be true after the pandemic. If we don't correct these situations, if we allow the kids to go home and they can't study and they can't have access to the internet and they can't eat, then I don't have a lot of confidence that somehow we're going to rally before the next pandemic and do a lot better. Some of the things we'll be able to protect ourselves with the CDC and other forces, but they're not perfect. The last line of defense is not the CDC. The last line of defense is us

and how we choose to protect ourselves and each other. I hope that some of the things that change coming out of this pandemic will change right away.

LuAnn Heinen:

I love that. That last line of defense is how we live and choose to protect each other. Thank you so much, Andy. It was great having you.

Andy Slavitt:

You too. Great talking to you.

LuAnn Heinen:

I've been speaking with Andy Slavitt about what went wrong in the U.S. COVID-19 response, how vaccines have turned the tide, and where we need to go from here to turn this progress into a lasting victory. Andy's book, *Preventable*, is out now. You can follow him @ASlavitt on Twitter.

I'm LuAnn Heinen and this podcast was produced by Business Group on Health with Connected Social Media. If you've enjoyed the conversation, please give us a review.