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# CLIMBING AGAIN: STAKEHOLDER VIEWS ON RESUMING AIR TRAVEL IN THE COVID–19 ERA

## HEARING

BEFORE THE

## SUBCOMMITTEE ON TRANSPORTATION AND MARITIME SECURITY

OF THE

## COMMITTEE ON HOMELAND SECURITY HOUSE OF REPRESENTATIVES

ONE HUNDRED SIXTEENTH CONGRESS

SECOND SESSION

JUNE 18, 2020

**Serial No. 116–71**

Printed for the use of the Committee on Homeland Security

Available via the World Wide Web: http://www.govinfo.gov

U.S. GOVERNMENT PUBLISHING OFFICE

43–089 PDF WASHINGTON : 2021

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# CONTENTS


Page

STATEMENTS

The Honorable J. Luis Correa, a Representative in Congress From the State of California, and Chairman, Subcommittee on Transportation and Maritime Security:
Oral Statement ..... 1
Prepared Statement ..... 3
The Honorable Debbie Lesko, a Representative in Congress From the State of Arizona, and Ranking Member, Subcommittee on Transportation and Maritime Security:
Oral Statement ..... 4
Prepared Statement ..... 5
The Honorable Bennie G. Thompson, a Representative in Congress From the State of Mississippi, and Chairman, Committee on Homeland Security:
Oral Statement ..... 8
Prepared Statement ..... 9
The Honorable Mike Rogers, a Representative in Congress From the State of Alabama, and Ranking Member, Committee on Homeland Security:
Oral Statement ..... 10
Prepared Statement ..... 11

WITNESSES

Mr. Kevin M. Burke, President and Chief Executive Officer, Airports Council International—North America:
Oral Statement ..... 13
Prepared Statement ..... 14
Ms. Sara Nelson, International President, Association of Flight Attendants—Communication Workers of America:
Oral Statement ..... 18
Prepared Statement ..... 20
Ms. Neema Singh Gulliani, Senior Legislative Counsel, American Civil Liberties Union:
Oral Statement ..... 24
Prepared Statement ..... 26
Ms. Victoria Emerson Barnes, Executive Vice President for Public Affairs and Policy, U.S. Travel Association:
Oral Statement ..... 34
Prepared Statement ..... 36

FOR THE RECORD

The Honorable J. Luis Correa, a Representative in Congress From the State of California, and Chairman, Subcommittee on Transportation and Maritime Security:
Letters From the Honorable Ed Case, a Representative in Congress From the State of Hawai'i ..... 56
Letter From Captain Joseph G. DePete, President, Air Line Pilots Association, International ..... 67
Statement of John Gannon, CEO/President, Blue Spark Technologies, Inc. .. 69
Article From *USA Today* ..... 70

Page

APPENDIX

Questions From Honorable Dina Titus for Kevin M. Burke ..... 73
Questions From Honorable Dina Titus for Sara Nelson ..... 74
Question From Honorable Dina Titus for Victoria Emerson Barnes ..... 74

# CLIMBING AGAIN: STAKEHOLDER VIEWS ON RESUMING AIR TRAVEL IN THE COVID–19 ERA

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**Thursday, June 18, 2020**

U.S. HOUSE OF REPRESENTATIVES,
COMMITTEE ON HOMELAND SECURITY,
SUBCOMMITTEE ON TRANSPORTATION
AND MARITIME SECURITY,
*Washington, DC.*

The subcommittee met, pursuant to notice, at 4:05 p.m., via Webex, Hon. J. Luis Correa (Chairman of the subcommittee) presiding.

Present: Representatives Correa, Thompson, Cleaver, Watson Coleman, Barragán, Demings, Lesko, Rogers, Kato, Bishop, and Van Drew.

Mr. CORREA. The Subcommittee on Transportation and Maritime Security will now come to order.

Thank you, Ranking Member Lesko, and our panel of witnesses for joining us today. We are here to discuss proposals for how to restore our Nation's aviation system that has been so devastated by COVID–19.

We have seen passenger volume in the last few months go as low as 5 percent of normal. Today, it is close to 15 to 20 percent of normal, but that is just not good enough to keep the aviation industry in business, and it is not good enough for the health of this Nation. As all of us know, this pandemic is unprecedented.

The lack of Federal leadership and interagency coordination is very concerning to all of us. Of course, we ask the question: How can we protect our front-line aviation workers and our passengers if our consultation coordination is not there? That is why Chairman Thompson and I recently sent a letter with the leadership of the transportation committee to the heads of DHS and DOT, calling for an interagency task force to take a holistic approach to supporting our Nation's aviation industry.

I am very concerned about the different requirements for mask, temperature checks, health assessments across the aviation industry, a lot of different requirements, a lot of confusion. This is not good for the traveling public. It creates risk for both passengers and aviation workers. We have to follow and trust the expertise and recommendation of our public health officials. They have to be the ones front and center when it comes to public policy. Science and facts must inform future Government and industry actions, and our decisions ultimately will affect millions of travelers and

nearly 11 million people whose jobs depend on a healthy aviation sector. I repeat: 11 million workers who depend on the aviation industry.

Among the most publicized CDC guidelines are social distancing measures. These are most visual when stay-at-home orders were issued across the country and have been credited for helping to slow the spread of this deadly virus. Today, social distancing measures are visible at security checkpoints and at boarding gates. However, on board many in the aircraft different images have emerged. We have seen social media posts of crowded aircraft full of unmasked passengers, and Americans are rightfully surprised and troubled to see passengers forced to travel in those conditions when by all counts, the demand for travel is still very low. Even now we hear from airlines that limiting passenger load factors or limiting middle seats is not necessary.

An unfortunate reality to this moment is that we are forced to address this crisis during a perilous economic environment with very limited resources. That is why we must take—we must make sure that the measures we put into place are effective and innovative. I look forward to hearing from our witnesses today who represent different parts of the industry and have different perspectives on temperature checks, health assessments, health questionnaires, and contact tracing.

The complexities of air travel under COVID–19 have also sparked an interest in technological solutions. Reducing contact between front-line employees and passengers is critical to limit the transmission of the virus. Of equal importance is to make sure that medicine—that the medicine is not worse than the disease.

The impact of these technologies and procedures on the privacy, civil rights, and civil liberties of the flying public must be communicated clearly as well. Further, any such invasive protocols, like temperature checks, should be subject to notice and comment by the public or the public before they are wide-spread deployed.

For example, I understand that TSA is considering installing cameras with facial recognition software on TSA's Credential Authentication Technology, or CAT, machines that are needed in some TSA security checkpoints. Before we roll out such facial recognition biometric technology in airports, TSA and DHS have a lot of work to do.

This committee has already done a great deal of oversight on this issue, but there are still many concerns over data collection, data protection, and use of public's identity—can somebody mute themselves out there?

It is not in anyone's interest to see the Department push out new facial recognition technology without having the necessary protection in place.

Another technology under consideration is detection at range. These machines use thermal imaging technology to detect metal and nonmetallic threats and can reduce the need for pat-downs at security points. However, history reminds us that the last time TSA deployed image technology, specifically the advanced image technology at checkpoints today, Congress had to step in. Congress issued a deadline to stop the use of scanners that did not protect the passengers' privacy, which resulted in avatar use today.

Ultimately, I am looking for solutions, and I want to hear from our aviation partners, and the public has a right to an informed debate that highlights the issue that must be identified and considered before these decisions are made.

Last but not least, I want to hear from our stakeholders how they are protecting their front-line workers. There is no aviation industry without the workers. Keeping workers healthy and safe and supporting them during this pandemic will ensure that this industry and its employees make it through. Our aviation industry is resilient but needs all of to us work together to ensure the safety, security, and health of the public. I look forward to a discussion today.

[The statement of Chairman Correa follows:]

STATEMENT OF CHAIRMAN J. LUIS CORREA

JUNE 18, 2020

We are here to discuss proposals for how to restore our Nation's aviation system that has been devastated by COVID–19. In recent months, we have seen passenger volume plummet to as low as 5 percent. Although passenger volumes has increased to 15 to 20 percent, we are a long way from where we were last year. This pandemic is unprecedented.

Still, it is the lack of Federal leadership and interagency coordination that I find particularly concerning. How can we protect our front-line aviation workers and passengers if the consultation and coordination is not there?

That is why Chairman Thompson and I recently sent a letter with the leadership on the Transportation Committee to the heads of DHS and DOT calling for an Interagency Task Force to take a holistic approach to supporting our Nation's aviation industry.

I am very concerned about the different requirements for masks, temperature checks, and health assessments across the aviation system. This creates uncertainty for the traveling public and can increase the health risks to both passengers and aviation workers. Following and trusting the expertise and recommendations of trusted public health officials must be the way to go. Science and facts must inform future Government and industry action.

Our decisions, ultimately, affect millions of travelers and nearly 11 million people whose jobs depend on a healthy aviation sector. Among the most publicized CDC guidelines are "social distancing" measures. They were most visible when "stay at home" orders were issued across this country and have been credited for helping to slow the spread of this deadly virus.

Today, social distancing measures are visible at security checkpoints and at boarding gates. However, on-board aircraft, different images have emerged. We have seen social media posts of crowded aircraft, full of unmasked passengers. Americans were rightfully surprised and troubled to see passengers forced to travel in those conditions when, by all accounts, the demand for travel was fairly limited. Even now, we hear from airlines that limiting passenger load factors or limiting middle seats is not necessary.

An unfortunate reality of this moment is that we are forced to address this crisis during a perilous economic environment with limited resources. That is why we must make sure the measures we put in place are innovative and effective.

I look forward to hearing from our witnesses, who represent different parts of the industry and have varying perspectives on temperature checks, health assessments, health questionnaires, and contact tracing. The complexities of air travel in the COVID–19 era have also sparked an interest in technological solutions. Reducing contact between front-line employees and passengers is important to limit the transmission of the virus. Equally important is making sure the medicine is not worse than the disease.

The impact of these technologies and procedures on the privacy, civil rights, and civil liberties of the flying public must be communicated clearly. Further, any such invasive protocol like temperature checks should be subject to notice and comment by the public before wide-spread deployment.

For example, I understand that TSA is considering installing cameras with facial recognition software on TSA's Credential Authentication Technology or "CAT" machines that are in use at some TSA security checkpoints. Before the rollout of facial

recognition biometric technology into airports, TSA and DHS have a lot of work to do. This committee has already done a great deal of oversight on this issue.

There are still many concerns over data collection, data protection, and use of public's identity data. It is not in anyone's interest to see the Department push out new facial recognition technology without having the necessary protections in place.

Another technology under consideration is "detection at range". These machines use thermal imaging technology to detect metal and non-metallic threats and can reduce the need for pat-downs at security checkpoints. However, history reminds us that the last time TSA deployed imaging technology, specifically the Advanced Imaging Technology at checkpoints today, Congress had to step in.

Congress issued a deadline to stop the use of scanners that did not protect the passengers' privacy, which resulted in the avatar in use today. Ultimately, I am looking for solutions, and I want to hear from our aviation partners. The public has a right to an informed debate that highlights issues that must be identified and considered before sweeping decisions are made.

Last but not least, I want to hear from our stakeholders how they are protecting their front-line workforces. There is no aviation industry without its work force. Keeping workers healthy and safe and supporting them during this pandemic will ensure that this industry and its employees make it through.

Our aviation industry is resilient but needs us all to work together to ensure the safety, security, and health of the public.

Mr. CORREA. Now I would like to recognize the Ranking Member for an opening statement. The Chair now recognizes Ranking Member of the subcommittee, the gentlewoman from Arizona, Mrs. Lesko, for an opening statement.

Mrs. Lesko.

Mrs. LESKO. Thank you, Mr. Chairman.

It is good to see all of you.

Hello to Chairman Thompson and Ranking Member Rogers. Good to see both of you as well.

I am pleased that the subcommittee is meeting today to perform oversight that is critical to both health—the health of our Nation and our Nation's economy. I am disappointed, however, that Members are not allowed to meet in person. I, for one, am here in Washington, DC, and I am in 2 other committees where we are allowed to go in person, even if other Members choose to go remotely. It is my understanding this committee does not allow that. While other committees have developed protocols to allow Members to safely meet in committee spaces, this committee has not.

