



THE ATLAS DOGMA:
**THE TRUMP ADMINISTRATION'S EMBRACE
OF A DANGEROUS AND DISCREDITED HERD
IMMUNITY VIA MASS INFECTION STRATEGY**

STAFF REPORT
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EXECUTIVE SUMMARY

For the past two years, the Select Subcommittee on the Coronavirus Crisis has been investigating the federal government's response to the coronavirus pandemic to ensure the American people receive a full accounting of what went wrong and to determine what corrective steps are necessary to ensure our nation is better prepared for any future public health crisis.¹ To those ends, the Select Subcommittee has conducted an exhaustive investigation into the extent to which senior Trump Administration officials undermined the federal public health response in an attempt to advance former President Donald Trump's perceived political interests.

This report is the first installment of the Select Subcommittee's findings showing that the Trump Administration's political interference was rampant and degraded every major facet of the nation's public health response during the first year of the pandemic. It is based on a series of transcribed interviews with senior officials involved in the federal government's pandemic response, including White House Coronavirus Response Coordinator Dr. Deborah Birx, Centers for Disease Control and Prevention (CDC) Director Dr. Robert Redfield, Food and Drug Administration (FDA) Commissioner Dr. Stephen Hahn, Department of Health and Human Services (HHS) Assistant Secretary for Health Admiral Brett Giroir, and Special Advisor to the President Dr. Scott Atlas, as well as a review of thousands of pages of internal correspondence and other documents obtained by the Select Subcommittee.

This installment chronicles the Trump Administration's embrace of a dangerous and discredited herd immunity via mass infection strategy as they failed to curb the spread of the coronavirus. New evidence obtained by the Select Subcommittee and released for the first time today reveals that support for this herd immunity strategy in the Trump White House was deeper and more wide-reaching than previously known. The embrace of this strategy enabled Trump Administration officials to convince themselves that they were right to do nothing to limit the spread of the virus in the second half of 2020 and likely resulted in many deaths that would have been prevented by an effective national mitigation strategy.²

Findings released by the Select Subcommittee show the following:

Outspoken Proponents of a Dangerous and Discredited Herd Immunity Strategy Attempted to Influence the Trump Administration's Pandemic Response from the Earliest Months of the Coronavirus Crisis

- Although he did not join the White House until July 2020, Dr. Atlas began attempting to influence federal pandemic policy soon after the start of the coronavirus crisis. New evidence obtained by the Select Subcommittee shows that Dr. Atlas reached out to Centers for Medicare & Medicaid Services (CMS) Administrator Seema Verma on March 21, 2020, arguing that the federal government's pandemic response was "a massive overreaction" that was "inciting irrational fear" in Americans. Dr. Atlas estimated that the coronavirus "would cause about 10,000 deaths"—a number he claimed "would be unnoticed" in a normal flu season—and said, "The panic needs to be stopped."

- During a transcribed interview, Dr. Birx told the Select Subcommittee that Dr. Atlas’s “influence began much earlier than his July 2020 arrival into the White House,” and that Dr. Atlas may have provided senior White House leaders “biased” data before he was hired to support his claim that “the disease was no worse than the flu.”
- Dr. Atlas’s advocacy was echoed by other senior Trump Administration officials. Dr. Paul Alexander—a Senior Advisor to HHS Assistant Secretary for Public Affairs Michael Caputo who was recruited by the Trump Administration in April 2020—pushed the Administration to adopt a herd immunity strategy, writing to senior HHS officials in a July 2020 email previously released by the Select Subcommittee: “Infants, kids, teens, young people, young adults, middle aged with no conditions etc. have zero to little risk....so we use them to develop herd...we want them infected....”

The Trump Administration Secretively Hired Dr. Atlas in July 2020 and Initially Concealed His Role Before Giving Him Sweeping Access to Top White House Officials

- In July 2020, White House Senior Adviser Jared Kushner furtively hired Dr. Atlas to “help advise the president” on pandemic policy. New evidence obtained by the Select Subcommittee shows that Mr. Kushner initially took steps to conceal Dr. Atlas’s hiring for several weeks. Dr. Atlas informed the Select Subcommittee in a transcribed interview that Mr. Kushner instructed him not to announce himself on conference calls and directed him to hide his White House identification card in his briefcase before his first meeting with Dr. Birx.
- Later, after his role was publicly announced, Dr. Atlas was given an office in the White House and was granted extensive access to the highest levels of government. According to Director Redfield, Dr. Atlas “had the ear” of the president on pandemic policy. Confirming prior reports, Dr. Birx told the Select Subcommittee she had reason to believe that President Trump received “parallel data streams” from Dr. Atlas that differed from the data provided by the White House Coronavirus Task Force, and that this information influenced President Trump to downplay the severity of the virus and reject many mainstream mitigation measures.
- Mr. Kushner included Dr. Atlas in a series of meetings referred to as “China Virus Huddles.” These meetings—which were used to hone the White House’s coronavirus messaging and address key “operational aspects” of the response outside of the White House Coronavirus Task Force structure—were run by Mr. Kushner and attended by an exclusive group of President Trump’s inner circle, including Senior Counselor to the President Kellyanne Conway and Assistant to the President Hope Hicks.

Dr. Atlas Advanced His Dangerous and Discredited Herd Immunity Strategy Within the Trump Administration

- The Select Subcommittee’s investigation has uncovered internal memoranda used by Dr. Atlas to push the Trump Administration to jettison non-pharmaceutical mitigation measures and deliberately reduce testing—months before the first coronavirus vaccines were available to the public.

- One undated memorandum obtained by the Select Subcommittee called “Strategy for Moving Forward: Covid-19,” criticized the pandemic response strategy advocated by mainstream public health officials and argued: “Stopping all cases is not necessary, nor is it possible. It instills irrational fear into the public.” The memorandum also argued that widespread testing “sets up an unattainable goal that is harming this president.”
- At Mr. Kushner’s request, Dr. Atlas provided input on a draft speech written for President Trump. The speech—which overlapped substantially with the “Strategy for Moving Forward: Covid-19” memorandum—asserted that the “strategic focus of our targeted strategy” would protect “the high-risk group” but would otherwise lift mitigation measures and redirect the response so that it no longer “interferes with the fastest route to eradicating the virus, population immunity.” While this speech was not delivered, Dr. Atlas’s involvement in the drafting of remarks on this topic, combined with the existence of a pro-herd immunity strategy memorandum, suggests that this approach was gaining currency among senior Administration officials.
- Dr. Atlas also used his newfound position of power to recruit herd immunity proponents to come to Washington, D.C., to meet with multiple senior Administration officials and, according to Director Redfield, “convince people that herd immunity was going to save us, and this thing was going to go bye-bye.” In August 2020, Dr. Atlas successfully arranged for three herd immunity proponents to meet with President Trump and Vice President Mike Pence to discuss their views on the pandemic response—which went forward despite Dr. Birx expressing concerns to the Vice President’s Chief of Staff Marc Short and other senior officials and refusing to attend. In October 2020, Dr. Atlas coordinated a meeting between HHS Secretary Alex Azar and the authors of the discredited “Great Barrington Declaration,” which advocated for the herd immunity strategy that Dr. Atlas was actively promoting. Secretary Azar issued a tweet after the meeting recognizing that the approach articulated by the Great Barrington Declaration authors was a “strong reinforcement” of the Trump Administration’s ongoing response strategy.

Dr. Atlas Successfully Pressed the Trump Administration to Weaken CDC’s Testing Guidance and Reduce Coronavirus Testing, Without Any Countervailing Mitigation Measures, Well Before Vaccines Became Available

- New evidence obtained by the Select Subcommittee shows that Dr. Atlas set in motion significant changes to CDC’s testing guidance within days of arriving in the White House that would upend CDC’s public health recommendations by minimizing the need for widespread testing and undercutting policies that could mitigate the spread of the coronavirus. On August 3, 2020, Dr. Atlas prepared a memorandum titled “Specific Notes on Prioritized Testing,” which argued that testing was playing an outsized role in the response, saying: “people have been convinced that ‘testing, testing, testing’ is urgent for everyone—that is false.” He claimed that it was “harmful to do massive testing, especially since actions on many positive tests are not always necessary.”
- Director Redfield revealed in a transcribed interview with the Select Subcommittee that “significant people” inside the Trump Administration made clear shortly after Dr. Atlas

arrived that “there needed to be some curtailment of the amount of testing that was done as relating to evaluating people that were exposed.” Dr. Redfield and other former Trump Administration officials told the Select Subcommittee that Dr. Atlas spearheaded changes to CDC’s testing guidance to stop recommending that all close contacts of individuals with coronavirus get tested. Admiral Giroir, the Trump Administration’s “Testing Czar,” told the Select Subcommittee that the White House Coronavirus Task Force approved a draft version of the weakened testing guidance that included a recommendation that all close contacts isolate for 14 days. The weakened testing guidance was published on August 24, 2020; to Dr. Giroir’s surprise, the isolation recommendation was not included.

- Dr. Atlas became enraged after CDC restored its original recommendation—that all close contacts be tested—and added a 14-day isolation period on September 18, 2020. Dr. Redfield told the Select Subcommittee that Dr. Atlas “aggressively spoke to me in loud terms” and accused Dr. Redfield of not having the approval to make the changes. Admiral Giroir told the Select Subcommittee that he recognized the potential that “somebody wanted to fire me” for his involvement in restoring the original testing recommendation.
- Dr. Birx told the Select Subcommittee that the August 24, 2020, guidance ultimately resulted in a “dramatic decline of the number of tests performed during the end of August and the beginning of September.” In a September 16, 2020, email obtained by the Select Subcommittee, Dr. Atlas acknowledged to other senior White House officials that testing had decreased, but argued that “the ‘alarm’ of fewer tests makes no sense.” He claimed that “pushing more testing is destructive to opening” given that people who tested positive would have to quarantine and further proposed an “ACTION” to make PCR tests less sensitive.

Dr. Atlas Sought to Undermine the Use of Masks to Curb the Spread of the Coronavirus

- Dr. Atlas revealed to the Select Subcommittee that he attended a meeting with Mr. Kushner and other White House officials, during which Mr. Kushner read a draft tweet for President Trump that recommended everyone wear a mask to help slow the spread of the virus. Dr. Atlas advised against sending the tweet—because, among other reasons, he believed it was “not consistent” with other anti-mask statements the President had made.
- New documents obtained by the Select Subcommittee show that Dr. Atlas circulated a “Statement Regarding the Effectiveness of Masks in Preventing Spread of COVID-19” to senior White House officials, including White House Chief of Staff Mark Meadows, Mr. Kushner, Mr. Short, White House Press Secretary Kayleigh McEnany, and White House Office of Trade and Manufacturing Policy Director Peter Navarro, on October 4, 2020, asserting: “The President has been right all along.” In the cover email attaching this document, Dr. Atlas mocked then-candidate Joe Biden’s embrace of then-prevailing public health practices, writing: “Joe Biden’s policy is mask mandates and lockdowns. That is also the CNN and MSNBC attack narrative.” Dr. Atlas falsely told

the senior White House officials: “the research studies, the best data, indicates that general masks are not effective.”