This is not in keeping with the guidance of the House Rules Committee. I hope that soon we can move forward in a manner that allows Members to be physically present for the work our constituents sent us here to do.

Turning to the topic of today's hearing, I want to commend the men and women of the TSA for continuing to do their jobs faithfully throughout the pandemic, even as their agency became the hardest-hit in Department of Homeland Security. More than 650 TSA personnel got tested positive for the virus, and tragically, 5 TSA personnel have lost their lives. I sincerely want to say that I pray for the families for their comfort from their loss.

The aviation industry is one of many sectors of the economy that have been devastated by the impacts of COVID–19. At the pandemic's peak, air travel dropped below 100,000 passengers per day, a level not seen in the history of TSA and far below the average 2.5 million travelers per day that TSA was screening prior to the virus' outbreak.

I can tell you from personal experience—I assume you have seen the same—is when this whole thing kind-of started and I started

traveling back to Washington, DC, there was maybe 12 people on the plane. It has since grown. When I came last, the plane was pretty full, not totally full, but it was getting better. Now that is also due to the fact that my airline I travel on cut down to one nonstop flight per day.

As our Nation slowly reemerges from the worst of the pandemic, we are beginning to see slivers of hope that air travel is starting to increase. With this recovery, TSA and transportation stakeholders are responding to new challenges in order to keep travelers safe and get America flying again.

This process presents stakeholders and this subcommittee with important questions, including: What will the TSA screening process look like? What changes need to occur for passengers to be and feel safe? What more can be done to protect passengers from a potential second wave of coronavirus or a future pandemic? These questions and more continue to circulate within the aviation community, and it is my hope to hear feedback from our stakeholder panel today.

Having recently received a briefing from TSA's administrator, Mr. Pekoske, I am eager to hear the stakeholders' perspective on what partnering with TSA looks like in response to the pandemic and how best to implement new solutions to passengers' screening and safety. The aviation sector is truly on the front lines in the fight to protect public health and ensure the free movement of people and goods and that fuel America's economy.

I really do want to thank each one of the witnesses today. We are in unprecedented times. When I first started traveling, it looked like a ghost town, like we were on some kind of movie where, you know, people didn't exist anymore. You know, I was often the only car, you know, pulling up to be dropped off at the airport, and so I am glad to see that it is picking up somewhat. But I do want to hear from our witnesses on what their recommendations are because we honestly need to get our economy back working again. So thank you again.

I yield back.

[The statement of Ranking Member Lesko follows:]

STATEMENT OF RANKING MEMBER DEBBIE LESKO

JUNE 18, 2020

Thank you, Mr. Chairman. I am pleased that the subcommittee is meeting today to perform oversight that is critical to both public health and our Nation's economy.

I am disappointed, however, that Members are not allowed to meet in person. While other committees have developed protocols to allow Members to safely meet in committee spaces, ours has not. This is not in keeping with the guidance of the House Rules Committee. I hope that soon we can move forward in a manner that allows Members to be physically present for the work our constituents sent us here to do.

Turning to the topic of today's hearing, I want to commend the men and women of TSA for continuing to do their jobs faithfully throughout this pandemic, even as their agency became the hardest-hit in DHS. More than 650 TSA personnel have tested positive for the virus, and tragically, 5 TSA personnel have succumbed to the virus. Our thoughts and prayers are with their families.

The aviation industry is one of many sectors of the economy that have been devasted by the impacts of Covid–19. At the pandemic's peak, air travel dropped below 100,000 passengers per day—a level not seen in the history of TSA and far below the average 2.5 million travelers per day that TSA was screening prior to the virus's outbreak.

As our Nation slowly emerges from the worst of the pandemic, we are beginning to see slivers of hope that air travel is starting to increase. With this recovery, TSA and transportation stakeholders are responding to new challenges in order to keep travelers safe and get America flying again. This process presents stakeholders and this subcommittee with important questions, including: What will the TSA screening process look like? What changes need to occur for passengers to be and feel safe? What more can be done to protect passengers from a potential second wave of coronavirus or a future pandemic?

These questions and more continue to circulate within the aviation community, and it is my hope to hear feedback from our stakeholder panel today. Having recently received a briefing from TSA's Administrator Pekoske, I am eager to hear the stakeholders' perspectives on what partnering with TSA looks like in response to a pandemic and how best to implement new solutions to passenger screening and safety.

The aviation sector is truly on the front lines in the fight to protect public health and ensure the free movement of people and goods that fuels America's economy. I thank each of the witnesses for appearing before the subcommittee today, and I yield back the balance of my time.

Mr. CORREA. Thank you.

Can you hear me OK?

I want to thank the Ranking Member.

With, that I would like to yield to the Ranking Member for the purposes of a colloquy.

Mrs. LESKO. Thank you, Mr. Chairman.

Could you please, Mr. Chairman, explain our agreement of committee procedures during these remote proceedings?

Mr. CORREA. Thank you, Ranking Member.

Let me begin by saying that the standing House Committee rules and practices will continue to apply during remote proceedings. Members will be expected to continue to adhere to those rules of the committee and the House.

During the covered period, as designated by our Speaker, the committee will operate in accordance with House Resolution 965 and the subsequent guidance from Rules Committee in a manner that respects the rights of all Members to participate. The technology we are using today requires us to make some small modifications to assure that the Members can fully participate in these proceedings.

Mrs. LESKO. Thank you, Mr. Chairman.

Could you also elaborate on how Members may expect to be recognized during remote proceedings?

Mr. CORREA. Thank you very much.

First, to simplify the order of questioning, I will recognize [inaudible] establishing a quorum or for voting and Members should make every effort to remain visible on the screen throughout the proceedings. If a Member experiences issues with their video stream, they may proceed with solely audio to ensure connection, provided they have been identified previously.

At the beginning of this hearing, Members are on mute. Members may unmute themselves in order to be recognized for the purposes of their 5-minute questioning of the witnesses. At the conclusion of speaking, Members will be expected to then mute themselves again to prevent excess background noise. In the event that a Member does not mute themselves after speaking, the Clerk has been directed to mute the Members to avoid background noise. Should a Member wish to be recognized to make a motion, they must unmute themselves and seek recognition at the right time.

Mrs. LESKO. Thank you, Mr. Chairman.

I do have, before we proceed, I have a question for the staff.

Mr. Chairman, I don't know if you knew it, but your video went away and you—your speaking went away for a while, at least on my side.

So, to the staff, do we need to repeat all the stuff for the record that he said when it we lost connection with him? Is there any staff members, parliamentarians, anybody on this call?

Mr. MCCLELLAND. Mr. Chairman, if you can just read the last paragraph one more time.

Mr. CORREA. In the event a Member does not mute themselves after speaking, the clerk has been directed to mute Members to avoid background noise. Should a Member wish to be recognized to make a motion, they must unmute themselves and seek recognition at the right time.

Ms. LESKO. OK. Well, to the staff, you might want to email all of these rules out, if you haven't already, because it wasn't the last paragraph that went out.

Mr. CORREA. Do you want me to read the whole—I can go back and read the whole.

Mrs. LESKO. I don't need it for me. I just don't know if it needs to be done officially or not. I can move on.

Thank you, Mr. Chairman. What could a Member expect, should they encounter technical issues during a remote event, which is kind-of funny because that just happened?

Mr. CORREA. Mrs. Lesko, you are prophetic.

In the event a Member encounters technical issues that prevent them from being recognized for their questioning, I will move to the next available Member of the same party and will recognize that Member at the next appropriate time slot, provided they have returned to the proceeding. Should a Member's time be interrupted by technical issues, I will recognize that Member at the next appropriate spot for the remainder of their time once their issues have been resolved. In the event that I should encounter technical issues, the Vice Chair of the committee, if available, or the next senior Member of the Majority shall assume the duties of the Chair until I am able to return to the proceedings.

Thank you.

Mrs. LESKO. All right. Thank you.

Mr. Chairman, what should Members expect regarding decorum during a remote event?

Mr. CORREA. Thank you.

Members are reminded that they are only allowed to attend one virtual event at a time. Should they need to attend another committee's proceedings, please fully exit the hearing before entering another proceeding.

Finally, all Members are reminded that they are expected to observe standing rules of the committee decorum for appropriate attire and should have a professional and apolitical background when they are participating in any remote event.

Mrs. LESKO. Thank you.

What should Members expect if a witness loses connectivity?

Mr. CORREA. In the event a witness loses connectivity during testimony and questioning, I will preserve their time as staff address-

es the technical issue. I may need to recess the proceedings to provide time for the witness to reconnect.

Debbie, you are muted. Go ahead. We can't hear you.

Mrs. LESKO. I think what is happening is I am doing it and the staff is doing it or something is going on. Hopefully you can hear me now.

Mr. Chairman, finally, what should Members expect if a vote is called during a remote event?

Mr. CORREA. Thank you.

House Resolution 965 requires Members to be visibly present to have their vote recorded during a remote event. Members who join the proceedings after a vote is called and who are not called upon for their vote should seek recognition from the Chair to ensure that their vote is recorded. Should a Member lose connectivity during a roll call vote, I will hold the vote open for a period of time to address the technical issue and provide Members with the opportunity to have their vote recorded.

Mrs. LESKO. Thank you, Mr. Chairman.

I yield back.

Mr. CORREA. Thank you.

With that, I ask unanimous consent to waive committee rule 8(a)(2) for the subcommittee during remote proceedings under the covered period designated by the Speaker under House Resolution 965.

Without objection, so ordered.

The Chair now recognizes its Chairperson of the full committee, the gentleman from Mississippi, Mr. Thompson, for an opening statement.

Mr. Thompson. Mr. Thompson? I can't hear you, sir.

Mr. THOMPSON. OK. I think we got it this time.

Thank you, Chairman Correa and Ranking Member Lesko, for holding today's hearing.

I welcome the stakeholders' perspectives on safely resuming air travel in the era of COVID–19. The aviation sector consists of so much more than TSA and FAA. It includes airports, municipal authorities, airlines, and, importantly, all their dedicated employees. Additionally, it includes civil rights and civil liberties organizations who focus on protecting travelers' privacy and civil rights, a heightened concern in the wake of the coronavirus.

COVID–19 has not only inflicted unprecedented loss of life on our country, but it has devastated industries including the aviation sector. Our Nation's aviation system has been the front line of efforts to stop the spread of the pandemic from the beginning. TSA's transportation security officers constantly interact with passengers, flight crew members, and other airport workers, putting themselves at risk each and every day. According to TSA, to date, 651 TSA employees have tested positive for the virus, of which 468 employees have recovered, and, sadly, 5 have died.

As Chairman of this committee, I have advocated tirelessly on behalf of TSA's front-line work force and demanded that they be issued appropriate protective equipment like gloves and masks to do their important work. They, after all, are on the front lines of aviation security, keeping the traveling public secure from threats to transportation during the global pandemic.

We must continue to make every effort to ensure that all aviation workers are kept safe from this virus. This includes airport workers, flight crew members, and mechanics. Failure to keep these employees safe has severe negative implications, not only to workers in the aviation sector but also risks further spread of the virus.

Like I mentioned earlier, the impact of COVID–19 has been devastating to the sector. According to TSA, air travel is down 84 percent from this exact moment last year. Given this reality, the Federal Government must establish the right health, safety, and security standards to protect airport workers and restore public confidence in travel. This will require significant coordination and collaboration on the part of agencies like TSA, FAA, and the White House, coordination and collaboration that currently does not exist. Instead, we see a patchwork of standards and requirements throughout the aviation sector, and the American people and the traveling public deserve better.

That is why I called for DHS and DOT to establish an interagency task force to ensure that all efforts and policies are coordinated at the highest levels in a holistic manner to support the successful recovery of the aviation industry.

Recent news reports have suggested that DHS may be preparing to commence a temperature check program where TSA would be tasked with checking the temperatures of departing passengers to identify individuals who may be COVID–19—may have COVID–19. I find this news alarming, given that there is an absence of evidence that such health screenings are effective, especially since people can spread COVID–19 asymptomatically, not to mention there are civil rights and civil liberties concerns around TSA conducting temperature checks.