Top Trump Administration Officials Ignored Multiple Warnings About the Potential for Harm and Embraced Dr. Atlas’s Herd Immunity Strategy, Resulting in Preventable Illness and Death

- Dr. Atlas told the Select Subcommittee that Mr. Meadows, Ms. Hicks, Mr. Short, and HHS Deputy Chief of Staff Paul Mango, among others, came to support at least some of the pandemic policy views he was urging the Administration to adopt. He also said that he inferred that President Trump “was in agreement” with his views on the pandemic, given President Trump’s “own words.”
- Director Redfield said that Dr. Atlas “successfully got a lot of people within the Task Force and the White House to believe that all we had to do was get to herd immunity” in order to contain the virus. Dr. Birx similarly said that Dr. Atlas’s herd immunity approach gained steam inside the White House throughout the fall of 2020. Doctors on the White House Coronavirus Task Force took their concerns to Mr. Kushner and Mr. Short, but no action was taken. Dr. Birx told the Select Subcommittee that Vice President Pence was “well aware” of her concerns regarding Dr. Atlas’s impact on the White House coronavirus response.
- With Dr. Atlas’s influence fully entrenched, the Trump White House did little to attempt to curb the spread of the coronavirus in the fall and winter of 2020 and early 2021—even as outbreaks surged across the country. With Dr. Atlas providing a veneer of scientific backing for inaction to protect public health, the Trump Administration instead focused on downplaying the threat of the virus leading up to the November presidential election and on advancing the Big Lie in the weeks that followed.
- Dr. Birx informed the Select Subcommittee that more than 130,000 American lives could have been saved after the first wave of the pandemic if President Trump and his Administration had implemented “optimal mitigation across this country.” Multiple studies have likewise indicated that the widespread adoption of masks and other non-pharmaceutical mitigation measures could have prevented numerous lives lost during the fall and winter 2020-2021. More Americans died from the coronavirus from November 2020 through February 2021 than during any other four-month period throughout the entirety of the pandemic.

I. The Trump White House Recruited an Outspoken Proponent of a Dangerous and Discredited Herd Immunity Strategy

As early as March 2020—the same month that President Donald Trump first declared the coronavirus a national emergency amid thousands of Americans contracting a novel virus for which there were no known treatments or vaccines³—Dr. Scott Atlas was downplaying the risk posed by the coronavirus and advocating against the federal government taking meaningful action to mitigate its spread. A Senior Fellow at the conservative think tank the Hoover Institution and former adviser to Rudy Giuliani’s presidential campaign, Dr. Atlas was one of the

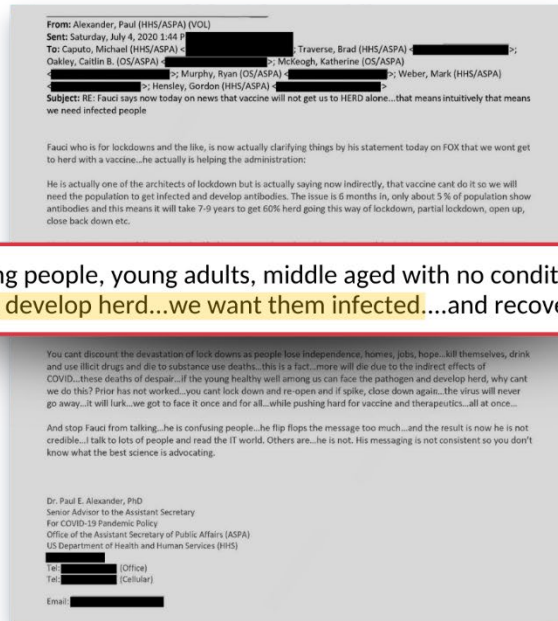
earliest and most vocal opponents of public health measures designed to mitigate the spread of the virus and prevent the collapse of the nation’s hospital systems.⁴ Although he was a radiologist by training and did not have a background in infectious diseases, Dr. Atlas appeared on *Fox News*, *One America News Network*, and other conservative media platforms in the spring of 2020 to attack mainstream public health measures and call for a vastly different approach to the pandemic.⁵ In an April 22 op-ed published in *The Hill*, Dr. Atlas argued that “[t]he overwhelming majority of people do not have any significant risk of dying from COVID-19” and that “[v]ital population immunity is prevented by total isolation policies, prolonging the problem.”⁶

On March 21, 2020, Dr. Atlas sent an email to CMS Administrator Seema Verma to advocate against “the need for lockdown and even the frantic need for urgent testing,” calling the federal government’s approach to combating the virus “a massive overreaction” that was “inciting irrational fear” in Americans. Dr. Atlas stated that the early data showed the “virus would cause about 10,000 deaths”—a number that he claimed “would be unnoticed” in a normal flu season—and argued that “[t]he panic needs to be stopped.”⁷ In the months that followed, Dr. Atlas and other proponents of his fringe views on the coronavirus became increasingly influential in shaping government policy. Despite lacking expertise in infectious diseases, Dr. Atlas would go on to informally advise Florida Governor Ron DeSantis on the coronavirus⁸—eventually leading to a job advising President Donald Trump and formulating pandemic-related policies in the Trump White House.

The herd immunity strategy pushed by Dr. Atlas was premised on the theory that the best response to the pandemic was to expose enough people to the virus—without any vaccines and few effective treatments—so that a large enough portion of the population would become immune and stop the virus from spreading widely.⁹ A central element of the strategy was so-called “focused protection,” which assumed that “high risk” individuals—such as the elderly and individuals with underlying medical conditions like obesity, diabetes, or heart disease—could be easily identified and effectively isolated while the rest of society resumed pre-pandemic life and were even encouraged to become infected.¹⁰ Then, when enough of the “low risk” individuals had been infected and developed immunity (a threshold that was unknown and, as it turned out given waning immunity and the emergence of new variants capable of evading prior immunity, likely unattainable), the “focused protection” could end and everyone could resume their normal lives with the protection of herd immunity.

Leading public health experts recognized that this approach was not implementable in practice. Even if it had been possible to accurately designate every American as high or low risk, experts warned that it would not have been possible to fully isolate all high-risk individuals from any possible exposure to the coronavirus, particularly in areas with high community spread.¹¹ This view was held by White House Coronavirus Response Coordinator Dr. Deborah Birx, who told the Select Subcommittee in a transcribed interview that “the majority of Americans that were over 70 and most vulnerable” were “often in the community with multigenerational households of essential workers or other workers” and that “there was no way to isolate the vulnerable family member from the other family members.”¹²

Even before Dr. Atlas’s hiring, at least one Trump Administration official was aggressively advocating for a herd immunity strategy. Throughout the early months of the pandemic—as Dr. Atlas appeared on television claiming it was “a good thing” that “younger, healthier people get infected... because that’s exactly the way that population immunity develops”—an HHS political appointee, Dr. Paul Alexander, was pushing Trump Administration officials to adopt this strategy.¹³ For example, on July 4, 2020, Dr. Alexander wrote to senior HHS officials urging: “There is no other way, we need to establish herd, and it only comes about allowing the non-high risk groups expose themselves to the virus. PERIOD.” In a follow-up message, Dr. Alexander elaborated:¹⁴



Infants, kids, teens, young people, young adults, middle aged with no conditions etc. have zero to little risk....so we use them to develop herd...we want them infected....and recovered...with antibodies....

Despite the widespread rejection of a disease-acquired herd immunity strategy by the mainstream scientific community,¹⁵ this strategy caught the attention of the Trump White House as it searched for a way to deflect from the President’s disastrous coronavirus response in the lead-up to the 2020 presidential election. During a transcribed interview, Dr. Birx told the Select Subcommittee that senior leaders in the White House appeared to be influenced by Dr. Atlas’s fringe theories as early as late March 2020, speculating that Dr. Atlas may have been providing them with “biased antibody data out of California that the virus was much more widespread” and “the disease was no worse than flu.”¹⁶

In mid-July 2020, John McEntee, the Director of the White House Presidential Personnel Office, invited Dr. Atlas to come to the White House to meet with senior Trump Administration officials. During a series of one-on-one meetings with Vice President Mike Pence, White House Chief of Staff Mark Meadows, White House Senior Adviser Stephen Miller, White House Press Secretary Kayleigh McEnany, and other officials, Dr. Atlas discussed his perception that the coronavirus posed a low risk to the vast majority of Americans and that mitigation measures should be eliminated.¹⁷

Dr. Atlas also met with President Trump in the Oval Office, along with White House Senior Adviser Jared Kushner. During a transcribed interview, Dr. Atlas informed the Select Subcommittee that President Trump asked about his views on a variety of subjects related to the coronavirus during this meeting, including his opinion on “lockdowns,” Sweden’s approach to the pandemic, and the drug hydroxychloroquine—even though FDA had revoked its authorization as a coronavirus treatment the prior month.¹⁸ Later that day, Mr. Kushner asked Dr. Atlas if he “would help advise the president” on pandemic policy, and Dr. Atlas agreed. Dr. Atlas told the Select Subcommittee that Mr. Kushner was concerned about public scrutiny arising from Dr. Atlas taking a position in the White House, and initially arranged for Dr. Atlas to work from his home in California.¹⁹ This remote arrangement quickly proved ineffective, so beginning on or around July 30, 2020, Dr. Atlas came to Washington to work in person at the White House. His title was Special Advisor to the President.²⁰

Upon Dr. Atlas’s arrival, Mr. Kushner continued to conceal his hiring both from Trump Administration officials and from the public. Dr. Atlas recounted to the Select Subcommittee that Mr. Kushner directed him not to mention his hiring to Dr. Birx and to hide his White House identification card in his briefcase so Dr. Birx would not see it during their initial meeting. Mr. Kushner also instructed Dr. Atlas not to announce himself on conference calls in his first weeks advising President Trump so that his participation would stay hidden from the other participants. Dr. Atlas explained that Mr. Kushner said that these steps were necessary because Dr. Birx “would be extremely sensitive and upset and threatened if I came in.”²¹ Dr. Birx confirmed to the Select Subcommittee that she was not aware of Dr. Atlas’s hiring and “didn’t know of any of his prior engagements with the White House” when Mr. Kushner first asked her to meet with Dr. Atlas around the end of July 2020.²²

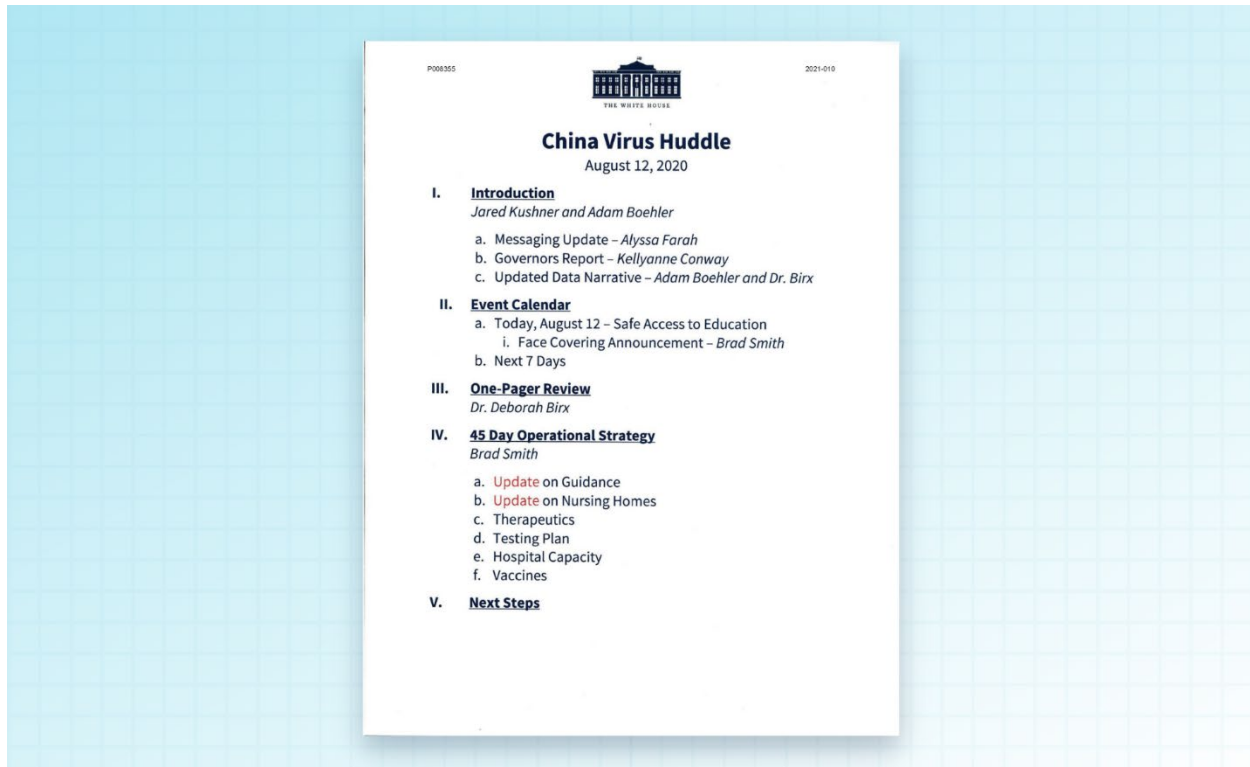
President Trump publicly announced that Dr. Atlas had been hired as a White House adviser on the pandemic during a press briefing on August 12, 2020.²³ Following that announcement, Dr. Atlas would take on a more prominent role within the Trump Administration in directing pandemic policy and communicating those policies to the public. With Dr. Atlas firmly entrenched, Dr. Birx noted that “inside the White House is a person that is basically wanting community spread to increase.”²⁴