I am particularly concerned about DHS collecting, using, and safeguarding the sensitive health information of the traveling public, airport workers, and airline crew members. Additionally, given that COVID–19 disproportionately impacts certain communities, including African Americans and the elderly, any proposed temperature check protocols must be designed to guard against the potential discrimination of travelers.

All the issues I just raised highlight that any temperature check program must undergo the notice-and-comment regulatory process to ensure the proper rollout of temperature checks at our Nation's airports. The future of the aviation industry in the COVID–19 era will include a number of challenges, as I have just outlined. As the Chairman of this committee, I am committed to working with TSA and aviation stakeholders to ensure that the sector ultimately succeeds, despite these challenges. I am interested in hearing from today's witnesses on how we collectively can do so.

With that, Mr. Chairman, I yield back the balance of my time.

[The statement of Chairman Thompson follows:]

STATEMENT OF CHAIRMAN BENNIE G. THOMPSON

JUNE 18, 2020

I welcome stakeholder perspectives on safely resuming air travel in the era of COVID–19. The aviation sector consists of so much more than TSA and FAA. It in-

cludes airports, municipal authorities, airlines, and—importantly—all their dedicated employees.

Additionally, it includes civil rights and civil liberties organizations who focus on protecting travelers' privacy and civil rights—a heightened concern in the wake of the coronavirus. COVID–19 has not only inflicted unprecedented loss of life on our country but it has devastated industries including the aviation sector.

Our Nation's aviation system has been on the front line of efforts to stop the spread of this pandemic from the beginning. TSA's transportation security officers constantly interact with passengers, flight crew members, and other airport workers—putting themselves at risk each and every day. According to TSA, to date 651 TSA employees have tested positive for the virus, of which 468 employees have recovered and, sadly, 5 have died.

And as Chairman of this committee, I have advocated tirelessly on behalf of TSA's front-line work force and demanded that they be issued appropriate protective equipment—like gloves and masks—to do their important work. They, after all, are on the front lines of aviation security, keeping the traveling public secure from threats to transportation during a global pandemic.

We must continue to make every effort to ensure that all aviation workers are kept safe from this virus—this includes airport workers, flight crew members, and mechanics. Failure to keep these employees safe has severe negative implications for not only the workers and the aviation sector but also risks further spread of the virus.

Like I mentioned earlier, the impact of COVID–19 has been devastating to the sector. According to TSA, air travel is down 84 percent from this exact moment last year. Given this reality, the Federal Government must establish the right health, safety, and security standards to protect airport workers and restore public confidence in travel.

This will require significant coordination and collaboration on the part of agencies like TSA, FAA, and the White House—coordination and collaboration that currently does not exist. Instead, we see a patchwork of standards and requirements throughout the aviation sector. The American people and the traveling public deserve better.

That is why I called for DHS and DOT to establish an interagency task force to ensure that all efforts and policies are coordinated, at the highest levels, in a holistic manner to support the successful recovery of the aviation industry.

Recent news reports have suggested that DHS may be preparing to commence a temperature check program where TSA would be tasked with checking the temperatures of departing passengers to identify individuals who may have COVID–19. I find this news alarming given that there is an absence of evidence that that such health screenings are effective especially since people can spread COVID–19 asymptomatically.

Not to mention, there are civil rights and civil liberties concerns around TSA conducting temperature checks. I am particularly concerned about DHS collecting, using, and safeguarding the sensitive health information of the traveling public, airport workers, and airline crew members.

Additionally, given that COVID–19 disproportionately impacts certain communities—including African Americans and the elderly—any proposed temperature check protocols must be designed to guard against the potential discrimination of travelers.

All the issues I just raised highlight that any Federal temperature check program must undergo the "notice and comment" regulatory process to ensure the proper roll-out of temperature checks at our Nation's airports. The future of the aviation industry in the COVID–19 era will include a number of challenges, as I have just outlined.

As the Chairman of this committee, I am committed to working with TSA and aviation stakeholders to ensure that the sector ultimately succeeds—despite these challenges. I am interested in hearing from today's witnesses on how we collectively can do so.

Mr. CORREA. Thank you, Mr. Chairman.

Now I would like to recognize the Ranking Member of the full committee, the gentle Member from the State of Alabama, Mr. Rogers, for an opening statement.

Welcome, Mr. Rogers.

Mr. ROGERS. Thank you, Mr. Chairman.

Can you hear me?

Mr. CORREA. Yes, yes.

Mr. ROGERS. I am pleased this subcommittee is meeting to hear stakeholder perspectives on safely resuming air travel, though I am perplexed as to why the ACLU is here, not the airports.

Mr. Chairman, I am also disappointed that Members are unable to meet physically for this important hearing. Yesterday and today, 2 large committees met for mark-ups. Members were physically present and adhered to social distancing guidelines during debate. Minority Members also were allowed to use the committee rooms for these hearings.

The House will be back next week voting in person. Yet this committee chooses not to vote in person or to meet in person. The Minority looks forward to working with the Majority in a bipartisan manner to allow Members to be physically present for committee activities in the future.

Today's hearing comes at a time when thousands of aircraft remain grounded across the United States. Passenger volume has dipped 85 percent below average. Ensuring that travelers have confidence in the ability to fly safely is vital to the industry. Aviation stakeholders must work collaboratively with relevant Government entities, including TSA, to restore trust in air travel.

As an agency, TSA has been on the front lines throughout this pandemic. We are grateful to the thousands of TSA officers who have continued to protect the traveling public. More than 650 of these line officers have contracted the virus, and each Member of this committee is saddened by the tragic loss of 5 TSA personnel to COVID–19. In addition, air transportation stakeholders have also seen their personnel hit hard by COVID–19.

As we seek to ensure the health and safety of aviation personnel and travelers, I hope to hear more about what policies and procedures have been implemented in recent months. I also hope to hear from the witnesses what additional actions should be taken to protect the flying public.

I thank the witnesses for appearing before the committee. I yield back the balance of my time, Mr. Chairman.

[The prepared statement of Ranking Member Rogers follows:]

STATEMENT OF RANKING MEMBER MIKE ROGERS

JUNE 18, 2020

Thank you, Mr. Chairman. I am pleased that the subcommittee is meeting to hear stakeholder perspectives on safely resuming air travel.

Though I am perplexed as to why the ACLU is here and not the airlines.

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Aviation stakeholders must work collaboratively with relevant Government entities, including TSA, to restore trust in air travel.

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As we seek to ensure the health and safety of aviation personnel and travelers, I hope to hear more about what policies and procedures have been implemented in recent months.

I also hope to hear from these witnesses what additional actions should be taken to protect the flying public.

I thank the witnesses for appearing before this committee today, and I yield back the balance of my time.

Mr. THOMPSON. I don't think we can hear you, Lou.

Mr. CORREA. I couldn't hear all of you either. You dropped out.

Mr. Rogers, did you finish your statement?

Mr. ROGERS. Yes, Mr. Chairman, I yielded back.

Mr. CORREA. Thank you very much.

Other Members of the committee are reminded that, under the committee rules, opening statements may be submitted for the record. Now I would like to welcome our panel of witnesses and thank them for joining us today.

Our first witness is Mr. Kevin Burke, president and CEO of the Airport Council International—North America, where he has been since 2014. ACI is a trade association representing the governing bodies that operate over 300 commercial airports in the United States and Canada.

Our second witness will be Ms. Sara Nelson, who serves as the international president of the Association of Flight Attendants—CWA, representing 50,000 flight attendants and 20 airlines, and she has served in this capacity since 2014 and has been a union member since becoming a flight attendant in 1996.

Our third witness, Ms. Neema Singh Guliani, serves as senior legislative counsel with the American Civil Liberties Union. Ms. Guliani is part of the National Political Advocacy Department that is focused on surveillance, privacy, and National security issues. Before joining the ACLU, she worked in the Department of Homeland Security, concentrating on National security and civil rights issues.

Our fourth and final witness is Ms. Victoria Emerson Barnes, the executive vice president for public affairs and policy at the U.S. Travel Association. The association represents over 1,100 members, organizations in the U.S. travel industry, and supports almost 16 million jobs.

Without objection, the witnesses' full statements will be inserted in the record. Now I am going to ask each witness to summarize their statements for 5 minutes, beginning with Mr. Burke.

Welcome, Mr. Burke.

**STATEMENT OF KEVIN M. BURKE, PRESIDENT AND CHIEF EXECUTIVE OFFICER, AIRPORTS COUNCIL INTERNATIONAL—NORTH AMERICA**

Mr. BURKE. Thank you, Mr. Chairman and Ranking Member Lesko, for inviting me today. Please excuse my voice. It is allergy time. I am doing my best to get through a 5-minute statement and answer questions later.

Again, I am Kevin Burke, president and CEO of Airports Council International—North America, a trade association representing airports in the United States and Canada. I welcome this opportunity to discuss with you today the current state of America's airports and new policy recommendations ACI–NA has developed to provide for the health of travelers, to instill public confidence in air travel, and set a solid foundation for the future of aviation.

Since the outbreak of COVID–19, airports have been intensely focused on providing for the health and safety of passengers, employees, and their tenants. To raise public awareness about reducing the spread of COVID–19, airports are updating their public websites, installing signage, and making routine public announcements about safety in the airports. Airports have also implemented numerous mitigation measures at their facilities. That includes deploying additional hand sanitizer stations and plexiglass barriers at ticket counters, checkpoints, gates, and in restrooms. Airports are also working to ensure physical distancing space through the facility which, as we will discuss later, is a very large challenge. Airports have increased the frequency of cleaning with an intense focus on, "touch points."

As we continue to navigate these unprecedented times, U.S. airports are very grateful for the $10 billion in emergency support Congress provided through the CARES Act. Frankly, ladies and gentlemen, it was a life line for every commercial import in this country. Now the CARES Act grants are helping airports offset some of the financial damage from the abrupt drop in air travel, but airports Nation-wide still face major financial and operational hurdles.

Now, as all of you who have traveled to and from your districts back to Washington, you all know that America's airports are indeed hurting. With passenger traffic down nearly 90 percent from this time last year—that is 90 percent from this time last year—ACI–NA estimates U.S. airports face at least $23 billion in operating losses as a result of the COVID–19 pandemic.

Now on top of that, these airports face significant new COVID-related operating expenses for cleaning, employing hand sanitizers, installing plexiglass barriers, supplying personal protective equipment, and encouraging physical distance in our airports.

Our airports are working hard to cut their budgets, defer many capital projects, and plan for the new airport experience once this COVID–19 pandemic gets out of the way for us. We also are helping employees in this time of extreme stress. We want to keep people working at our airports.

We continue to coordinate closely, very closely, with FAA, the TSA, Customs and Boarder Protection, and others on recovery efforts, regulatory guidance, and regulatory flexibility to help air-

ports remain open while ensuring the safety and security of the traveling public.

I want to commend the agency leaders—that is, David Pekoske from TSA and Steve Dickson from FAA—for partnering with us and other airport members on these initiatives and for their extraordinary accessibility and assistance during this very challenging time.

My written statement details Federal policy solutions we and our members have developed to assist airports and aviation as we head toward recovery. I would like to highlight 3 key points this afternoon.

First, with air traffic and airport revenues down significantly, U.S. airports need another infusion of Federal funds to assist during this National emergency. Thirteen billion dollars in additional emergency assistance is needed to help airports meet growing operating costs and their debt service obligations in the coming year.

Second, U.S. airports are working with stakeholders to develop and implement new measures to protect public health. We need what I would call a touchless aviation security screening process to help provide adequate physical distancing for passengers and their baggage as they move through TSA checkpoints and Customs and Border Protection ports of industry.

Now to achieve this, we recommend the following: New checkpoint technology that reduces touch points, maintains physical distancing, and increases security effectiveness. We also need a sufficient number of TSA officers so checkpoints remain operational, efficient, and safe by maintaining an efficient flow of passengers and, again, providing for that critical social distancing.

More support for resisting programming like janitorial reimbursement, law enforcement reimbursement, and explosive detection system.

We also need a new airport security grant program at TSA to fund activities like perimeter security, checkpoint redesigns, pandemic planning, airport emergency operation centers, and enhanced closed-circuit TV.

Third, we recommend the establishment of a joint advisory panel involving DHS, DOT, HHS, the State Department, and industry stakeholders to develop recommendations for the operational infrastructure and technology issues related to pandemic planning.

Now, ladies and gentlemen, airports are leading economic engines in your districts, your communities. Investments in airports can multiply impacts throughout the region. I look forward to working together to help airports weather this crisis and get Americans back to work and back traveling again in an aviation system that is safer, stronger, more secure, and more resilient than ever.

Thank you, Mr. Chairman, for this opportunity. I welcome your questions.

[The prepared statement of Mr. Burke follows:]

PREPARED STATEMENT OF KEVIN M. BURKE

JUNE 18, 2020

Thank you, Chairman Correa and Ranking Member Lesko, for inviting me to participate in today's hearing. I am Kevin M. Burke, president and CEO of Airports Council International—North America (ACI–NA), the trade association representing

the local, regional, and State-governing bodies that own and operate airports in the United States and Canada. I would like to take this opportunity to share with you information about the current state of America's airports and then outline some policy recommendations ACI–NA has developed to provide for the health of travelers, instill public confidence in air travel, enhance security, and set a solid foundation for the future of aviation.

## AIRPORTS APPRECIATE EMERGENCY ASSISTANCE THROUGH THE CARES ACT

As we continue to navigate these unprecedented times, U.S. airports are very grateful for the $10 billion in emergency support Congress provided through the CARES Act, which was truly a lifeline for airports all across the country. I want to thank all of you in Congress for including airport funding in the CARES Act. The CARES Act grants are helping airports offset some of the financial damage from the abrupt, unexpected drop in air travel that resulted from necessary precautions to limit the spread of COVID–19. Even with the CARES Act grants, though, airports Nation-wide still face major financial and operational hurdles.

## AMERICA'S AIRPORTS ARE STILL HURTING

During the COVID–19 National emergency, ACI–NA and its member airports remain committed to ensuring that our Nation's aviation system remains safe, secure, and efficient for all users. But as you have all likely seen in your travels to and from Washington, America's airports are hurting.

Powerful economic engines before the COVID–19 pandemic, generating more than $1.1 trillion in annual activity and supporting over 10 million jobs, U.S. airports have been reduced to mere shells of their former selves, with passenger traffic down nearly 90 percent from the levels we saw this time last year. As a result, airports, airlines, and tenants are all now struggling to survive. ACI–NA estimates U.S. airports face at least $23 billion in operating losses as a result of the COVID–19 pandemic, based on preliminary data about air service reductions to date. On top of that, tenants at U.S. airports—such as airlines, concessionaires, and rental car companies—are all seeking financial relief from airports via rent/fee waivers and deferrals.

Meanwhile, airports must still keep the lights on, provide for the health, safety, and security of employees and tenants, while ensuring the bills are paid. One big cost for airports is debt payments. Approximately $7 billion in airport bond principal and interest payments are due each year, with total outstanding debt for U.S. commercial airports standing at roughly $100 billion.

At the same time, U.S. airports face growing operating expenses as they increase cleaning of public areas, checkpoints, and restrooms; add more hand sanitizing stations for passengers and employees; install plexiglass barriers in passenger-facing areas; procure cleaning supplies and personal protective equipment; and implement physical distancing measures.

As a result, airports are working hard now to cut their budgets, reduce other expenses, defer many capital projects, and plan for the new airport experience now and into the future.

## AIRPORTS WORKING ON INDUSTRY INITIATIVES TO ENHANCE SAFETY AND RECOVER FROM COVID–19

Since the outbreak of COVID–19, airports have been intensely focused on providing for the health and safety of their passengers, employees, and tenants. Airports have enhanced communications to raise awareness about reducing the spread of COVID–19 by updating their public websites, installing signage, and making routine public announcements.

Airports have also implemented numerous mitigation measures to include the deployment of additional hand sanitizer and plexiglass barriers at various locations, like ticket counters, checkpoints, gates, and restrooms. In collaboration with the Transportation Security Administration (TSA), airports have worked to ensure "social distancing" space between screening checkpoint lanes. And airports have significantly increased the frequency of cleaning, with an intense focus on "touch points."

ACI–NA, in coordination with other transportation sector representatives, advocated for the Cybersecurity and Infrastructure Security Agency (CISA) to encourage the Federal Emergency Management Agency (FEMA) to provide face coverings to critical infrastructure workers. As a result, 3.757 million face coverings were allocated to the aviation sector and shipped by FEMA to the top 30 airports plus 6, to ensure geographic coverage, availability at carrier hubs and cargo airports, for distribution to critical infrastructure workers in the aviation sector.

The U.S. Department of Transportation (DOT) subsequently advised ACI–NA that it was tasking the Federal Aviation Administration (FAA) to contact all Part 139 airports with commercial service to request delivery addresses so FEMA could ship 87 million cloth face coverings to airports for distribution to passengers and critical infrastructure workers. ACI–NA worked closely with DOT and FAA to provide information and answer questions from airports about the shipment of cloth face coverings. Airports that have received the shipments are in the process of making the face coverings available to passengers.

The airport industry, through ACI–NA and its network of committees, is also working on industry initiatives to aid in the recovery from COVID–19. Our team is hard at work developing and disseminating the best ways to help minimize the spread of the virus, promote confidence in air travel, ensure consistency across the industry, and streamline the overall recovery of air travel. I have included as part of my testimony ACI–NA's official policy positions on facial coverings and passenger health screenings related to COVID–19.

We continue to coordinate closely with the FAA, TSA, Customs and Border Protection (CBP), and others on recovery efforts, regulatory guidance, and flexibility on regulatory requirements that is critical in helping airports remain operational while ensuring safety and security of the traveling public. Of particular importance is our coordination to ensure the consistency of messaging, which is critical to instill passenger confidence. I want to commend the agency leaders for partnering with ACI–NA and our member airports on these important initiatives as we collectively strive to recover from COVID–19.

## AIRPORTS OFFER ADDITIONAL POLICY SOLUTIONS

There is increasing concern, however, that the drastic budgetary actions airports are taking, coupled with the initial infusion of emergency funds from the CARES Act, will not be enough to keep pace with the sharp revenue declines, putting many airports at risk. Most importantly, airports want to do what they can to help all of their employees in this time of extreme economic stress. In addition to the important work the airport industry is doing, I would like to offer the following Federal policy solutions that will greatly assist airports and aviation as we head toward recovery.

First, with passenger traffic and airport revenues down significantly, U.S. airports need another infusion of Federal funds to assist them in this time of National emergency. We recommend $13 billion in additional emergency assistance to be distributed as quickly and efficiently as possible to commercial service airports through existing entitlement formulas with no reduced apportionments. These funds would help airports meet the operating costs and debt-service obligations detailed above in the coming year.

Second, U.S. airports are working with stakeholders in their facilities—including Federal agencies, airlines, and tenants—to develop and implement new measures to protect public health and promote public confidence in air travel. A major facet of those plans is developing "touchless" aviation security screening processes that provide enhanced security, lower false alarms, and adequate physical distancing for passengers and baggage moving through TSA checkpoints and CBP ports of entry. In order to further enhance security and provide for the health of the traveling public, we recommend immediate funding for new technology, infrastructure, and programming updates throughout the aviation system, including the following security upgrades at U.S. airports:

- Congress should provide funding for TSA to procure and deploy technology at security checkpoints that reduces touch points, maintains physical distancing, and increases security effectiveness. Technology such as enhanced Advanced Imaging Technology, Credential Authentication Technology with opt-in Biometric Authentication Technology, and Computed Tomography integrated with Automated Screening Lanes will increase efficiency and security effectiveness while minimizing document exchanges and false alarms that necessitate pat down and bag inspections.
- Congress should ensure there is a sufficient number of Transportation Security Officers (TSOs) so that screening checkpoints remain open, operational, and safe. In addition to maintaining an efficient flow of passengers though the checkpoint while properly physical distancing, airports remain concerned about the vulnerability associated with large groups of passengers waiting in checkpoint lines, as well as the potential for misconnecting checked baggage and passengers who miss their intended flights. A shortage of TSOs at a time when airports, and the industry, are attempting to recover from COVID–19 would be disastrous, negatively impacting security and airport operations.

- The TSA Law Enforcement Officer (LEO) Reimbursement Program is essential in helping to ensure law enforcement coverage at security checkpoints and public areas. Through the TSA Modernization Act, Congress clearly recognized the significant security value the TSA LEO Reimbursement Program and required TSA to expand it. Section 1935 of the Act directs the TSA administrator to increase the number of awards under the LEO Reimbursement Program "to increase the presence of law enforcement officers in the public areas of airports, including baggage claim, ticket counters, and nearby roads," not just at security checkpoints. Since TSA has taken a more restrictive approach to approving applications and limited reimbursement to only those law enforcement officers stationed in the immediate vicinity of security checkpoints, the expansion of the program envisioned by Congress to increase the presence of law enforcement officers in other critical airport areas has not occurred.

TSA created the LEO Reimbursement Program to partially reimburse airports for providing law enforcement officer staffing at screening checkpoints, as required in Federal law, because the agency did not have the funding to do so. Over time many airports have entered into reimbursable agreements with TSA to provide law enforcement officers to support TSA screening operations. As security threats in the public areas of airports continue to evolve—and TSA imposes additional requirements on airport law enforcement officers—it is essential for Congress to provide TSA adequate funding for the LEO Reimbursement Program.

- In accordance with an Aviation Security Advisory Committee recommendation, Congress should establish an airport security-focused grant program at TSA to support checkpoint redesigns, pandemic planning, new airport emergency operations centers, the deployment of perimeter security, access control, automated screening lanes, enhanced closed-circuit TV and other security technology at airports. Airport operators have limited funding available that must be prioritized across a multitude of safety, security, and operational projects. While DHS's existing grant programs have dispensed billions of dollars for systems and technology to bolster State, Tribal, and local security, very little has been allocated to airports.
- Congress should provide funding for cleaning and sanitization services at checkpoints and other areas that helps airports provide for the health and safety of TSOs, passengers, and aviation workers. This year's final appropriations measure included an administration request to eliminate a TSA program that reimbursed airports for janitorial services at security checkpoints, effectively shifting the full burden to airports. Despite the administration's assertions to the contrary, there is no Federal requirement that airports provide janitorial services at TSA checkpoints. Airport operators should not be forced to assume the costs of janitorial services at tenant locations outside of their control, particularly when they are required by law to provide the space to TSA free of charge. Now that TSA has established a program to reimburse airports for cleaning and sanitization, airports are better positioned to support increased cleaning requirements in response to the COVID–19 National emergency. Congress should fully authorize and appropriately fund this program.
- Congress should ensure TSA has the funds necessary to purchase new Explosive Detection Systems (EDS) to replace outdated systems, and to continue to fulfill its obligation to reimburse eligible airports for the installation of past EDS. As many EDS have or are rapidly reaching the end of their useful lives, TSA needs funding to purchase replacement systems. Absent necessary funding, TSA will incur increasing costs to operate and maintain old systems that routinely break down and adversely impact security and airport operations.

We appreciate Congress providing funding in the past 2 fiscal years for TSA to reimburse airports for previously-incurred costs associated with the construction and deployment of in-line checked baggage screening systems. Since these airports diverted significant amounts of money from other important aviation security projects in order to purchase and install EDS, we encourage Congress to continue to follow through on this commitment with additional funding, and prohibit TSA from redirecting any unused EDS funds to other TSA programs until all eligible airports receive full reimbursement.