II. Dr. Atlas Received Wide Access Inside the Trump White House and Became an Influential Voice Pushing for Herd Immunity Policies

As has been reported previously, Dr. Atlas was given an office at the White House and was granted extensive access to the highest levels of the federal government’s pandemic response.²⁵ For instance, Dr. Atlas was added as a member of the White House Coronavirus Task Force in mid-August 2020, which allowed him to participate directly in Task Force meetings led by Vice President Pence and attended by Cabinet members and other senior officials.²⁶ In this role, Dr. Atlas was able to influence the Administration’s pandemic response policies in critical ways, including orchestrating significant changes to public health guidance.²⁷

The Select Subcommittee’s investigation found that Dr. Atlas participated in a series of meetings that the Trump White House referred to internally as “China Virus Huddles.” Separate from the White House Coronavirus Task Force, these meetings were run by Mr. Kushner and attended by an exclusive group of senior Trump Administration officials, including Dr. Birx,

Senior Counselor to the President Kellyanne Conway, Assistant to the President Hope Hicks, and HHS Deputy Chief of Staff for Policy Paul Mango.²⁸ Dr. Atlas informed the Select Subcommittee that these meetings were held three times a week and were used to hone the Trump White House’s messaging on the pandemic.²⁹ Dr. Birx said these meetings were also used to address key “operational aspects” of the federal government’s coronavirus response.³⁰



Dr. Atlas received direct access to President Trump and, according to CDC Director Dr. Robert Redfield, “had the ear” of the president when it came to advising on pandemic policy.³¹ During a transcribed interview with the Select Subcommittee, Dr. Atlas recounted that he attended at least a half dozen “pre-briefings” with the president in the Oval Office, which occurred before President Trump held press conferences on the coronavirus response. In these briefings, Dr. Atlas conveyed to President Trump strategies and recommendations that were consistent with his herd immunity theory.³² Dr. Atlas also reviewed and provided edits on President Trump’s public remarks, which incorporated aspects of Dr. Atlas’s theories.³³ The Trump White House also authorized Dr. Atlas to publish at least two op-eds in his formal capacity as a Special Advisor to President Trump and member of the White House Coronavirus Task Force, both of which advanced elements of his herd immunity theory.³⁴

Dr. Birx told the Select Subcommittee that “parallel data streams” flowed into the Oval Office during Dr. Atlas’s White House tenure and influenced President Trump to downplay the severity of the virus and reject many science-backed mitigation measures.³⁵ Dr. Birx also confirmed that Dr. Atlas’s data likely made their way into certain public statements by President Trump and were “not consistent with the information” she provided.³⁶

III. At Dr. Atlas’s Urging, Trump Administration Officials Promoted a Herd Immunity Strategy, with Deadly Consequences

After joining the White House, Dr. Atlas sought to build support for his herd immunity strategy inside the Trump Administration and redirect the federal government’s pandemic response away from proven public health measures. The Select Subcommittee’s investigation uncovered documents prepared by Dr. Atlas and new details of key meetings coordinated by Dr. Atlas with senior officials to push the Administration to jettison mitigation measures and reduce testing in an effort to hasten reaching disease-acquired herd immunity while vaccines were still in development.

During his first days in the White House, Dr. Atlas drafted memoranda outlining his views on the need to lift public health measures for the vast majority of Americans and reduce broad surveillance testing.³⁷ One undated memorandum obtained by the Select Subcommittee from Dr. Atlas was titled “Strategy for Moving Forward: Covid-19.” This memorandum criticized the pandemic response strategy advanced by leading public health officials and claimed that the response was harming President Trump:

*** The current strategy is misguided, because it is focused too broadly on “stopping all cases” and widespread testing. Stopping all cases is not necessary, nor is it possible. It instills irrational fear into the public. Non-prioritized testing is jeopardizing critical resources for truly critical testing and is creating problematic delays in test results for the most important populations. Moreover, it sets up an unattainable goal that is harming this president. Instead, we need a strategic policy that leverages what we now know, and what can be accomplished, and we need to instill new confidence in the American people.**

The memorandum argued that such policies impaired efforts to reach herd immunity and emphasized the existence of “emerging research adding insights into immunity and suggesting that herd immunity may arise with a far lower population infection rate than originally thought.” The memorandum also advocated for lifting mitigation measures for lower-risk groups and discontinuing broad surveillance testing, while acknowledging that such action would cause cases to increase—stating, “We *expect* to see more cases with more social interactions, because this is a contagious disease[.]”³⁸

In early August 2020, Mr. Kushner asked Dr. Atlas to provide input on a draft speech for President Trump outlining the core tenets of a new “prioritized, targeted approach” for the federal government’s pandemic response.³⁹ According to Dr. Atlas, the purpose of the speech was to detail the Administration’s “overall strategy” and “to outline what was happening with the pandemic and what’s going to be done.”⁴⁰ The content of the draft speech contained significant overlap with the “Strategy for Moving Forward: Covid-19” memorandum, and it delineated specific strategies that Dr. Atlas was advising the Administration to implement.⁴¹ Among other contentions, the draft speech asserted that the “strategic focus of our targeted strategy” would “protect the high-risk group” but would otherwise lift mitigation measures and redirect the

response so that it no longer “interferes with the fastest route to eradicating the virus, population immunity.”⁴² While this speech was not delivered,⁴³ Dr. Atlas’s involvement in the drafting of remarks on this topic, combined with the existence of a pro-herd immunity strategy memorandum, suggests that this approach was gaining currency among senior Administration officials.

a. Dr. Atlas Recruited Proponents of a Herd Immunity Strategy to Advocate for Its Adoption by the Trump Administration

Within weeks of arriving in the White House, Dr. Atlas set out to arrange a roundtable event in the Oval Office to build support among senior Trump Administration officials for his herd immunity strategy.⁴⁴ In August 2020, Dr. Atlas invited Dr. Jay Bhattacharya, Dr. Martin Kulldorff, Dr. Joseph Ladapo, and Dr. Cody Meissner—all of whom supported this approach—“to speak with the President and the Vice President” and other Administration officials about the pandemic response.⁴⁵ The initial date selected for the event was canceled because Dr. Birx was scheduled to be out of town, prompting Dr. Atlas and the White House to seek an alternative date to ensure that Dr. Birx could attend.⁴⁶ Around this time, Dr. Birx sent an email to National Institutes of Allergy and Infectious Diseases Director Dr. Anthony Fauci, FDA Commissioner Dr. Stephen Hahn, and Director Redfield, warning of the “Atlas Dogma,” which she said represented “a true threat to a comprehensive and critical response to this pandemic” that would “reverse months of incredibly hard won gains” if it was “allowed to gain traction.”⁴⁷ The White House ultimately rescheduled Dr. Atlas’s roundtable event for August 26, 2020.⁴⁸

The day before the roundtable was set to occur, Dr. Birx emailed Vice President Pence’s Chief of Staff Marc Short, saying:

From: "Birx, Deborah L. EOP/NSC" <[REDACTED]>
Date: Tuesday, August 25, 2020 at 7:55 AM
To: "Short, Marc T. EOP/OVP" <[REDACTED]>
Subject: FW: For Review: Draft POTUS Remarks - Meeting with Medical Experts

I can't be part of this with these people who believe in herd immunity and believe we are fine with only protecting the 1.5M Americans in LTCF and not the 80M + with co-morbidities in the populations included the unacceptable death toll among Native Americans, Hispanics and Blacks. With our current mitigation scenario we end up near 300K by Christmas and 500K by the time we have vaccine – close to the 600K live lost with 1918 Flu. We have worked to find a path that is the least disruptive to the economy but moves us under R1 and saves both the economy and American lives. Without masks and social distancing in public and homes we end up with twice as many deaths – we are a very unhealthy nation with a lot of obesity etc – we will never look as good as even Sweden due to our co-morbidities. These are people who believe that all the curves are predetermined and mitigation is irrelevant – they are a fringe group without grounding in epidemics, public health or on the ground common sense experience. I am happy to go out of town or whatever gives the WH cover for Weds. Perhaps do Annapolis and meet with Hogan. Fauci and I could probably do it together – I am open to options. Deb

Dr. Birx wrote that the group of doctors Dr. Atlas invited to the White House were “a fringe group without grounding in epidemics, public health or on the ground common sense experience,” and she offered to “go out of town or whatever gives the WH cover” for her

absence. Dr. Birx also forwarded materials she received for the roundtable event to Dr. Fauci, Commissioner Hahn, and Director Redfield, telling them, “I just can’t.”⁴⁹

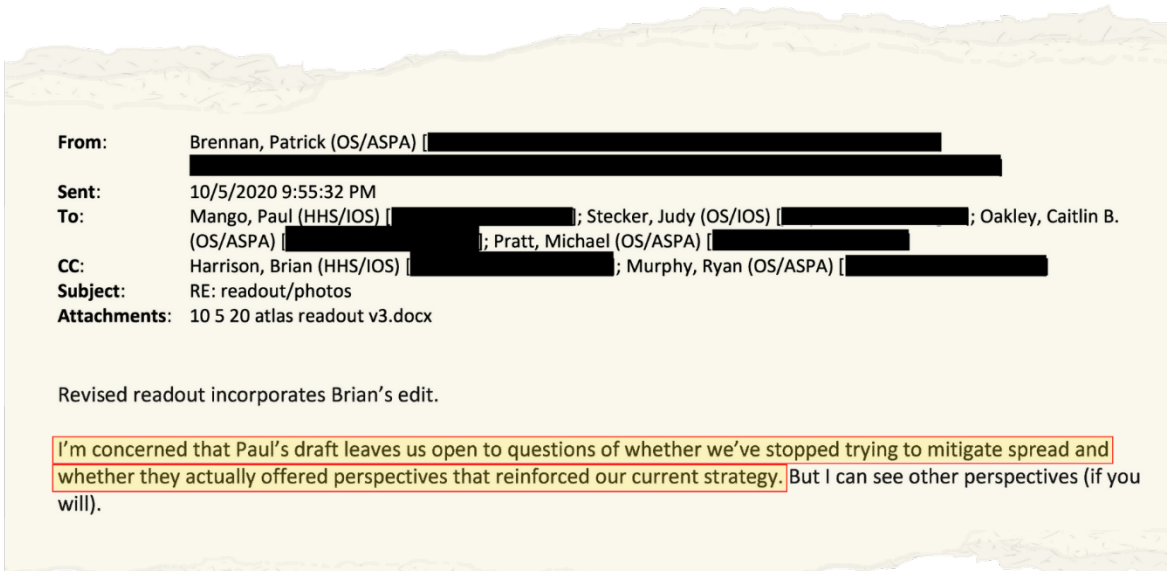
Upon learning that Dr. Birx was refusing to attend the event, Mr. Kushner suggested to Dr. Atlas that the White House cancel it altogether. Dr. Atlas told the Select Subcommittee this recommendation made him “very upset,” and that he told Mr. Kushner canceling the meeting would be “unacceptable” and insisted that President Trump meet with the group.⁵⁰ Dr. Atlas’s position prevailed, and the roundtable occurred as scheduled on August 26, 2020, lasting “far longer” than the time that had been allotted for the event, according to Dr. Atlas.⁵¹ Discussion points for the roundtable reflect that the conversation focused on the “[r]ole of testing and why” and the “[l]atest on immunity and susceptibility to the virus,” among other items.⁵² According to Dr. Atlas, President Trump actively engaged with the doctors during the meeting, soliciting their views on the pandemic response. The following day, Vice President Pence met with Dr. Atlas and the same group of doctors to discuss similar issues.⁵³

Dr. Birx told the Select Subcommittee that she believed these meetings were “dangerous” and feared that “any credibility given to these individuals in this moment while we were headed into the fall would be dangerous for our overall response and ability to contain the virus.”⁵⁴ According to Director Redfield, Dr. Atlas brought these individuals to the White House specifically “to convince people that herd immunity was going to save us, and this thing was going to go bye-bye.”⁵⁵

As previously reported, Dr. Atlas arranged another meeting between senior Trump Administration officials and herd immunity proponents—this time bringing them to HHS’s headquarters in Washington, D.C. Working with Mr. Mango, Dr. Atlas arranged for Dr. Bhattacharya, Dr. Kulldorff, and Dr. Sunetra Gupta to meet with HHS Secretary Alex Azar in early October 2020.⁵⁶ The day before this meeting took place, the three individuals scheduled to meet with Secretary Azar released the “Great Barrington Declaration,” which advocated for the herd immunity strategy that Dr. Atlas was actively promoting inside the White House.⁵⁷ National Institutes of Health Director Dr. Francis Collins stated publicly that the approach advocated in the Great Barrington Declaration:

[I]s not mainstream science. It’s dangerous. It fits into the political views of certain parts of our confused political establishment... I’m sure it will be an idea that someone can wrap themselves in as a justification for skipping wearing masks or social distancing and just doing whatever they damn well please.⁵⁸

Secretary Azar met with Dr. Atlas and the three authors of the Great Barrington Declaration for approximately 30 minutes on October 5, 2020, during which they discussed a range of topics on which Dr. Atlas’s herd immunity strategy centered.⁵⁹ Following the meeting, Dr. Atlas and Mr. Mango worked with HHS personnel to craft public messaging to be released by Secretary Azar, exchanging multiple drafts.⁶⁰ In an internal email obtained by the Select Subcommittee, an HHS communications official expressed concern about publicly releasing details of the meeting, remarking: “I can’t think of what we can do such that almost all headlines are anything but ‘Azar Meets with Herd Immunity Advocates.’”⁶¹ The same official also advised:⁶²



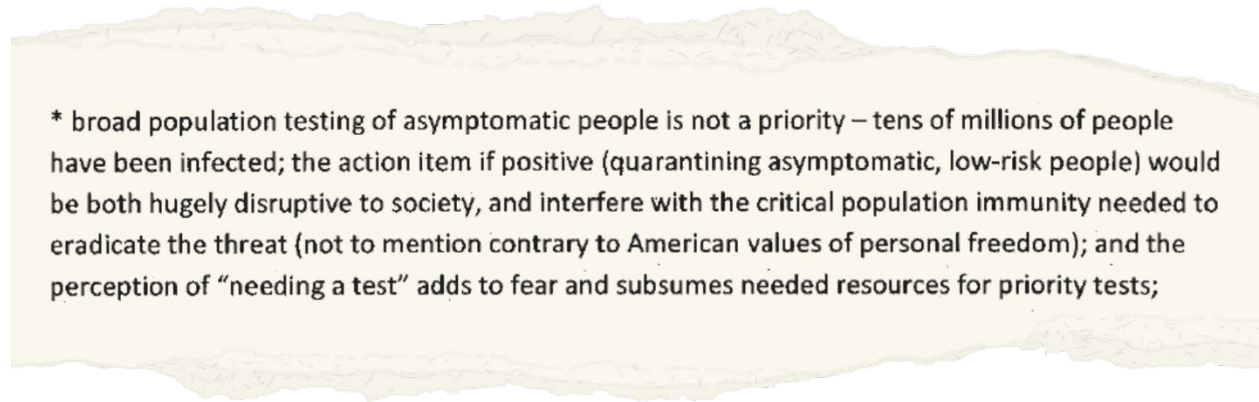
Later that day, Secretary Azar issued a tweet recognizing that the approach articulated by the Great Barrington Declaration authors during the meeting was a “strong reinforcement” of the Trump Administration’s ongoing response strategy, stating:⁶³



Echoing this tweet, Dr. Atlas issued a statement to *The Hill* confirming that the Great Barrington Declaration authors’ “targeted protection of the vulnerable and opening schools and society policy matches the policy of the President and what I have advised.”⁶⁴

b. Dr. Atlas Successfully Pressed the Trump Administration to Change CDC’s Guidance to Curtail the Amount of Testing Conducted in the Country, Without Any Alternate Mitigation Measures

New evidence obtained by the Select Subcommittee shows that Dr. Atlas set in motion significant changes to CDC’s testing guidance within days of arriving in the White House that minimized the need for testing of close contacts of infected individuals, while a proposed addition to the guidance recommending that close contacts isolate was not included in the published version. On August 3, 2020, Dr. Atlas prepared a memorandum titled “Specific Notes on Prioritized Testing,” which outlined his “summary thoughts” on the role that testing should play in the Trump Administration’s pandemic response.⁶⁵ At the time, CDC guidance recommended that “all close contacts of persons with SARS-CoV-2 infection” should get tested.⁶⁶ Dr. Atlas argued that “people have been convinced that ‘testing, testing, testing’ is urgent for everyone—that is false,” and claimed that it was “harmful to do massive testing, especially since actions on many positive tests are not always necessary.” He wrote:



* broad population testing of asymptomatic people is not a priority – tens of millions of people have been infected; the action item if positive (quarantining asymptomatic, low-risk people) would be both hugely disruptive to society, and interfere with the critical population immunity needed to eradicate the threat (not to mention contrary to American values of personal freedom); and the perception of “needing a test” adds to fear and subsumes needed resources for priority tests;

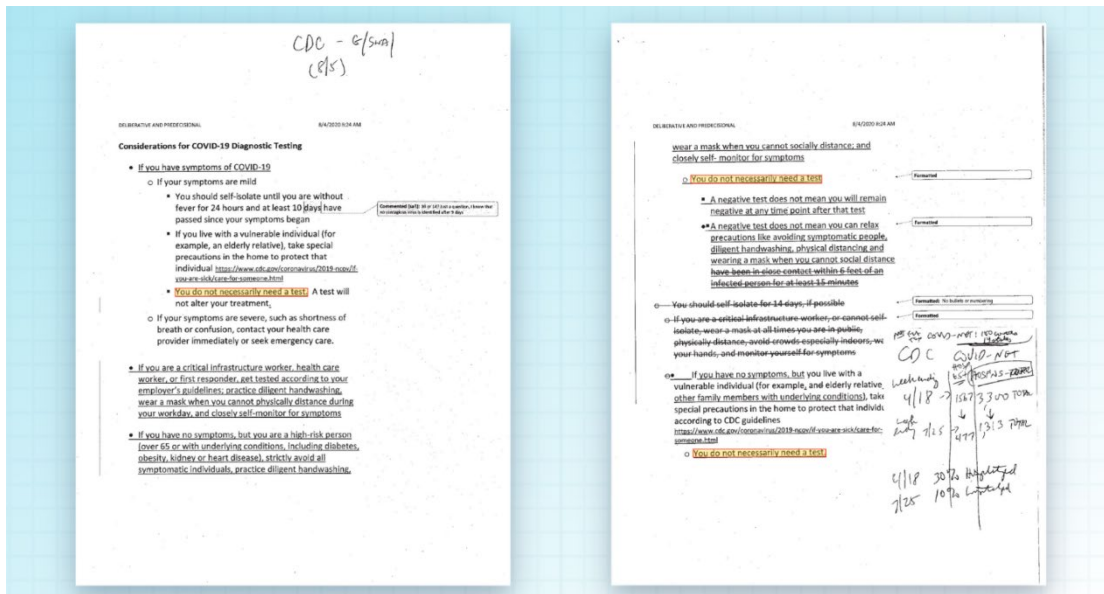
Dr. Atlas emphasized the “important policy point” that “we really must avoid setting up any sort of testing as a predicate to opening anything,” equating such a testing policy with “lockdowns”—which he said would “hurt Americans more than the virus.”⁶⁷ Dr. Birx told the Select Subcommittee that changing CDC’s testing guidance to reduce the amount of testing being conducted “was an intent of Scott Atlas when he came to the White House.”⁶⁸

Director Redfield told the Select Subcommittee “there was aggressive debate” at White House Coronavirus Task Force meetings about Dr. Atlas’s desire to revise the testing guidance. He said that “there were certain individuals that felt extremely strongly that we shouldn’t be testing everybody” and that Dr. Atlas was a key “proponent” of this view within the White House, although others on the Task Force came to agree. Director Redfield recalled that Dr. Atlas was “emphatic” about the need to revise CDC’s testing guidelines to reduce testing and that Dr. Atlas “got in an aggressive argument with me on many occasions.” He noted that Dr. Atlas “was able to win over a majority of people in the Task Force” on changing the testing guidance, while “Debbie Birx and I were probably in the other camp.”⁶⁹ Asked whether the majority of other Task Force members agreed with Dr. Atlas’s views on testing by this time, Director Redfield replied, “yes.”⁷⁰

Evidence obtained by the Select Subcommittee reveals that Dr. Atlas, Director Redfield, and Admiral Brett Giroir, the HHS Assistant Secretary for Health and the Trump Administration’s “Testing Czar,” each played key roles in the revision process.⁷¹ Both Director Redfield and Admiral Giroir told the Select Subcommittee that Vice President Pence wanted the doctors on the White House Coronavirus Task Force to reach a consensus on the revised testing guidance.⁷² Dr. Redfield said that “significant people” inside the Trump Administration made it clear “that Atlas sort of won the debate” and “there needed to be some curtailment of the amount of testing that was done as relating to evaluating people that were exposed.” According to Director Redfield, Vice President Pence and other leadership “felt it was critical” that the Task Force “came to an agreement” on the guidance “because Atlas was so aggressive” in pushing his views on testing.⁷³

Despite the fact that he was CDC Director and had voiced disagreement with changes to the testing guidance that were pushed by Dr. Atlas, Director Redfield acknowledged that “not every argument that happened at the Task Force did the CDC director prevail[.]” Director Redfield ultimately acceded to Dr. Atlas’s demands to include language that those exposed to the coronavirus “do not necessarily need a test,” but explained that he added his own language to make clear that individuals should get tested if their health care provider or State or local public health officials recommended it. Director Redfield said that he initially believed he had “outmaneuvered” Dr. Atlas by adding this language, because he thought, “what doctor was going to tell them not to get tested? No doctor.”⁷⁴

In the days that followed, Dr. Atlas, Admiral Giroir, and Director Redfield exchanged revised drafts of CDC’s testing guidance.⁷⁵ For instance, on August 5, 2020, Dr. Atlas provided extensive comments on a redlined draft.



This redline contained a number of proposals that narrowed testing recommendations, including adding the phrase, “You do not necessarily need a test” in three separate places in the document:

- “If you have symptoms of COVID-19 ... You do not necessarily need a test”;
- “If you have no symptoms, but you are a high-risk person ... You do not necessarily need a test”; and
- “If you have no symptoms, but you live with a vulnerable individual ... You do not necessarily need a test.”