Third, we recommend putting additional resources toward retaining and hiring additional CBP officers at the ports of entry and fully implementing the biometric entry-exit program. CBP user fees have decreased tremendously during this pandemic, which has put a huge hole in the agency's budget for this year and next. ACI–NA remains at the forefront of a diverse coalition of industry stakeholders who support improving travel and trade facilitation through CBP ports of entry. The coalition—which includes leading voices from various shipping, tourism, travel, trade, law enforcement, and employee groups—sent letters to the Appropriations Commit-

tees last month in support of supplemental funding for CBP to make up for the multi-billion loss of user-fee revenue.

Fourth, along those lines, we recommend finally ending the diversion of user fees designed to enhance security. Each year billions of dollars in TSA and CBP user fees are needlessly diverted from their intended purpose to subsidize other Federal programs. In this time of National emergency, it is critical to stop these budgetary gimmicks, end the fee diversion and ensure the revenue is restored to its proper use of funding and enhancing crucial transportation security programs.

Fifth, we recommend establishing a joint advisory panel involving the U.S. Department of Homeland Security, the U.S. Department of Transportation, the U.S. Department of Health and Human Services, and the U.S. Department of State—along with industry stakeholders—to develop recommendations about the operational and infrastructure issues related to pandemic planning. Most notably, funding for infrastructure and technology will be urgently needed to ensure airports can continue to make necessary upgrades and adjustments to their facilities.

Finally, we recommend extending the deadline for full implementation of REAL ID to a future date that allows for significant Nation-wide penetration of REAL ID compliance in order to minimize unnecessary impacts on air travelers and operations during what is expected to be a prolonged economic recovery. Earlier this year, before State DMVs shut down due to COVID–19, DHS data indicated that States had issued little more than 95 million REAL ID-compliant driver's licenses and identification cards, and more than two-thirds of driver's licenses and identification cards held by Americans were not REAL ID-compliant. Although DHS streamlined the process by allowing States to accept the required documents submitted electronically, applicants must still come in person to a DMV location with the required documentation for the purpose of obtaining a REAL ID. Given the likelihood that DMVs—when they do reopen—will be faced with a backlog of other service requests, REAL ID applications may be delayed even further. The health of the aviation industry must be considered when establishing a deadline for REAL ID implementation, and a rush to implementation must not depress air travel during a recovery period that is expected to be slow and prolonged.

CONCLUSION

Airports are leading economic engines in their community and investments in airports have multiplying impacts throughout their regions. I hope we can all work together over the next few months to help airports weather this crisis so we can get Americans back to work and traveling again though an aviation system that is stronger, safer, more secure, and more resilient than ever.

Thank you for this opportunity today. I welcome your questions.

Mr. CORREA. Thank you very much, Mr. Burke.

I now recognize Ms. Nelson to summarize her statements in 5 minutes.

Ma'am.

## STATEMENT OF SARA NELSON, INTERNATIONAL PRESIDENT, ASSOCIATION OF FLIGHT ATTENDANTS—COMMUNICATION WORKERS OF AMERICA

Ms. NELSON. Thank you, Chairman Correa, Ranking Member Lesko, and, of course, Chairman Thompson and Ranking Member Rogers, for the opportunity to testify today.

My name is Sara Nelson. I am a 24-year union flight attendant and president of the Association of Flight Attendants—CWA, representing flight attendants across the industry.

The coronavirus is by far the largest crisis ever experienced in aviation. We must make some substantial changes to air travel to meet this moment. Just as we did under the leadership of DOT Secretary Norm Mineta and President George W. Bush in the aftermath of 9/11, starting with new emergency procedures enacted as early as September 12, 2001. Throughout this crisis, airlines have been responsive to our concerns on certain safety policies.

All major airlines now have put in place the requirement of masks in the airport and on the plane. But after nearly 120,000 Americans have died, no contact tracing or containment in place, we are just now on Day 3 of this requirement by airlines. Without clear instruction from Government and airlines passenger and crew, proper training or Federal enforcement, flight attendants are left to manage a hodgepodge of airline policies on the front lines. Most travelers comply with the mask requirements, but conflict still flares up as some have been led to believe that masks are a political statement rather than a public health necessity.

Safety is built with a layered approach. This is exactly why we have a Department of Transportation to coordinate every aspect of travel, consider every touch point, and coordinate private, public, and Federal sector workers and services to facilitate safe, efficient, accessible travel. Without a Federal requirement, including procurement of proper PPE, we leave many vulnerabilities and opportunities for spread, creating unnecessary health risks for travelers and essential workers.

Our union has written to DOT and HHS to urge the Departments to issue emergency safety and health rules as detailed in our written testimony, and we would expect them to work with DHS as well. Statements by DOT indicate the Department does not believe it has a role in public health regulations, but, by contrast, the recent DOT ban on e-cigarette use aboard aircraft was to, "reduce the risk of adverse health effects on passengers and crew members."

We strongly support daily health and wellness self-assessments for flight attendants and other aviation workers before we report for duty and for passengers before they fly. This can and should be done without requiring aviation workers or passengers to reveal private health information. Creating a community health corps deployed at our airports can also create good jobs that help to reverse sky-high unemployment.

Staying off a flight for duty at the airport to protect health and safety should never result in discipline for workers, but many carriers have long-standing punitive policies that can lead to discipline or even termination for use of legitimate sick leave. Without Federal guidelines that prohibit discipline, airlines will choose to do for themselves what policies they will put in place. Already Delta Airlines subsidiary, Endeavor Air, has announced it will apply disciplinary points for any callouts based on new COVID–19 symptom checks. Many other carriers have instituted symptom checks and instructed flight crews to follow Federal guidelines to stay home if ill but have not committed to protect workers who follow the rules.

Congress can help the entire industry stay safe by working with Federal regulators to pass emergency rules that protect jobs, pay, and benefits of any aviation worker who is unable to fly because of COVID–19 symptoms.

Standards for health and safety will be impossible to implement without the dedicated, highly-trained, and credentialed work force of the aviation industry. Flight attendants and aviation workers have been on the front lines of the virus since its earliest days, and we are essential to our Nation's ability to function. That is why Members of both parties joined together this past March to pass a

historic "workers first" relief passenger for aviation workers in the CARES Act. The Payroll Support Program has kept close to a million workers in our jobs and connected to our health care and other benefits through September 30.

I urge the Members of this committee to support a clean extension of the PSP through at least January 31, 2021, without which we will see hundreds of thousands of furloughs and layoffs as of October 1.

Finally, I would like to recognize the critical need to address the disproportionate impact of coronavirus on Black lives. We must do everything we can in every sector to ensure we implement antiracist policies. Coronavirus lays bare that an injury to one is an injury to all.

On this point, we also celebrate two major Supreme Court cases this week that are a step forward—that are a step forward on antidiscrimination. The last thing we need in the middle of a pandemic is removing Dreamers or LGBTQ workers from their jobs in health care. These rulings acknowledge the dignity of American workers, and Congress has the opportunity to recognize the dignity of work during this pandemic by ensuring that workers on the front lines are protected.

Thank you so much for your time, attention, and action. Flight attendants appreciate the work of this committee so much. We depend on you, and we look forward to your questions.

[The prepared statement of Ms. Nelson follows:]

PREPARED STATEMENT OF SARA NELSON

THURSDAY, JUNE 18, 2020

Dear Chairman Correa, Ranking Member Lesko, and Members of the committee: My name is Sara Nelson. I am a 25-year union flight attendant and president of the Association of Flight Attendants—CWA, AFL–CIO (AFA), representing 50,000 flight attendants across the industry. Thank you for the opportunity to testify today on what we are experiencing in our work environment during this pandemic and how uniform safety policies can mitigate risks and instill confidence for the traveling public. Millions of workers' jobs and our entire economy depend upon us getting this right.

COVID–19 remains an unprecedented threat to aviation. Hundreds of flight attendants have tested positive for the virus and 10 have lost their lives. Three months in, commercial volume is still down by more than 85 percent from last year. As a result of the pandemic, nearly 1,000 U.S. flight attendants have lost jobs permanently and thousands more have accepted voluntary furloughs or leaves. Trans States Airlines and Compass Airlines have both shuttered since the onset of COVID–19, while Norwegian closed U.S. flight attendant bases at the end of March (flight attendants have contractual recall rights for 2 years if operations resume) and Cathay Pacific will end U.S.-based operations as of June 20, 2020. Long-time charter carrier Miami Air filed for bankruptcy on March 24, 2020, solely as a result of the pandemic, and refusal by Treasury to process the airline's application for a CARES Act payroll grant added 350 workers in the Miami area to the unemployment line.

The health and economic impacts of COVID–19 still loom large for our industry. Keeping passengers and crew safe is our top priority and we must make some substantial changes to air travel to meet this moment. Just as air travel changed in the aftermath of 9/11, it will need to change now to adapt to the new realities of the post-pandemic world. I know this is an analogy that the Members of this subcommittee understand well, which is why I'm so grateful for the opportunity to testify today, to share my experience with how COVID–19 is affecting the work, health, and financial security of flight attendants, and how we can move forward together.

*Uniform, Federal COVID–19 Health and Safety Rules Are Needed to Protect Passengers and Workers*

As trained public safety professionals, safety is always our top concern. We have a duty to make sure that passengers are safe. We need clear, enforceable Federal rules for health and safety that set uniform standards people can depend on. Federal rules are necessary to protect our passengers, protect aviation workers and their families, and build confidence for millions of businesses counting on the resumption of safe air travel.

To date, the response to COVID–19, the biggest crisis aviation has ever faced, has been a hodge-podge of individual voluntarily-adopted measures by airlines. The best available public health information confirms that crew and passenger use of masks and cloth face coverings, along with proper hand hygiene and social distancing, can help to limit the health risks of air travel. The airlines took an important step when they put policies in place requiring masks, but in the absence of Federal requirements, flight attendants know these policies and related communication will remain inconsistent and unclear. Without clear instruction, proper training, or clear backing, enforcement will be nearly impossible.

We are also seeing inconsistent safety policies at airports, which leave many vulnerabilities and opportunities for spread, particularly in enclosed places where large groups of people are frequently gathered, sometimes sitting in place (such as when a flight is delayed). If passengers do not wear masks inside airports, it creates unnecessary health risks for airline and airport workers and all other travelers.

Thus far, Federal agencies have failed to provide the clear rules we need to keep people safe. On May 11, 2020, the FAA updated a previous guidance document (non-required) for air carrier operators, SAFO 20009,[1] to include an expanded CDC list of COVID–19 symptoms,[2] but still did not require the use of masks or other personal protective equipment (PPE) by crew and passengers. At least one carrier, Omni, has refused to follow SAFO guidelines, assigning discipline to flight attendants when sick, and outright refuses to notify passengers and crew who may have been exposed.

No flight attendant wants to tell a scared passenger that there's nothing we can do to make them feel safe. Flight attendants and gate agents need full management support and the authority to enforce airline policies that keep everyone safe and defuse tensions. Without the reinforcement that comes with Federal rules—the same regulations we use to stop smokers and get people to sit down and buckle up—we're being set up to fail. And that will put passengers and crew at risk.

On June 1, our union wrote again to the U.S. Departments of Transportation (DOT) and Health and Human Services (HHS) to urge the Departments to issue emergency safety and health rules for aviation during the COVID–19 pandemic. We cited the emergency measures taken to address airline security following the events of September 11, 2001, and more recent health and safety measures, including the recent DOT ban on e-cigarette use aboard aircraft, the purpose of which was to "reduce the risk of adverse health effects on passengers and crewmembers." Specifically, we asked that DOT promulgate an emergency rule for the duration of the pandemic that includes the following specific measures for all commercial flights:

- All airplane cabin occupants must wear a mask or cloth face covering per CDC guidelines.[3] Masks should be worn at all times, except as necessary for eating, drinking, or during other similar, temporary activities. Incidents involving passenger violations of this rule should be considered interfering in a crewmember's duties in violation of 14 CFR §§ 91.11 or 121.580, or 49 USC § 46504.
- Flight attendants, as aviation's first responders and potential carriers of the virus without proper protection, must be provided N95 masks, gloves, and other PPE. While we recognize the challenges originally created due to supply chains, we reiterate the need to implement this standard as soon as practicable following proper provisioning of hospital workers and other health care professionals.
- Government must establish and conduct health monitoring for passengers and crew members, which could include temperature checks, signs/symptoms, travel

[1] FAA; COVID–19: Updated Interim Occupational Health and Safety Guidance for Air Carriers and Crews; May 11, 2020. *https://www.faa.gov/other_visit/aviation_industry/airline_operators/airline_safety/safo/all_safos/media/2020/SAFO20009.pdf.* Accessed May 18, 2020.