The edits in redline also deleted a recommendation that people who were close contacts of individuals infected with the coronavirus “self-isolate for 14 days, if possible”—an especially important recommendation for close contacts who were not being tested.⁷⁶

An updated version of the testing guidance was circulated on August 6, 2020. This document included an additional phrase: “If you have been in close contact within 6 feet of an infected person for at least 15 minutes... You do not necessarily need a test, unless public health officials recommend you get tested.” Similar to the draft edited by Dr. Atlas on the previous day, this version showed language had been crossed out recommending that those in close contact with an infected person “should assume you are infected and self-isolate for 14 days at home, if possible.”⁷⁷ On August 9, White House Staff Secretary Derek Lyons circulated a draft of the “updated CDC guidance on COVID testing prioritization” to senior Trump Administration officials, including Mr. Kushner, Admiral Giroir, and Dr. Birx.⁷⁸ After several additional rounds of edits, the White House Coronavirus Task Force discussed the updated guidance at meetings on August 12 and August 20.⁷⁹ Admiral Giroir told the Select Subcommittee that the final version of the guidance that he submitted to Mr. Lyons and to CDC “had the isolation for 14 days on it.”⁸⁰

On August 24, 2020, CDC published the revised testing guidance. Consistent with the language in the redline drafts, the revised guidance narrowed CDC’s testing recommendation for those who were in close contact with a person infected with the coronavirus but were asymptomatic or pre-symptomatic, advising such individuals: “You do not necessarily need a test unless you are a vulnerable individual or your health care provider or State or local public health officials recommend you take one.”⁸¹ Admiral Giroir and Dr. Atlas told the Select Subcommittee they believed at the time that there was consensus on the White House Coronavirus Task Force to change this recommendation.⁸² However, Dr. Birx told the Select Subcommittee that she “made it clear in task force that I did not agree with the guidance as it was written,” and said that she reiterated this position to Admiral Giroir after the guidance was published.⁸³ Admiral Giroir said that Dr. Birx initially “was neutral on the affirmative clearance,” but that after she clarified her position once the guidance was published, he understood there was no consensus.⁸⁴

The August 24, 2020, testing guidance also omitted the isolation recommendation— included in the final version Admiral Giroir submitted to the Staff Secretary—for those who were in close contact with a known infected person but were not experiencing symptoms.⁸⁵ Admiral Giroir said that he did “not know the origin of that change” to delete that recommendation, and that the deletion was not discussed with him or the White House Coronavirus Task Force. He told the Select Subcommittee that he and “the traditional doctors on the task force” supported an explicit 14-day isolation recommendation because “being out of

service for 14 days is sort of a minimal hit as opposed to spreading it [the virus] to a hundred people, which is—it’s much worse.”⁸⁶ CDC Principal Deputy Director Dr. Anne Schuchat also confirmed during a transcribed interview that the isolation recommendation was removed prior to the publication of the guidance, which she said “was very counter to the idea in August 2020 of trying to reduce the risk of spread and reintroduction or escalation in different environments.”⁸⁷

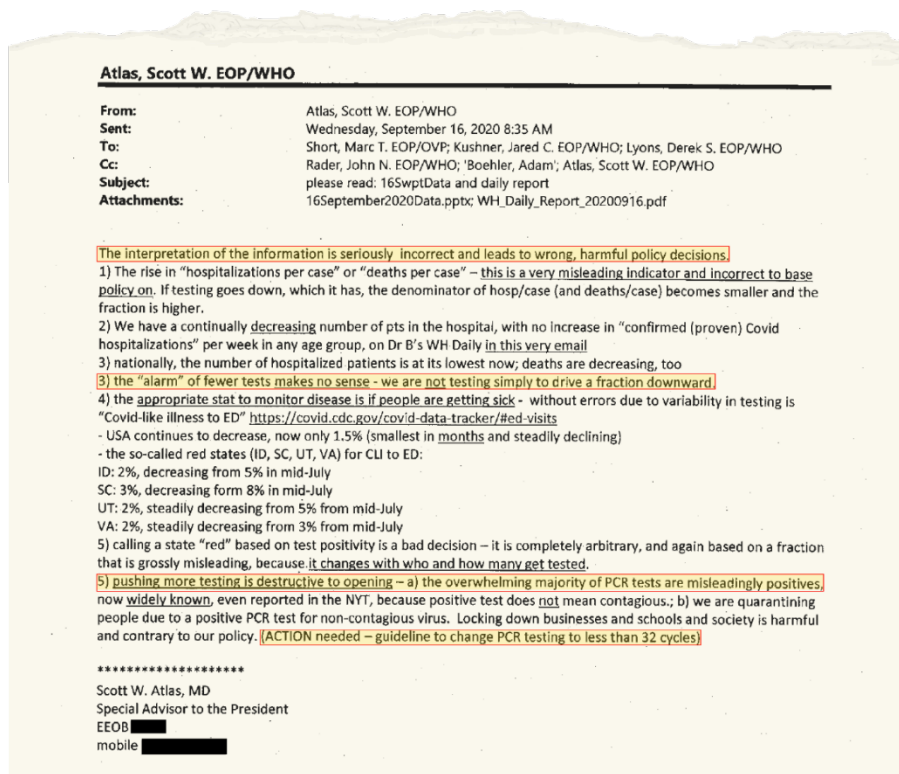
Director Redfield said he thought he “had been clever in the arguments at the Task Force of getting health care providers reengaged in testing” and by inserting “proposed language” into the drafts advising people to “talk to your health care provider” about testing, but he “learned within 24 to 48 hours” of the guidance being released “that’s not the way it was interpreted.”⁸⁸ State and local public health leaders expressed alarm in a letter to Director Redfield that the guidance “suggest[ed] that close contacts to confirmed positives without symptoms do not need to be tested,” which they asserted was “inconsistent with the science and the data.”⁸⁹

Numerous CDC officials raised concerns about the revised guidance. Dr. Schuchat described the testing guidance as “another low point in confusion for our partners,” as the revisions “didn’t make sense to most of the public health community.”⁹⁰ Dr. Jay Butler, a senior CDC official who had previously served as Incident Manager of the COVID-19 Response, told the Select Subcommittee that he raised the August 24, 2020, testing guidance with Director Redfield because he “did not feel like it aligned with the science” and said it “seemed very inconsistent” with CDC’s reports documenting asymptomatic spread.⁹¹ CDC’s then-Incident Manager of the COVID-19 Response Dr. Henry Walke also expressed concern that the revised guidance sent “the message that testing wasn’t important anymore” to the public.⁹²

While public health leaders and career CDC officials expressed alarm about the revised guidance, political appointees in HHS were taking steps to justify the changes made. After the guidance was published, Dr. Alexander circulated his “thoughts for testing op-ed” to other HHS political appointees on August 27, 2020, in which he reiterated Dr. Atlas’s view that “the purpose of testing is NOT to detect low risk and asymptomatic people.” Dr. Alexander acknowledged that the updated guidance “should lead to even fewer cases” being identified, and said the revisions “remove the randomness of testing any and all asymptomatic persons.” He claimed that “[a]n emerging contention surrounds” the changes to the testing recommendations for close contacts, and appeared to try to provide scientific cover for why “we felt the guidance needed a bit of updated[.]”⁹³

Trump Administration officials observed a decrease in the amount of testing conducted in certain parts of the country following the release of the guidance. Dr. Birx noted a “dramatic decline of the number of tests performed during the end of August and the beginning of September,” stating: “This document resulted in less testing and less—less aggressive testing of those without symptoms that I believed were the primary reason for the early community spread.”⁹⁴ Dr. Birx described her concerns about the reduction in testing in a September 16, 2020, coronavirus report sent to senior Trump Administration officials—including Secretary Azar, Mr. Kushner, and Mr. Short.⁹⁵ In the report, she noted that “this marks the third week with significant declines in testing and we cannot see the community spread that maybe [sic] happening” and warned: “This requires immediate action by the CDC.”⁹⁶

In response to Dr. Birx’s report, Dr. Atlas emailed a smaller group of senior White House officials, including Mr. Short and Mr. Kushner, asserting that Dr. Birx’s “interpretation of the information is seriously incorrect and leads to wrong, harmful policy decisions.” Acknowledging that testing had decreased, Dr. Atlas argued that “the ‘alarm’ of fewer tests makes no sense” and that “pushing more testing is destructive to opening” because positive tests caused people to have to quarantine. Dr. Atlas claimed that “the overwhelming majority of PCR tests are misleadingly positive,” and proposed an “ACTION” that apparently called for changing PCR test guidelines to make the tests less sensitive.⁹⁷ This “ACTION” would have risked accelerating the spread of the virus, consistent with Dr. Atlas’s herd immunity strategy—but with deadly consequences that he incorrectly claimed could be avoided.



According to Dr. Birx, Dr. Atlas began sending “opposite opinions” designed to rebut her daily coronavirus reports to senior Trump Administration officials soon after his arrival in the White House and continued this practice throughout his tenure in the Administration.⁹⁸

In the face of the significant reduction in testing and the severe backlash from public health officials and organizations, Dr. Birx, Director Redfield, and Dr. Walke revised CDC’s testing guidance to realign with the original recommendation that all close contacts of those infected with the coronavirus “need a test.”⁹⁹ The revised guidance, which was released on September 18, 2020, also included a specific isolation recommendation for known close contacts, advising: “Even if you have a negative test, you should still self-isolate for 14 days.”¹⁰⁰ Admiral Giroir told the Select Subcommittee that Dr. Atlas was “not happy” about the revision. Admiral Giroir also said that he recognized the potential that “somebody wanted to fire me” for his involvement in approving the September 18 guidance.¹⁰¹ Director Redfield said that Dr. Atlas “aggressively” spoke to him “in loud terms” during a White House Coronavirus Task

Force meeting, accusing Director Redfield of not having the Task Force’s approval to make the additional changes to the guidance.¹⁰² Dr. Birx informed the Select Subcommittee that other senior White House officials also objected to the changes to CDC’s September 18 testing guidance; however, the guidance remained in place.¹⁰³

c. Dr. Atlas Undermined and Politicized the Widespread Use of Mask Wearing as a Mitigation Tool

As part of Dr. Atlas’s efforts to cease mitigation measures¹⁰⁴—a key prong of his herd immunity strategy—he took steps to dissuade the Trump Administration from embracing the widespread use of masks as a mitigation tool. For example, Dr. Atlas attended a meeting with Mr. Kushner and other White House officials, during which Mr. Kushner read aloud a draft tweet for President Trump that recommended everyone wear a mask to help slow the spread of the virus. In response, Dr. Atlas advised against sending the tweet—because, among other reasons, he believed it was “not consistent” with other statements President Trump had made disparaging masks. Based on this advice, Mr. Kushner decided to narrow the tweet to specify that individuals should wear a mask only “if you cannot socially distance”¹⁰⁵—undermining the unequivocal message on mask wearing that public health experts had been calling for from the White House—as it had become evident that many Americans were unavoidably getting exposed in shared spaces, where the virus could potentially linger for hours, even when they were attempting to socially distance.¹⁰⁶

On October 4, 2020, while President Trump was hospitalized with a severe coronavirus infection,¹⁰⁷ Dr. Atlas circulated a document titled, “Statement Regarding the Effectiveness of Masks in Preventing Spread of COVID-19” to senior White House officials, including Mr. Meadows, Mr. Kushner, Mr. Short, Ms. McEnany, and White House Office of Trade and Manufacturing Policy Director Peter Navarro, asserting that “[t]he President has been right all along.” In the cover email attaching this document, Dr. Atlas made a series of overt political statements regarding masks and social distancing—mocking then-candidate Joe Biden’s embrace of public health best practices and claiming “Joe Biden’s policy is mask mandates and lockdowns. That is also the CNN and MSNBC attack narrative.” Dr. Atlas also told the senior White House officials that “the research studies, the best data, indicates that general masks are not effective.” The attached statement circulated by Dr. Atlas likewise contended:

Statement Regarding the Effectiveness of Masks in Preventing Spread of COVID-19

Unlike some, President Trump does not believe that hiding from the public or the press is consistent with the unique nature or critical duties of the Presidency, even during this pandemic. Accordingly, he had taken unprecedented steps to mitigate the risks of coronavirus infection at the White House and while traveling, the cornerstone of which is a robust system to test everyone with whom he might have close contact.