[2] CDC; Symptoms of Coronavirus; Page last reviewed: May 13, 2020. *https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html.* Accessed May 18, 2020.

[3] CDC; Use of Cloth Face Coverings to Help Slow the Spread of COVID–19; *https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html.* Accessed May 18, 2020.

history, and viral or antibody testing. While these measures will not prevent every asymptomatic person (who may still be capable of transmitting the virus) from boarding a flight, they will minimize this risk and deter abuse.
- Social distancing standards in the cabin must be set; this may require defining hard load limits that vary depending on specific airplane cabin configurations. Although this could result in more aircraft placed into service for the duration of the pandemic, minimizing the spread of COVID–19 on aircraft should decrease the duration of the emergency.
- Require airlines to meet cleaning standards to disinfect, or sanitize, per appropriate CDC guidance, aircraft cabin surfaces after each flight.
- Airlines must be required to operate the ventilation air supply systems on "high flow," particularly during boarding and deplaning. And any cabin air that gets recirculated must first pass through High Efficiency Particulate Air (HEPA) filters, per manufacturer's instructions.

It is clear to anyone working a flight that inconsistent and voluntary airline policies leave gaping holes in safety. These policies and practices are poorly communicated to crew and passengers alike, leaving flight attendants to risk our health and safety while attempting to manage the otherwise avoidable conflicts that result. Our passengers deserve better.

As we look forward to the recovery of commercial air travel, our goal must be to raise the standards of safety and the confidence of all who fly. Enforceable, mandatory, National standards, including those outlined here, will protect my colleagues, protect our passengers, and help our industry take off again.

EMPLOYEE HEALTH AND SAFETY POLICIES CANNOT BE PUNITIVE

Our union believes that no one should fly or work a flight if they are presenting with symptoms of COVID–19 or any communicable disease. This is a matter of public safety. We strongly support daily health and wellness self assessments for flight attendants and other aviation workers before they report for duty, consistent with updated Federal guidelines,[4] and for passengers before they fly. We believe that wellness checks, as one part of a set of safety and health policies and procedures, will boost public confidence in air travel and help limit the spread of the virus.

We ask that Congress work with our Federal regulators to establish clear standards for the entire industry that protect the health and wellness of the traveling public while safeguarding the private health information of aviation workers and passengers. In short, daily wellness checks, including symptom checks, should be conducted without requiring aviation workers or passengers to reveal private health information.

*Staying off a flight to protect health and safety should never result in discipline*

Unfortunately, many carriers have long-standing disciplinary policies that could undermine any policy to keep aviation workers at home if they are feeling sick. It might surprise Members of the committee that if pilots, flight attendants, and gate agents are scheduled to work and call out sick, we can be disciplined or even lose our jobs. Union contracts help limit corporate abuse on this issue and provide due process, but airlines still seek to discipline employees for the legitimate use of sick leave.

Over the past 5 years, as cities and States across the county have passed mandatory sick leave laws to protect workers who fall ill before they are scheduled to work, the aviation industry has refused to comply. The country's largest airlines have gone so far as to sue Washington State and Massachusetts to challenge the State sick leave laws.

We believe that aviation workers deserve the same rights as all other employees, to stay home from work if they are sick, without fear of discipline or termination. But during the on-going COVID–19 emergency, I think we all recognize that it is a serious public health risk to force sick aviation workers to choose between going to work or losing their jobs.

In the absence of clear Federal guidelines that prohibit disciplinary measures from being taken against flight crews, airlines will choose what to do for themselves. Already, Delta Air Lines subsidiary Endeavor Air has announced that it will apply disciplinary "points" for any call-outs based on new COVID–19 symptom checks. Many other carriers have instituted symptom checks and instructed flight crews to follow Federal guidelines to stay home if ill, but have not committed to protect workers who follow the rules. Congress can help the entire industry stay safe by

[4] *https://www.faa.gov/other_visit/aviation_industry/airline_operators/airline_safety/safo/all_safos/media/2020/SAFO20009.pdf.*

working with Federal regulators to pass emergency rules that protect the jobs, pay, and benefits of any aviation worker who is unable to fly because of COVID–19 symptoms.

There are already good model rules in place to put safety first. The Aviation Safety Reporting System (ASRS)[5] collects voluntarily submitted aviation safety incident/situation reports from pilots, controllers, and others. A critical feature of the ASRS system is that flight crew members can report safety issues without fear of discipline or reprisal. As a result, more than 1 million reports have been made, resulting in countless safety improvements in flight. A comparable should be instituted here to prioritize health and wellness on flights.

COMMUNITY HEALTH CORPS

As a result of this pandemic, Americans find themselves in the midst of twin crises—a health crisis and a jobs crisis. Our policy makers must respond to both which is why AFA–CWA is supportive of proposals to create a Community Health Corps, modeled after the jobs programs created by the New Deal's Works Progress Administration. The WPA employed millions of Americans to carry out public works projects, including building public buildings and roads. Instead of building roads and bridges, the CHC would carry out critical health work, including testing and contract tracing, and build the public health infrastructure that will carry us through the pandemic and ensure that we aren't again caught flat-footed when the next pandemic emerges.

We've lost tens of millions of jobs since the pandemic first hit. Only a large-scale Federal jobs program will be able to create enough jobs to fill the gaping hole in our labor market. But a CHC would do more than create jobs—with no vaccine in sight it would also help us to save lives and reopen the economy by scaling up testing and tracing to contain the virus. Without testing and tracing, we're certain to face a second wave of the virus, leading to a second wave of shutdowns, more joblessness, and importantly for my union, less air travel.

Consumer demand in the aviation sector simply will not rebound without confidence in safe air travel. Right now, there is no Federal plan for ensuring that sick passengers do not board flights. There are no health checks required for passengers prior to boarding and no mandatory temperature checks. The major carriers require passengers to wear masks in flight, but that is not adequate to ensure the safety of other passengers, crew, or airport personnel.

In the wake of 9/11, Congress created the Department of Homeland Security and the Transportation Security Administration to respond to new security threats in aviation. These new screening protocols kept passengers and crew safe in flight and built renewed confidence in the safety of air travel, which had dropped precipitously in the wake of the terrorist attacks. There are now 50,000 TSA agents in airports across the country who screen passengers, crew, and luggage prior to boarding.

As part of the CHC, Congress should authorize the Department of Transportation to hire and deploy a Pandemic Health Crew (PHC) at every airport in the country to screen all passengers. As air travel picks up, we would need at least as many PHC workers as TSA agents. PHC workers would run temperature checks for all passengers and ask a battery of health questions to screen for exposure to COVID–19 prior to boarding. This would also help us identify potential hot spots by geographic region and aid health authorities in targeting contact tracing. As more passengers consider air travel once again, a PHC is essential for their safety.

A PHC won't create 40 million jobs, but it can be a model for a Federally-funded Community Health Corps. Some States have already begun exploring similar programs. Massachusetts has already trained contract tracers, provided them with good wages and health insurance, and prioritized hiring the unemployed. I hope that the committee will consider our proposal for the PHC and work with their colleagues on the Committee on Transportation and Infrastructure and the Committee on Appropriations to authorize funding for this program in short order.

PAYROLL GRANT EXTENSION

The new standards for health and safety I have described in my testimony today will be impossible to implement without the dedicated, highly-trained, and credentialed work force of the aviation industry. The brave men and women in our union have been on the front lines of this virus since its earliest days, and they are essential to our Nation's ability to reopen. That is why Members of both parties joined together this past March to pass a historic workers' first relief package for aviation workers in the CARES Act.

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[5] *https://asrs.arc.nasa.gov/overview/summary.html.*

The Payroll Support Program (PSP) in the CARES Act keeps workers in the aviation industry—from gate attendants to flight attendants to mechanics to catering workers to pilots—paid, connected to our health care in a pandemic, out of the unemployment line, and importantly, ready to lift our entire economy. Funding for the PSP goes exclusively toward maintaining the salaries, wages, and benefits for aviation workers. It conditions the carriers' receipt of Federal funds on making no involuntary furloughs or layoffs. Participating carriers must also maintain levels of scheduled service needed to ensure well-functioning health care and pharmaceutical supply chains to serve small and remote communities.

The program has been an overwhelming success. But without an extension, the funding will expire on September 30, and the carriers will begin massive furloughs to match the COVID–19 shrunken industry. I raise this with the committee today because extending this program is essential to carrying out the health and safety provisions I've recommended above. To ensure that travel will not be impacted by crew calling out sick, and to ensure that management doesn't pressure crew to come to work sick, we will need a robust crew on Reserve. This Reserve crew will need to be paid for minimum guarantees and stay on our health insurance. A program extension will keep hundreds of thousands of airline workers current with certifications and security clearances, off unemployment, and able to contribute to our communities.

I urge the Members of this committee to support a clean extension of the PSP through at least January 3, 2021, to ensure that a lapse in this critical protection does not result in massive job loss or hamper our ability to keep passengers and crew safe during the pandemic. This program is a success and has largely kept airlines intact and workers in our jobs. The airlines have been able to use this time to downsize and reduce operational costs, but jobs are still at risk unless the payroll support is extended to bridge us through the worst of this pandemic.

It is an honor to represent flight attendants and other aviation workers here today. Safety is fundamental to the success of air travel because consumer demand simply will not rebound without confidence in safe air travel. The people on the front lines of aviation need your continued support on this and our jobs in order to ensure aviation, and all of the people within it, can continue to support the U.S. economy. We are so grateful for the work of this committee and we are counting on your continued action. Thank you for your time, attention, and action. I look forward to your questions.

Mr. CORREA. Thank you, Ms. Nelson, for your testimony.

Now I would like to recognize Ms. Guliani to summarize her statement for 5 minutes.

Welcome, ma'am.

## STATEMENT OF NEEMA SINGH GULLIANI, SENIOR LEGISLATIVE COUNSEL, AMERICAN CIVIL LIBERTIES UNION

Ms. GULIANI. Thank you for the opportunity to testify today on behalf of the ACLU.

COVID–19 and 9/11 are 2 very different crises, but they have some things in common. Both resulted in a tragic loss of life. Both upended the aviation industry, and both triggered quick and massive investments.

After 9/11, we wasted billions of dollars in many failed programs that did not make us safer and violated basic liberties. As we grapple with COVID–19 and how to make air travel safe again, we must be vigilant to not repeat the mistakes of the past where we rushed to implement many measures that were ineffective and inconsistent with our values.

The stakes for getting it right are high. If our aviation response to COVID–19 is ineffective or privacy-invasive, it will not only hurt air travel; it will also undermine our overall public health efforts by decreasing trust and contributing to community transmission.

Fortunately, public health professionals have provided us guidance on how we can avoid the mistakes of the past. These experts have emphasized that the most effective measures are rooted in

public trust and voluntary compliance. They have cautioned against the law enforcement approach, which often sparks resistance and distrust. Some of the best ways to make air travel safer are low-tech and, if implemented correctly, will likely have a minimal impact on individual rights. These include reducing how crowded airplanes are and facilitating basic health precautions like handwashing and wearing a mask.

It also includes making it easier for individuals to changes their travel plans without penalty if they are exhibiting COVID systems or may have been exposed to the disease and providing flexible and paid sick leave to all employees so that workers do not suffer financially when they take steps to protect us all.

An approach rooted in compliance and trust is also consistent with our values. As we consider new measures in response to COVID–19, we must remember that the right to travel is not a luxury. It is a Constitutional right. As former Supreme Court Justice William Douglas observed, freedom of movement is the very essence of free society. The Supreme Court has repeatedly recognized that the right to travel is protected under the Fifth Amendment as a liberty interest and cannot be denied without due process of law. It also implicates the First Amendment. Thus, it is unconstitutional to deny individuals the right to fly in ways that are unnecessary, arbitrary, or discriminatory. Given this, any new measures should reflect the following 5 principles: No. 1, it must be recommended by public health agencies and developed in concert with public health professionals. For example, if reports are accurate and the CDC recommended against temperature checks in airports as a poorly designed control and detection strategy, they should not be deployed. If they are, they must be meet clearly established benchmarks for effectiveness.

No. 2, any measure must not improperly restrict individuals' right to travel. For example, using temperature checks as a sole basis for barring people from traveling would be inherently overbroad. It would sweep in individuals who might have fevers for reasons unrelated to COVID–19, likely disproportionately affecting people with chronic illnesses. Thus, as most, an elevated temperature should merely trigger further examination with avenues for redress.

No. 3, any measure deployed should not collect additional personal data unless it is fully transparent and strictly necessary from a public health standpoint. This information should only be stored and used by public health agencies for public health purposes and not maintained on DHS databases, shared with law enforcement or immigration agencies, or used for any other purpose. The last thing we want is people being fearful of disclosing medical or other critical facts out of fear of how that information can be used against them in other contexts.

Proposals like the TSA's CAT–C expansion or other uses of face recognition technology which do not adhere to this principle should be rejected as a response to COVID–19. TSA's most recent privacy impact assessment goes beyond the one-to-one map system to permit networking with a secure flight system. There are countless other less costly and less invasive ways to reduce transmission of disease on travel documents, like asking someone to hold their doc-

ument up for review instead of handing it to somebody. These options do not involve the multitude of privacy and civil liberty concerns of facial recognition. Suggesting such an expansion should move forward as a response to COVID will rightfully cause travelers to question the legitimacy of other TSA measures going forward.

No. 4, there must be proactive transparency and accountability. This will require many things but at a minimum should require that an independent oversight body assess any proposed measure for effectiveness and privacy. It should also include compliance with existing requirements, like privacy impact assessments and rule-making requirements.

Finally, any measure adopted should end with the pandemic. A clear end date is essential to ensure that invasive measures do not simply become the new normal. To the extent something proves to have other non-COVID-related benefits, it should be evaluated separately to ensure it meets travel needs and preserves privacy.

COVID–19 offers an opportunity for us to adopt positive changes in aviation that enhance trust and public health. I look forward with working with the subcommittee to consider how we can make travel safer and how to avoid the pitfalls of the past.

Thank you.

[The prepared statement of Ms. Guliani follows:]

PREPARED STATEMENT OF NEEMA SINGH GULIANI

JUNE 18, 2020

Chairman Correa, Ranking Member Lesko, and Members of the subcommittee: Thank you for the opportunity to testify on behalf of the American Civil Liberties Union (ACLU)[1] and for holding this hearing on, "Climbing Again: Stakeholder Views on Resuming Air Travel in the COVID–19 Era."

COVID–19 has upended commercial air travel—raising serious questions about how and whether it can be safely resumed during the pandemic. At this stage, the Centers for Disease Control (CDC) continues to caution against air travel. For individuals who do travel, the CDC encourages keeping 6 feet apart from other people and adopting various health precautions.[2] Given this, the best way to make air travel safer is likely to reduce how crowded airplanes and airports are, facilitate basic health precautions like hand washing and mask wearing, and make it easy for individuals to voluntarily change their travel plans if they are exhibiting COVID–19 symptoms or may have been exposed to the disease.

Government agencies, airlines, and airports are also exploring a variety of new surveillance, health, and screening measures designed to minimize contact during travel, prevent individuals who might be infected from traveling, and limit transmission during travel. Some of these measures, like a face mask requirement, reflect the guidance of public health professionals and, if implemented correctly, will likely have a minimal impact on individuals' rights. Other proposals, like those to expand facial recognition technology or implement remote fever detection,[3] have dubious

[1] For nearly 100 years, the ACLU has been our Nation's guardian of liberty, working in courts, legislatures, and communities to defend and preserve the individual rights and liberties that the Constitution and laws of the United States guarantee everyone in this country. With more than 3 million members, activists, and supporters, the ACLU is a Nation-wide organization that fights tirelessly in all 50 States, Puerto Rico, and Washington, DC, to preserve American democracy and an open Government.

[2] Centers for Disease Control and Prevention, Considerations for Travelers—Coronavirus in the US (May 28, 2020), *https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-in-the-us.html.*

[3] Attached is a comprehensive ACLU white paper that provides more guidance specifically on implementing temperature checks. See ACLU, TEMPERATURE SCREENING AND CIVIL LIBERTIES DURING AN EPIDEMIC (May 19, 2020), *https://www.aclu.org/aclu-white-paper-temperature-screening-and-civil-liberties-during-epidemic.*

public health value, raise significant privacy and civil liberties concerns, and should be rejected.

We must be vigilant to ensure that the pandemic is not exploited opportunistically to entrench discriminatory and privacy-invasive practices in aviation. In addition, we must ensure that any new measures adopted do not undermine overall public health efforts by giving individuals a false sense of security or engendering public distrust. Thus, any new aviation measure adopted in response to COVID–19 must:

(1) Be consistent with the recommendations of public health professionals and meet efficacy benchmarks;

(2) Ensure equitable treatment and prevent against improper encroachments on the right to travel;

(3) Require that any new personal or health data collected be available only to public health agencies for public health purposes, and prohibiting use for any other reasons, including law enforcement, immigration enforcement, security/risk assessments, public benefit determinations, or commercial purposes;

(4) Have a clear end date that does not extend beyond the pandemic; and

(5) Require proactive transparency and accountability measures.

*(1) Public Health Effectiveness*

No new surveillance, technology, or screening measure should be deployed unless it is recommended by public health agencies, developed in concert with public health professionals, and likely effective. For example, if reports are accurate and the CDC recommended against thermal checks at airports as a "poorly designed control and detection strategy," they should not be deployed.[4] Similarly, we should be wary of relying on technologies, like technology assisted contact tracing, which public health professionals have emphasized are not yet proven to be effective.[5] It is particularly important that public health professionals be a central part of any aviation response because our understanding of COVID–19 continues to evolve, and measures that seem like a good idea today may need to be modified as we learn more.

To help ensure effectiveness, any proposed aviation measure should be evaluated independently by the CDC and other relevant public health experts on an on-going basis. Protocols around the use of such measures should be developed in concert with these agencies to reflect public health best practices. In addition, there should be clear public benchmarks for what standards must be met for a measure to be considered effective, which identify limitations, factors that impact effectiveness, cost, and an evaluation of whether there are better alternatives. Information about whether any measure meets these benchmarks should be released publicly, so that the public and policymakers can evaluate them.

*(2) Equity and Protecting the Right to Travel*

As former Supreme Court Justice William Douglas observed, "[f]reedom of movement is the very essence of our free society, setting us apart."[6] The Supreme Court has repeatedly recognized that the right to travel is protected under the Fifth Amendment as a liberty interest that cannot be denied without due process of law.[7] Moreover, freedom of movement allows access to information and encourages the free exchange of ideas and opinions, thus implicating the First Amendment.

Given the rights at stake, no measure adopted should be as a basis to deny an individual the right to fly in an arbitrary, unreasonable, or discriminatory manner. Additionally, the information used to determine whether someone can fly must be transparent and fully available to the individual, and there must be the opportunity to rebut or appeal such a determination in a fair process. For example, using temperature checks as the sole basis for barring people from traveling would be inherently overbroad, as it would sweep in individuals who might have fevers for reasons unrelated to any communicable disease, including COVID–19. This would likely disproportionately affect individuals with chronic illnesses, including those who may travel in order to seek critical medical care. Thus, at most, an elevated temperature should merely trigger further examination, providing individuals the ability to pro-

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[4] Brett Murphy and Letitia Stein, *CDC scientists overruled in White House push to restart airport fever screenings for COVID–19,* USA TODAY, May 9, 2020, *https://www.usatoday.com/story/news/investigations/2020/05/09/white-house-push-airport-fever-screenings-overrules-cdc-scientists/3097158001/*.

[5] World Health Organization, DIGITAL TOOLS FOR COVID–19 CONTACT TRACING (June 2, 2020), *https://www.who.int/publications/i/item/WHO-2019-nCoV-Contact_Tracing-Tools_Annex-2020.1.*

[6] *Aptheker* v. *Secretary of State,* 378 U.S. 500, 520 (1964) (Douglas, J., concurring).

[7] See *Regan* v. *Wald,* 468 U.S. 222 (1984); *Zemel* v. *Rusk,* 381 U.S. 1, 14 (1965); *Aptheker* v. *Secretary of State,* 378 U.S. 500, 505–06 (1964); *Kent* v. *Dulles,* 357 U.S. 116, 125 (1958).

vide additional information regarding whether they are at risk of having the disease or may have a temperature for other reasons.

*(3) Limited Public Health Purpose*

Public health experts caution that a law enforcement approach to combating disease is less effective than relying on voluntary measures and compliance. That is because an enforcement approach often sparks counterproductive resistance and evasion and tends to sour the relationship between citizens and their Government at a time when trust is of paramount importance. Good public health measures leverage people's own incentives to report disease and help stop its spread.[8]

Encouraging self-monitoring and adoption of voluntary measures is particularly important in the aviation context. Individuals themselves are best positioned to know whether they have experienced COVID–19 symptoms, have had large number of exposures to other individuals, or have traveled in a high-risk area. In addition, there are likely ample ways to circumvent screening and surveillance measures that may be designed to identify people with the disease. For example, individuals can take medication to suppress COVID–19 symptoms, such as a fever or a cough. Given this, the best measures will be those that encourage individuals to self-monitor and simply stay home if they may have the disease. This includes providing clear guidance about what factors an individual should consider before flying, and making it easy for them to change or cancel their travel plans if needed without penalty. In addition, for employees, it includes providing paid sick leave, so that individuals can take time off without suffering financially.

To maintain public trust, any other surveillance or screening measure must do two things. No. 1, it should not collect additional personal data, unless such collection is fully transparent and necessary to protect public health. No. 2, any data collected must be stored and used solely by public health agencies for public health purposes. Such information should not be stored in DHS databases where it can be accessed for other purposes, including immigration, law enforcement, risk/screening assessments, or public benefit determinations. The last thing we want is people being fearful of disclosing medical or other critical facts out of fear that such information could be used against them in another context.

Proposals that do not limit information use and collection in such ways are a clear signal that a measure is being opportunistically deployed and is not strictly necessary for public health. For example, earlier this month, TSA announced an expansion of its Credential Authentication Technology device equipped with a camera (CAT–C) program, permitting it to network with the Secure Flight System, a passenger prescreening program. Although the TSA has been working on this program since at least 2007, the Privacy Impact Assessment (PIA) cited COVID–19 as a partial justification for the expansion, indicating it would reduce disease transmission by eliminating handling of documents.

Justifying the expansion of the CAT–C program with COVID–19 is both opportunistic and dangerous. As an initial matter, there are many less costly and less invasive ways to reduce transmission of the disease on travel documents. This includes installation of clear glass or simply telling travelers to hold a document up for verification, instead of handing it to an agent. In addition, the PIA glossed over a multitude of other concerns with the CAT–C program, including demographic differences in accuracy cited by the National Institute of Standards and Technology.[9] According to NIST, leading facial recognition algorithms were more likely to have false positives or negatives for certain demographics, including Asians, African Americans, and women.[10] In addition to this, the expansion raises further concerns that TSA has expanded use of facial recognition without clear Congressional authorization or regulations, and has opened the door to networking with additional DHS databases used for law and immigration enforcement. The expansion of CAT–C is unnecessary to combat COVID–19, and opportunistically relying on the disease as justification will decrease public trust in any other legitimate measures put forward.