Testing systems like the one in place at the White House, however, are not generally practicable in other settings. That is why the President has, in line with the National Institutes of Health, consistently recommended social distancing and masks in situations where distancing is not practicable, in addition to basic hygiene measures. These steps can help keep the virus from spreading in environments where testing of multiple people every day is not possible.

In fact, there is vanishingly little hard evidence that masks actually work to block transmission of the virus. They may even be harmful in certain settings.

In fact, there is vanishingly little hard evidence that masks actually work to block transmission of the virus. They may even be harmful in certain settings.

First, despite media reports, there is no scientific evidence that mask mandates have slowed the spread of the virus. We know that by looking at low cases exploded despite mask mandates in places like Los Angeles County, Miami-Dade County, Hawaii, Alabama, the Philippines, Japan, the United Kingdom, Spain, France, Israel, and elsewhere.

Second, even the World Health Organization has yet to recommend widespread masks as a mitigation measure for this virus. In their document entitled *Advice on the use of masks in the context of COVID-19*, the organization states the following: "At present, there is no direct evidence (from studies on COVID19 and in healthy people in the community) on the effectiveness of universal masking of healthy

As one source of support for this conclusion, Dr. Atlas quoted the opinion of Dr. Kulldorff—a member of the pro-herd immunity strategy group whom Dr. Atlas recruited to meet with President Trump, Secretary Azar, and other senior Administration officials.¹⁰⁸

Dr. Atlas would further undercut mainstream public health guidance on mask wearing during his White House tenure, tweeting on October 17, 2020: "Masks work? NO," followed by a series of misrepresentations¹⁰⁹ regarding the efficacy and risks of masks.¹¹⁰ Consistent with this tweet and his October 4 email to senior White House officials, Dr. Atlas produced a document to the Select Subcommittee titled, "MASKS," which falsely asserted that "[w]idespread use of masks is *not* supported by science" and claimed that "[m]asks can even be *harmful* – they can increase risk of contamination, and give a dangerous false sense of security."¹¹¹

Dr. Atlas's stated reasoning for his dismissal of masks—that they were purportedly ineffective at mitigating transmission of the coronavirus—appears inconsistent with his pandemic strategy, which was premised on allowing the virus to spread rapidly among lower-risk individuals to facilitate disease-acquired herd immunity. Whatever his rationale, the anti-mask policy advocated by Dr. Atlas would have had—and did have—the same effect as the policies he advocated in connection with his open pursuit of a herd immunity strategy: enabling the virus to infect and kill many more Americans.

d. Support for Dr. Atlas's Herd Immunity Strategy Grew Inside the Trump Administration

Shortly after Secretary Azar met with the authors of the Great Barrington Declaration and announced on Twitter that they had offered "strong reinforcement" of the Trump Administration's ongoing response strategy at that time,¹¹² two Trump Administration officials held a background call with members of the press on October 12, 2020—speaking on condition

of anonymity—to discuss the Great Barrington Declaration and the Administration’s pandemic strategy. On the call, the officials cited President Trump’s refrain that “the cure cannot be worse than the problem itself” and urged for ending many coronavirus mitigation measures, which they claimed were “destroying people.”¹¹³ While mitigation measures undoubtedly came at a cost, their cost paled in comparison to the cost of lives lost and illness suffered, in some cases with certain symptoms lingering indefinitely, as a result of the Trump Administration’s refusal to pursue such measures during this stage of the pandemic—a refusal that was closely linked to officials’ increasing openness to the herd immunity strategy.

According to Dr. Birx, the herd immunity approach championed by Dr. Atlas gained steam inside the White House around this time, despite warnings from her and other leading doctors. Dr. Birx told the Select Subcommittee: “I was constantly raising the alert in the doctors’ meetings of the depth of my concern about Dr. Atlas’ position, Dr. Atlas’ access, Dr. Atlas’ theories and hypothesis” on the coronavirus. She said that she had “numerous” conversations regarding Dr. Atlas’s dangerous views with Mr. Meadows, Mr. Kushner, and Mr. Short—raising her concerns to senior White House officials at least once a week. Dr. Birx stated that Vice President Pence, who led the White House Coronavirus Task Force, was also “well aware” of her concerns about Dr. Atlas’s presence.¹¹⁴ Commissioner Hahn told the Select Subcommittee that he was similarly compelled to intervene with Mr. Short regarding Dr. Atlas, out of concern that the approach urged by Dr. Atlas would be particularly lethal for those who are immunocompromised.¹¹⁵

Despite internal warnings, multiple senior Trump Administration officials ultimately embraced the core tenets of the herd immunity strategy advocated by Dr. Atlas. According to Dr. Atlas, Mr. Meadows, Ms. Hicks, Mr. Short, and Mr. Mango, among others, came to support at least some of the pandemic strategies he was urging the Administration to adopt. Dr. Atlas also inferred that President Trump “was in agreement” with Dr. Atlas’s views on the pandemic, given President Trump’s “own words.”¹¹⁶ For example, after Dr. Atlas joined the White House, President Trump made explicit reference to “herd” immunity in an August 31, 2020, interview with *Fox News* host Laura Ingraham, stating: “Well, once you get to a certain number—we use the word ‘herd,’ right—once you get to a certain number it’s going to go away.”¹¹⁷ Weeks later, President Trump once again affirmatively raised a herd immunity strategy, stating during a September 15 townhall event, “you’ll develop herd—like a herd mentality,” and predicting, “it’s going to be herd-developed, and that’s going to happen.”¹¹⁸

Director Redfield also acknowledged that Dr. “Atlas had successfully got a lot of people within the Task Force and the White House to believe that all we had to do was get to herd immunity” in order to contain the virus.¹¹⁹ Nevertheless, when Secretary Azar appeared before the Select Subcommittee on October 2, 2020, he denied that the Trump Administration had adopted a herd immunity strategy, stating: “Herd immunity is not the strategy of the U.S. government with regard to coronavirus.”¹²⁰ Even after he met with the authors of the Great Barrington Declaration and the White House held a formal press call to highlight its fringe strategy in the context of the Trump Administration’s ongoing response, Secretary Azar doubled down on his denial in a November 16 letter to the Select Subcommittee, in which he also sought to downplay the significance of his meeting with the Great Barrington Declaration authors.¹²¹ The evidence obtained by the Select Subcommittee raises serious questions about the veracity of Secretary Azar’s representations to Congress.

* * *

As the country was entering into the deadly fall and winter 2020 surge, Dr. Atlas continued to advocate against proven mitigation measures under the misguided premise that most regions of the country had already achieved sufficient disease-acquired herd immunity to prevent future surges.¹²² Despite an attempted intervention by multiple doctors on the White House Coronavirus Task Force with Vice President Pence’s office in November or December 2020 to warn about the deadly consequences if the Trump Administration did not take meaningful action to mitigate the virus’s spread, it appears that White House officials—after months of absorbing the “Atlas Dogma”—were largely unresponsive to these concerns.¹²³ During the period from November 2020 through February 2021—as the deadly fall and winter surge swept across the country while the Trump Administration did little to curb its impact—the United States saw the most coronavirus deaths recorded in any four-month period throughout the entirety of the pandemic.¹²⁴

The Trump Administration’s flagrant disregard for proven mitigation measures in those months resulted in a federal response that differed little from the implementation of a deliberate herd immunity strategy. Administration officials used the “Atlas Dogma” to justify their downplaying of the virus before the November presidential election and their continued deprioritization of the crisis as they worked to overturn the election results.¹²⁵ The Administration’s embrace of this ill-advised approach not only impaired the nation’s ability to respond effectively to the pandemic at a critical juncture before the deployment of vaccines and widespread availability of effective treatments—it also helped to lay the foundation for a wide swath of the public to persistently reject other vital tools to combat the virus, including coronavirus vaccines.

Throughout the series of interviews conducted by the Select Subcommittee over the past year, senior officials who worked closely on the coronavirus response emphasized that Dr. Atlas’s presence in the White House undermined the work of the White House Coronavirus Task Force and impaired the effectiveness of the overall pandemic response effort.¹²⁶ By Dr. Birx’s estimate, more than 130,000 American lives could have been saved after the first wave of the pandemic if President Trump and his Administration had implemented proven mitigation measures.¹²⁷ Multiple studies have likewise indicated that the widespread adoption of masks and other non-pharmaceutical mitigation measures could have prevented numerous lives lost during the fall and winter 2020-2021.¹²⁸

* * *

¹ See, e.g., Letter from Chairman James E. Clyburn, Select Subcommittee on the Coronavirus Crisis, to Michael R. Pence, Vice President, White House, et al. (June 22, 2020) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020-06-22.Clyburn%20to%20Task%20Force%20re%20Testing.pdf>); Letter from Chairman James E. Clyburn, Select Subcommittee on the Coronavirus Crisis, to Alex M. Azar II, Secretary, Department of Health and Human Services, and Robert R. Redfield, Director, Centers for Disease Control and Prevention (Sept. 14, 2020) (online at

<https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020-09-14.Majority%20to%20Azar%20and%20Redfield%20re%20HHS%20and%20CDC%20on%20Political%20Interference%20.pdf>); Letter from Chairman James E. Clyburn, Select Subcommittee on the Coronavirus Crisis, to Alex M. Azar II, Secretary, Department of Health and Human Services (Oct. 9, 2020) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020-10-09.Clyburn%20and%20Raskin%20to%20Azar%20re%20Herd%20Immunity.pdf>); Letter from Chairman James E. Clyburn, Select Subcommittee on the Coronavirus Crisis, to Ronald A. Klain, Chief of Staff, White House (Feb. 8, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2021-02-08.Clyburn%20to%20Klain%20re%20WH%20Failures%20on%20Pandemic%20.pdf>); Letter from Chairman James E. Clyburn, Select Subcommittee on the Coronavirus Crisis, to Scott W. Atlas, Robert Wesson Senior Fellow, Hoover Institution, Stanford University (Apr. 9, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2021-04-08.Clyburn%20to%20Atlas%20re%20Scientific%20Information%20.pdf>); Select Subcommittee on the Coronavirus Crisis, *More Effective, More Efficient, More Equitable: Overseeing an Improving & Ingoing Pandemic Response* (Dec. 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/SSCCInterimReportDec2021V1.pdf>).

² See, e.g., Andrew G. Atkeson, *Behavior and the Dynamic of Epidemics*, Brookings Papers on Economic Activity (Mar. 24, 2021) (online at www.brookings.edu/wp-content/uploads/2021/03/15872-BPEA-SP21_WEB_Atkeson.pdf); Benjamin Rader, et al., *Mask-Wearing and Control of SARS-CoV-2 Transmission in the USA: A Cross-Sectional Study*, *The Lancet* (Jan. 19, 2021) (online at [https://doi.org/10.1016/S2589-7500\(20\)30293-4](https://doi.org/10.1016/S2589-7500(20)30293-4)); Kathryn R. Fair, et al., *Estimating COVID-19 Cases and Deaths Prevented by Non-Pharmaceutical Interventions, and the Impact of Individual Actions: A Retrospective Model-Based Analysis*, *Epidemics* (June 2022) (online at <https://doi.org/10.1016/j.epidem.2022.100557>); Michael J. Ahlers, et al., *Non-Pharmaceutical Interventions and COVID-19 Burden in the United States*, *medRxiv* (Sept. 28, 2021) (online at <https://doi.org/10.1101/2021.09.26.21264142>); Catalina Amuedo-Dorantes, et al., *Timing of Social Distancing Policies and COVID-19 Mortality: County-Level Evidence from the U.S.*, *Journal of Population Economics* (Apr. 8, 2021) (online at <https://doi.org/10.1007/s00148-021-00845-2>); Xiaoshuang Liu, et al., *Differential Impact of Non-Pharmaceutical Public Health Interventions on COVID-19 Epidemics in the United States*, *BMC Public Health* (May 21, 2021) (online at <https://doi.org/10.1186/s12889-021-10950-2>).

³ The White House, *Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak* (Mar. 13, 2020) (online at <https://trumpwhitehouse.archives.gov/presidential-actions/proclamation-declaring-national-emergency-concerning-novel-coronavirus-disease-covid-19-outbreak/>); Centers for Disease Control and Prevention, *CDC Museum COVID-19 Timeline* (online at www.cdc.gov/museum/timeline/covid19.html) (accessed June 17, 2022).

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⁶ *The Data Is In — Stop the Panic and End the Total Isolation*, The Hill (Apr. 22, 2020) (online at <https://thehill.com/opinion/healthcare/494034-the-data-are-in-stop-the-panic-and-end-the-total-isolation/>).

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¹⁰ See Scott W. Atlas, *A Plague Upon Our House: My Fight at the Trump White House to Stop COVID from Destroying America* (2021).

¹¹ See, e.g., Cameron A. Smith, Christian A. Yates, and Ben Ashby, *Critical Weaknesses in Shielding Strategies for COVID-19*, PLOS Global Public Health (Apr. 26, 2022) (online at <https://doi.org/10.1371/journal.pgph.0000298>).

¹² Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>); see also Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Brett Giroir (May 3, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Brett%20Giroir.pdf>) (noting that it “was really impossible” to implement Dr. Atlas’s herd immunity strategy because “most of the vulnerable are not in nursing homes. They’re living in the community”).

¹³ *Meet Scott Atlas, Trump’s New Doctor on the Coronavirus Task Force, a Fox News Regular Who Happens to Agree with the President on the Pandemic*, Chicago Tribune (Aug. 16, 2020) (online at www.chicagotribune.com/coronavirus/ct-nw-trump-scott-atlas-coronavirus-20200816-kp5mmxr2ibfqppqppxtb3kko4-story.html).

¹⁴ Email from Paul Alexander, Senior Advisor to the Assistant Secretary, Office of the Assistant Secretary for Public Affairs, Department of Health and Human Services, to Michael Caputo, Assistant Secretary for Public Affairs, Department of Health and Human Services, et al. (July 4, 2020) (SSCC-0007223 – 25) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.07.04_SSCC-0007223-25_Redacted.pdf).

¹⁵ See, e.g., *What the Proponents of ‘Natural’ Herd Immunity Don’t Say*, New York Times (May 1, 2020) (online at www.nytimes.com/2020/05/01/opinion/sunday/coronavirus-herd-immunity.html); Haley E. Randolph and Luis B. Barreiro, *Herd Immunity: Understanding COVID-19*, Immunity (May 19, 2020) (online at <https://doi.org/10.1016%2Fj.immuni.2020.04.012>); Marina Pollán, et al., *Prevalence of SARS-CoV-2 in Spain (ENE-COVID): A Nationwide, Population-Based Seroepidemiological Study*, The Lancet (July 6, 2020) (online at [https://doi.org/10.1016/S0140-6736\(20\)31483-5](https://doi.org/10.1016/S0140-6736(20)31483-5)); Saad B. Omer, Inci Yildirim, and Howard P. Forman, *Herd Immunity and Implications for SARS-CoV-2 Control*, JAMA (Oct. 19, 2020) (online at <http://jamanetwork.com/journals/jama/fullarticle/2772167>); David Dowdy and Gypsyamber D’Souza, *Early Herd Immunity Against COVID-19: A Dangerous Misconception*, Johns Hopkins Coronavirus Resource Center (online at

<https://coronavirus.jhu.edu/from-our-experts/early-herd-immunity-against-covid-19-a-dangerous-misconception>); “*Herd Immunity*” *Is Not an Answer to a Pandemic*, Infectious Diseases Society of America and HIV Medicine Association (Oct. 14, 2020) (online at www.idsociety.org/news--publications-new/articles/2020/herd-immunity-is-not-an-answer-to-a-pandemic/).

¹⁶ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

¹⁷ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

¹⁸ *Id.*; see Letter from Denise M. Hinton, Chief Scientist, Food and Drug Administration, to Gary L. Disbrow, Deputy Assistant Secretary, Biomedical Advanced Research and Development Authority, Office of Assistant Secretary for Preparedness and Response, Department of Health and Human Services (June 15, 2020) (online at www.fda.gov/media/138945/download).

¹⁹ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022), (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>). When asked whether he understood this remote arrangement to constitute a formal position advising the White House or an informal role, Dr. Atlas said, “I did not have an understanding of that.”

²⁰ *Id.* Dr. Atlas was classified as a special government employee and was compensated for his time in the White House. *Id.*

²¹ *Id.*

²² Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

²³ *The President’s News Conference, Administration of Donald J. Trump, 2020* (Aug. 12, 2020) (online at www.govinfo.gov/content/pkg/DCPD-202000598/pdf/DCPD-202000598.pdf).

²⁴ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

²⁵ *Id.*; Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Brett Giroir (May 3, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Brett%20Giroir.pdf>).

²⁶ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022), (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>); see also Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>); *Scott W. Atlas*, Hoover Institution (www.hoover.org/profiles/scott-w-atlas) (accessed on June 17, 2022).

²⁷ See *infra* Part III.

²⁸ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022), (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>); see, e.g., The White House, China Virus Huddle (Aug. 12, 2020) (P008355) (online at

https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.12_P008355_NR.pdf).

²⁹ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

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³¹ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Robert Redfield (Mar. 17, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Redfield%20TI%20Excerpts.pdf>).

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³³ *Id.*; *see also* Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

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³⁶ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

³⁷ *See Strategy for Moving Forward* (Aug. 3, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.03_Strategy_NR.pdf); *Specific Notes on Prioritized Testing* (Aug. 3, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.03_Prioritized%20testing_NR.pdf).

³⁸ *Strategy for Moving Forward: Covid-19* (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Undated_Strategy_NR.pdf) (emphasis in original).

³⁹ *Strategy for Moving Forward* (Aug. 3, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.03_Strategy_NR.pdf).

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<https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

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⁴⁷ Email from Deborah L. Birx, Coronavirus Response Coordinator, The White House, to Anthony Fauci, Director, National Institute of Allergy and Infectious Diseases, et al. (Aug. 21, 2020) (FOIA-00000948 – 49) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.21_FOIA00000948%20-%20949_Redacted.pdf).

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⁴⁹ Email from Deborah L. Birx, Coronavirus Response Coordinator, The White House, to Marc T. Short, Chief of Staff, Office of the Vice President (Aug. 25, 2020) (SSCC-0037491 – 93) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.25%20SSCC-0037491_Redacted.pdf).

⁵⁰ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

⁵¹ *Id.*; see also The White House, China Virus Huddle (Aug. 24, 2020) (P008313) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.24_P008313_NR.pdf). The event lasted approximately 45 minutes. *Id.*

⁵² Potential Discussion Points at Experts Roundtable (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Undated_Discussion%20Points_NR.pdf); see also Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022).

⁵³ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

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⁵⁸ *Proposal to Hasten Herd Immunity to the Coronavirus Grabs White House Attention but Appalls Top Scientists*, Washington Post (Oct. 14, 2020) (online at www.washingtonpost.com/health/covid-herd-immunity/2020/10/10/3910251c-0a60-11eb-859b-f9c27abe638d_story.html).

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⁶⁰ Email from Paul Mango, Deputy Chief of Staff for Policy, Department of Health and Human Services, to Patrick Brennan, Director of Speechwriting, Department of Health and Human Services, et al. (Oct. 5, 2020) (SSCC-0035970 – 71) (online at

https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.10.05_SSCC-0035970_Redacted.pdf); Email from Patrick Brennan, Director of Speechwriting, Department of Health and Human Services, to Paul Mango, Deputy Chief of Staff for Policy, Department of Health and Human Services, et al. (Oct. 5, 2020) (SSCC-0035973 – 75) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.10.05_SSCC-0035973_Redacted.pdf).

⁶¹ Email from Patrick Brennan, Director of Speechwriting, Department of Health and Human Services, to Judy Stecker, Deputy Chief of Staff for Operations and Strategy, Department of Health and Human Services, et al. (Oct. 5, 2020) (SSCC-0035953) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.10.05_SSCC-0035953_Redacted.pdf).

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⁶⁵ Specific Notes on Prioritized Testing (Aug. 3, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.03_Prioritized%20testing_NR.pdf); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

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⁶⁸ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 12, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

⁶⁹ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Robert Redfield (Mar. 17, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Redfield%20TI%20Excerpts.pdf>).

⁷⁰ *Id.*; see also Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

⁷¹ *White House Coronavirus Testing Czar to Stand Down*, National Public Radio (June 1, 2020) (online at www.npr.org/sections/coronavirus-live-updates/2020/06/01/867431135/white-house-coronavirus-testing-czar-to-stand-down). Although there is some dispute regarding who initiated the changes to CDC’s guidance, for what purpose, and who ultimately signed off on these changes, it is uncontroverted that all three individuals played an active role in implementing the changes—which ultimately resulted in a decrease in the amount of testing and widespread public confusion.

⁷² Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Brett Giroir (May 3, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Brett%20Giroir.pdf>); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Robert Redfield (Mar. 17, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Redfield%20TI%20Excerpts.pdf>).

⁷³ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Robert Redfield (Mar. 17, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Redfield%20TI%20Excerpts.pdf>).

⁷⁴ *Id.*

⁷⁵ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Brett Giroir (May 3, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Brett%20Giroir.pdf>).

⁷⁶ Considerations for COVID-19 Diagnostic Testing (Aug. 4, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.04_Redline%20of%20CDC%20testing%20guidance_NR.pdf); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

⁷⁷ Considerations for COVID-19 Diagnostic Testing (Aug. 6, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.06_Redline%20of%20CDC%20testing%20guidance_NR.pdf).

⁷⁸ Email from Staff Secretary, The White House, to DL Chief of Staff Office, The White House, et al. (Aug. 9, 2020) (OMB-SSCC-0010102 – 106) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.20_OMB-SSCC-0010102_NR.pdf).

⁷⁹ White House Coronavirus Task Force Agenda (Aug. 12, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.12_P002880_NR.pdf); Email from Staff Secretary, The White House, to DL Chief of Staff Office, The White House, et al. (Aug. 20, 2020) (OMB-SSCC-0010102-106) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.20_OMB-SSCC-0010102_NR.pdf).

⁸⁰ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Brett Giroir (May 3, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Brett%20Giroir.pdf>).

⁸¹ Centers for Disease Control and Prevention, *Overview of Testing for SARS-CoV-2 (COVID-19)* (Aug. 24, 2020) (online at <https://web.archive.org/web/20200825001053/https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html>).

⁸² Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Brett Giroir (May 3, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Brett%20Giroir.pdf>); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

⁸³ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

⁸⁴ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Brett Giroir (May 3, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Brett%20Giroir.pdf>).

⁸⁵ See Centers for Disease Control and Prevention, *Overview of Testing for SARS-CoV-2 (COVID-19)* (Aug. 24, 2020) (online at <https://web.archive.org/web/20200825001053/https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html>).

⁸⁶ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Brett Giroir (May 3, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Brett%20Giroir.pdf>). At the time, the public health consensus was that a 14-day isolation period was appropriate to guard against the risk of preventable community spread, when there were no vaccines and few treatments. See *The Science Behind a 14-Day Quarantine After Possible COVID-19 Exposure*, National Public Radio (Apr. 1, 2020) (online at www.npr.org/sections/health-shots/2020/04/01/824903684/the-science-behind-a-14-day-quarantine-after-possible-covid-19-exposure). On December 27, 2021, CDC updated its isolation and quarantine guidelines for the general public, recommending that people who are infected with the coronavirus isolate for five days and wear a mask when around others for an additional five days. In updating its guidance, CDC noted that the change was “motivated by science demonstrating that the majority of SARS-CoV-2 transmission occurs early in the course of illness, generally in the 1-2 days prior to onset of symptoms and the 2-3 days after”—not by a desire to hasten herd immunity through infection. Centers for Disease Control and Prevention, *Press Release: CDC Updates and Shortens Recommended Isolation and Quarantine Period for General Population* (Dec. 27, 2021) (online at www.cdc.gov/media/releases/2021/s1227-isolation-quarantine-guidance.html).

⁸⁷ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Anne Schuchat (Oct. 1, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Schuchat%20TI%20Excerpts.pdf>).

⁸⁸ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Robert Redfield (Mar. 17, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Redfield%20TI%20Excerpts.pdf>).

⁸⁹ Letter from Chrissie Juliano, Executive Director, Big Cities Health Coalition, and Lori Tremmel Freeman, Chief Executive Officer, National Association of County and City Health Officials, to Robert Redfield, Director, Centers for Disease Control and Prevention, and Brett Giroir, Assistant Secretary for Health, Department of Health and Human Services (Aug. 28, 2020) (online at www.naccho.org/uploads/downloadable-resources/NACCHO-BCHC-COVID-testing-guidelines-change-082720_1.pdf).

⁹⁰ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Anne Schuchat (Oct. 1, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Schuchat%20TI%20Excerpts.pdf>).

⁹¹ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Jay Butler (Nov. 30, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Butler%20TI%20Excerpts.pdf>).

⁹² Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Henry Walke (Feb. 18, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Walke%20TI%20Excerpts.pdf>).

⁹³ Email from Paul Alexander, Senior Advisor to the Assistant Secretary, Office of the Assistant Secretary for Public Affairs, Department of Health and Human Services, to Michael Caputo, Assistant Secretary for Public Affairs, Department of Health and Human Services, et al. (Aug. 27, 2020) (SSCC-0014920 – 22) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.27_SSCC-0014920_Redacted.pdf).

⁹⁴ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

⁹⁵ *Id.* Dr. Birx wrote hundreds of daily coronavirus report emails to senior Trump Administration officials over the course of the pandemic, which contained her real-time updates and assessments from across the country. *Id.*

⁹⁶ Email from Deborah L. Birx, Coronavirus Response Coordinator, The White House, to Marc T. Short, Chief of Staff, Office of the Vice President, et al. (Sept. 16, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.09.16_Atlas%20Email_Redacted.pdf).

⁹⁷ Email from Scott W. Atlas, Special Advisor, The White House, to Marc T. Short, Chief of Staff, Office of the Vice President, et al. (Sept. 16, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.09.16_Atlas%20Email_Redacted.pdf).

⁹⁸ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

⁹⁹ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Henry Walke (Feb. 18, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Walke%20TI%20Excerpts.pdf>); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Robert Redfield (Mar. 17, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Redfield%20TI%20Excerpts.pdf>); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

¹⁰⁰ Centers for Disease Control and Prevention, *Overview of Testing for SARS-CoV-2 (COVID-19)* (Sept. 18, 2020) (online at <https://web.archive.org/web/20200919015910/https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html>).

¹⁰¹ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Brett Giroir (May 3, 2022), (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Brett%20Giroir.pdf>).

¹⁰² Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Robert Redfield (Mar. 17, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Redfield%20TI%20Excerpts.pdf>); *see also* Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Brett Giroir (May 3, 2022) (online at

<https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Brett%20Giroir.pdf>).

¹⁰³ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>). Dr. Birx declined to disclose the names of these officials on the basis of executive privilege.

¹⁰⁴ Strategy for Moving Forward (Aug. 3, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.03_Strategy_NR.pdf).

¹⁰⁵ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

¹⁰⁶ See, e.g., *Unmasked: How Trump's Mixed Messaging on Face-coverings Hurt U.S. Coronavirus Response*, NBC News (Aug. 9, 2020) (online at www.nbcnews.com/politics/donald-trump/calendar-confusion-february-august-trump-s-mixed-messages-masks-n1236088); *Wear a Mask at Home if Vulnerable People Are Present, Birx Advises*, Voice of America (Aug. 4, 2020) (online at www.voanews.com/a/covid-19-pandemic_wear-mask-home-if-vulnerable-people-are-present-birx-advises/6193886.html).

¹⁰⁷ *A Timeline of Trump's Battle with Covid-19*, CNN (Oct. 12, 2020) (online at www.cnn.com/interactive/2020/10/politics/trump-covid-battle/).

¹⁰⁸ Email from Scott Atlas, Special Advisor, The White House, to Katie Miller, Communications Director for the Vice President, Office of the Vice President, et al. (Oct. 4, 2020) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.10.04_Atlas%20Email_NR.pdf) (emphasis in original).

¹⁰⁹ See, e.g., Centers for Disease Control and Prevention, *Science Brief: Community Use of Masks to Control the Spread of SARS-CoV-2* (Dec. 6, 2021) (online at www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/masking-science-sars-cov2.html) (detailing dozens of studies assessing the effectiveness of masks in mitigating the spread of the coronavirus).

¹¹⁰ *Twitter Removes Tweet from Trump Coronavirus Adviser that Undermined Importance of Masks*, CNN (Oct. 18, 2020) (online at www.cnn.com/2020/10/17/politics/scott-atlas-face-masks-coronavirus/index.html). Twitter removed this tweet for violating its COVID-19 Misleading Information Policy.

¹¹¹ Masks (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Undated_Masks_NR.pdf) (emphases in original).

¹¹² Alex Azar (@SecAzar), Twitter (Oct. 5, 2020) (online at <https://twitter.com/SecAzar/status/1313246628057317377>).

¹¹³ *White House Appears to Endorse Herd Immunity Strategy for COVID-19*, Medpage Today (Oct. 12, 2020) (online at www.medpagetoday.com/infectiousdisease/covid19/89082). Dr. Atlas could not remember whether he was one of the two Administration officials who participated on this press call. Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

¹¹⁴ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

¹¹⁵ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Stephen Hahn (Jan. 28, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Hahn%20TI%20Excerpts.pdf>).

¹¹⁶ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Scott Atlas (Jan. 7, 2022)

(online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Transcribed%20Interview%20of%20Scott%20Atlas.pdf>).

¹¹⁷ *President Trump Joins Laura Ingraham to Discuss Violence in Democrat-Run Cities, Planned Visit to Kenosha*, Fox News (Aug. 31, 2020) (online at www.foxnews.com/transcript/president-trump-joins-laura-ingraham-to-discuss-violence-in-democrat-run-cities-planned-visit-to-kenosha).

¹¹⁸ *Trump Says with ‘a Herd Mentality’ Covid-19 Coronavirus Will Go Away*, Forbes (Sept. 16, 2020) (online at www.forbes.com/sites/brucelee/2020/09/16/trump-says-with-a-herd-mentality-covid-19-coronavirus-will-go-away/).

¹¹⁹ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Robert Redfield (Mar. 17, 2022), (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Redfield%20TI%20Excerpts.pdf>).

¹²⁰ Select Subcommittee on the Coronavirus Crisis, *Hybrid Hearing with Secretary of Health and Human Services Alex M. Azar II* (Oct. 2, 2020) (online at <https://coronavirus.house.gov/subcommittee-activity/hearings/hybrid-hearing-secretary-health-and-human-services-alex-m-azar-ii>).

¹²¹ Letter from Sarah Arbes, Assistant Secretary for Legislation, Department of Health and Human Services, to Chairman James E. Clyburn, Select Subcommittee on the Coronavirus Crisis (Nov. 16, 2020) (on file).

¹²² Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>); *see also* Email from Deborah Birx, Coronavirus Response Coordinator, The White House, to Anthony Fauci, Director, National Institute for Allergy and Infectious Diseases, Stephen Hahn, Commissioner, Food and Drug Administration, and Robert Redfield, Director, Centers for Disease Control and Prevention (Aug. 21, 2020) (FOIA-00000948 – 49) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.08.21_FOIA00000948%20-%20949_Redacted.pdf).

¹²³ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Stephen Hahn (Jan. 28, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Hahn%20TI%20Excerpts.pdf>); *see also The Inside Story of How Trump’s Denial, Mismanagement and Magical Thinking Led to the Pandemic’s Dark Winter*, Washington Post (Dec. 19, 2020) (online at www.washingtonpost.com/graphics/2020/politics/trump-covid-pandemic-dark-winter/).

¹²⁴ Centers for Disease Control and Prevention, *COVID Data Tracker* (online at https://covid.cdc.gov/covid-data-tracker/#trends_dailydeaths) (accessed June 17, 2022); *see also What if Delaware Disappeared? 1 Million Covid-19 Deaths Explained in 4 Charts*, Politico (May 11, 2022) (online at www.politico.com/news/2022/05/11/1-million-covid-deaths-00031142).

¹²⁵ *See* Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>); *see also* Email from Steven J. Hatfill (Oct. 20, 2020) (GWU-0003260 – 61) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.10.20%20-%20GWU-0003260_Redacted.pdf); Email from Steven J. Hatfill (Dec. 30, 2020) (GWU-0000510) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2020.12.30%20-%20GWU-0000510_Redacted.pdf); Email from Steven J. Hatfill (Jan. 5, 2021) (GWU-0004227) (online at https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/2021.01.05%20-%20GWU-0004227_Redacted.pdf).

¹²⁶ *See, e.g.*, Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct.

13, 2021) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Henry Walke (Feb. 18, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Walke%20TI%20Excerpts.pdf>); Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Robert Redfield (Mar. 17, 2022) (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Redfield%20TI%20Excerpts.pdf>).

¹²⁷ Select Subcommittee on the Coronavirus Crisis, Transcribed Interview of Deborah Birx (Oct. 13, 2021), (online at <https://coronavirus.house.gov/sites/democrats.coronavirus.house.gov/files/Birx%20TI%20Excerpts.pdf>).

¹²⁸ See, e.g., Andrew G. Atkeson, *Behavior and the Dynamic of Epidemics*, Brookings Papers on Economic Activity (Mar. 24, 2021) (online at www.brookings.edu/wp-content/uploads/2021/03/15872-BPEA-SP21_WEB_Atkeson.pdf); Benjamin Rader, et al., *Mask-Wearing and Control of SARS-CoV-2 Transmission in the USA: A Cross-Sectional Study*, *The Lancet* (Jan. 19, 2021) (online at [https://doi.org/10.1016/S2589-7500\(20\)30293-4](https://doi.org/10.1016/S2589-7500(20)30293-4)); Kathryn R. Fair, et al., *Estimating COVID-19 Cases and Deaths Prevented by Non-Pharmaceutical Interventions, and the Impact of Individual Actions: A Retrospective Model-Based Analysis*, *Epidemics* (June 2022) (online at <https://doi.org/10.1016/j.epidem.2022.100557>); Michael J. Ahlers, et al., *Non-Pharmaceutical Interventions and COVID-19 Burden in the United States*, medRxiv (Sept. 28, 2021) (online at <https://doi.org/10.1101/2021.09.26.21264142>); Catalina Amuedo-Dorantes, et al., *Timing of Social Distancing Policies and COVID-19 Mortality: County-Level Evidence from the U.S.*, *Journal of Population Economics* (Apr. 8, 2021) (online at <https://doi.org/10.1007/s00148-021-00845-2>); Xiaoshuang Liu, et al., *Differential Impact of Non-Pharmaceutical Public Health Interventions on COVID-19 Epidemics in the United States*, *BMC Public Health* (May 21, 2021) (online at <https://doi.org/10.1186/s12889-021-10950-2>).