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[8] ACLU, LIMITS OF LOCATION TRACKING IN AN EPIDEMIC (April 8, 2020), *https://www.aclu.org/sites/default/files/field—document/limits__of__location__tracking__in__an__epidemic.pdf;* See also ACLU, PANDEMIC PREPAREDNESS: THE NEED FOR A PUBLIC HEALTH NOT A LAW ENFORCEMENT/NATIONAL SECURITY APPROACH (Jan. 2008), *https://www.aclu.org/sites/default/files/pdfs/privacy/pemic__report.pdf.*

[9] National Institute of Standards and Technology, U.S. Dep't of Commerce, FACE RECOGNITION VENDOR TEST (FRVT) PART 3: DEMOGRAPHIC EFFECTS, (Dec. 2019), *https://nvlpubs.nist.gov/nistpubs/ir/2019/NIST.IR.8280.pdf.*

[10] Id.

*(4) Clear end-date*

Any new technology, surveillance, or screening measure implemented specifically to respond to the pandemic should come with a clear end-date. We do not want COVID–19 to repeat post 9/11 mistakes—where we rushed to adopt many new and concerning security measures that cost billions, were ineffective, violated individual's rights, and have been difficult to undo. For example, it took 5 years for the Transportation Security Administration (TSA) to partially abandon its Computer Assisted Passenger Prescreening System II (CAPP II), which would have allowed the Government to tap into commercial databases to perform background checks on all Americans who fly. The program was impractical, unwise, and ineffective.[11] Nevertheless, facets of problematic components of CAPPS II continue today in other TSA programs.

To avoid similar problems, any new DHS program or regulation adopted in response to the pandemic should include a clear sunset date, including deletion of any data collected, that corresponds to the end of the COVID–19 pandemic. The end data of the pandemic should be dictated by public health agencies and experts, and based on periodic evaluations and clear criteria. If such programs require expenditures or activities that have not been previously authorized, they should only be deployed with explicit Congressional approval that includes such a sunset. To the extent a measure proves to have other non-COVID related benefits, such as making travel quicker or more convenient, it should be evaluated separately for effectiveness, explicitly approved by Congress, and evaluated to ensure it does not improperly impinge on travelers' rights.

*(5) Transparency and Accountability*

In order for individuals to resume air travel, they must have full confidence and trust in any measures adopted to make travel safer. This will require the following additional transparency and accountability measures, designed to ensure efficacy, cost-effectiveness, and protection of travelers' rights.

No. 1, the Government and private sector should adopt a proactive transparency policy, fully disclosing information about what measures are being adopted, why, and how. This should include proactive public release of any evidence or studies related to efficacy, including analysis of independent public health professionals. No. 2, any measure adopted should be evaluated by an independent overseer, such as the Government Accountability Office (GAO). No measure should be continued unless the GAO or other independent overseer finds that it is effective and being implemented in a manner that safeguards individuals' rights. No. 3, the Government and private sector should adopt protocols to ensure that there is the opportunity for meaningful public engagement and consultation regarding any measure that is being considered, so potential pitfalls or concerns can be remedied. No. 4, any process should include a robust redress process, so that individuals can rebut or appeal determinations, or raise concerns regarding unfair or discriminatory treatment. Finally, any measure adopted must fully comply with existing laws, including those requiring appropriate privacy assessments and rule making. Agencies should not circumvent these processes, which are designed to reduce the risk of programs that are wasteful, ineffective, or antithetical to our values.

## CONCLUSION

To resume air travel, consumers must have trust and confidence in the health measures adopted to ensure their safety. In addition, they must be encouraged and incentivized to self-monitor and take voluntary precautions to prevent disease transmission. Now is not the time for opportunistic efforts to advance unnecessary technology that engenders distrust and sparks resistance to overall compliance. Rather, it is the time for transparent and effective policies that address the pressing public health needs. Thus, to ensure that any aviation measures adopted are wise and appropriate, they must come with a clear sunset date; meet benchmarks for effectiveness established by public health professionals; limit data collection and use to public health; prevent against discriminatory and improper encroachments on the rights to travel; and require transparency and accountability.

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[11] Jay Stanley, *Airline Passenger Profiling: Back From the Grave?,* ACLU (Feb. 8, 2011) *https://www.aclu.org/blog/national-security/airline-passenger-profiling-back-grave.*

## APPENDIX.—TEMPERATURE SCREENING AND CIVIL LIBERTIES DURING AN EPIDEMIC

BY JAY STANLEY

*May 19, 2020*

As Americans look beyond the current coronavirus lockdowns, there has been a lot of discussion about the role of technology in a new, more open phase of the pandemic response. Many experts envision a world where wide-spread testing is combined with careful disease surveillance and contact tracing in an effort to suppress transmission enough to allow some cautious semblance of normality until researchers are able to develop a vaccine. A range of proposals have been offered, including using cell phone data for contact tracing, which we have analyzed at length.

Another technology that is often mentioned is remote or "standoff" fever detection. Some companies have already begun screening their workers for fevers, and restaurants their customers. Manufacturers report being swamped by sales and inquiries. In China, temperature screening checkpoints have been set up everywhere from markets to subway and building entrances to highway roadblocks.

What are we to think about the use of this technology to fight coronavirus transmission from a privacy and civil liberties standpoint?

### EFFECTIVENESS

The first question is always effectiveness. If a technology can't deliver what it promises, it should not be deployed. If it works poorly, that fact should be taken into account when it is weighed against privacy or other values. Temperature screening should only be done if, where, and in ways that public health experts believe will actually meaningfully contribute to combatting the pandemic. Currently, experts say that there are sharp limits to its potential usefulness in detecting COVID–19.

First, elevated body temperature can be caused by many factors other than COVID–19, including exercise, emotional state, and other illnesses. As one medical article put it, "One has to keep in mind that screening for fever and screening for a virus are two different issues." In these instances, fever detection will be over-inclusive.

Second, body temperature measurement will do nothing to detect infected people who don't have a fever. COVID–19, unlike some other diseases such as Ebola, is contagious well before symptoms appear, and many infected people—perhaps even most—never do get any symptoms, much less fever. In addition, there is a lot of variation in people's body temperatures; what is a fever for one person could be a normal temperature for another. Finally, even those who do have fevers caused by COVID–19 can suppress them by taking antipyretic medicine like aspirin or ibuprofen. In these instances, fever detection will be under-inclusive.

Third, stand-off fever detectors are of highly questionable accuracy. In addition to internal (usually oral or anal) thermometers, which are regarded as the gold standard of accurate temperature measurement, there are 3 primary kinds of thermometers:

1. "Tympanic" thermometers, which are inserted into the ear to measure heat in the tympanic membrane;
2. "Thermometer guns," or "non-contact infrared thermometer" (NCITs), which are held 3–15 cm away from the subject's skin, typically at the forehead; and
3. Standoff thermal cameras that try to detect body temperature from further away.

All of these devices have to be used correctly, which is not necessarily easy for those who aren't medical professionals. Assuming proper use, ear thermometers have proven to be reasonably accurate, but a number of studies have found that the other 2, which measure surface skin rather than core body temperature, are of questionable accuracy. Skin temperature can be affected by such things as sunburn, alcohol consumption, moisture on the skin such as sweat, or hot or cold air temperatures.

As one industry analyst put it, "Some people who have elevated skin temperature (EST) may have elevated body temperature (EBT). Some of those people with EBT may have a fever. Some of those people with a fever may have coronavirus." But that is a narrow path to accuracy.

Nevertheless, products marketed as "fever detectors" (and sometimes even "coronavirus detectors") are flooding the market. In China, thermometer guns have been found "unreliable outside carefully controlled health care settings." Indeed, the FDA has published a long list of finicky requirements for their proper use. There are even more questions about thermal cameras. The flood of new products has been encouraged by the FDA, which announced that during the pandemic it would allow

thermal cameras to be used as unapproved fever detection devices even though the agency considers them to be medical devices. The FDA did set some important qualifications, however. It said that such devices should:

- Only be used to measure one subject at a time;
- Only be used in conjunction with a more accurate back-up means of measuring temperature; and
- Include a "prominent notice" reminding operators how "different environmental and system setup factors" can influence a device's accuracy. Those factors include where on the human body a temperature is measured as well as the "screening background, ambient temperature and humidity, [and] airflow" at the camera location.

The FDA's caution is backed up by testing carried out by the independent camera testing and review site IPVM, which found significant accuracy issues with cameras on the market. The difference in temperature between a healthy and febrile person—especially those with low-grade fevers who are more likely to be out and about—is quite minor. The typical precision claimed by the scores of companies now offering such products is 0.3–0.5 degrees C (0.54–0.9 degrees F)—but the reviewers were "skeptical of actual field accuracy as these are likely overinflated," and found cameras on the market that were far less accurate. Camera positioning was also a problem since recording subjects from the side, or subjects who are moving, "significantly reduces" accuracy.

Like temperature guns, thermal cameras are also apparently very finicky with regards to calibration. Even in controlled environments, they are highly sensitive to room and climate conditions and often need hourly calibration reviews. Many of the most accurate thermal cameras utilize "blackbody devices"—essentially small heaters that maintain an exact temperature—which have to be mounted within a camera's view and at the same distance as the subject for proper calibration. Readings can be disrupted by hats, sunglasses, masks, and hair over the face. And, as IPVM notes in a dismissive review of one company's fever detecting sunglasses, "virtually none of the large providers of thermal fever cameras are recommending such outdoor, on the move applications" because there is an "engineering consensus" that such uses are "not reliable."

As IPVM, which has caught several companies making false marketing claims, sums up the situation:

"A core issue is there are no independent tests of thermal camera performance/accuracy and no independent standards to measure against. This has allowed manufacturers to tout products meant for body/fire detection as a fever solution, or falsely claim pinpoint accuracy at long distances."

By this point, given this litany of challenges, it should be apparent just how farfetched is the concept of a "Coronavirus-detecting drone" like the Draganfly aircraft briefly considered by a Connecticut town. Given the FDA's stipulation that unapproved fever-detecting cameras only measure one person at a time, such a device may not even be legal. But the Draganfly and fever-detecting sunglasses are not the only unlikely products; companies are marketing less flashy devices that still purport to be able to scan dozens of people at once, in movement, and at long and varying distances.

The thermal cameras that are most accurate (which can cost 2 to 4 times as much as a typical $15,000 system) are designed to scan only a single person at a time (per the FDA's guidance), and to do so frontally, at close range, and on still subjects. Overall, however, there is a veritable gold rush of companies scrambling to put "fever detectors" on the market and cash in on the crisis. The result is accuracy levels that appear to be all over the map and a certain degree of snake oil.

The bottom line is that nobody should imagine that blanketing our public spaces with thermal sensors is going to serve as any kind of effective automated "COVID detection network," or that this technology is likely to contribute significantly to stemming the spread of the virus.

Some will argue that despite all these shortcomings, the possibility of detecting some cases is better than nothing, and that temperature screening could therefore have some role in suppressing the disease before a vaccine is developed. There may be some truth in that view, though such a possibility needs to be balanced against 3 significant risks:

1. If there are too many false positives, that could waste resources, annoy people (leading to circumvention), and create a "Boy Who Cried Wolf" effect, causing operators to ignore even true positives. All of that would reduce the effectiveness of temperature screening even further and potentially even be counterproductive.

2. Temperature screening that misses many actually infected people can create a false sense of security, lulling people into complacent sloppiness about more effective measures such as social distancing.

3. The overinclusive nature of temperature checks will lead to real consequences for people—for example someone who may not be able to shop for groceries or use the Metro to get to work despite the fact that they pose no public health risk. These consequences could be especially serious where temperature screening is used at essential facilities such as courthouses—and may be outsized for poor, minority, or other underserved communities who have fewer alternative options and less ability to seek redress.

It is for reasons such as these that many public health experts are dubious about the benefits of temperature screening. Prominent epidemiologist Michael Osterholm says, "I don't think airport temperature checks have any major effect on stopping or even slowing down transmission." The University of California San Francisco hospitals don't do temperature screening because the experts there found that the time and expense was unjustified and creates a false sense of security. "It's something we should not be doing," they declared. An expert analysis of existing studies likewise found that temperature screening programs "are ineffective for detecting infected persons."

PRIVACY ISSUES

Temperature checks also raise privacy issues. In most circumstances, a remote temperature check is not an enormous invasion of privacy, especially if individual records are not retained—as they should not be outside of health care contexts. But neither is it something that we would ordinarily want companies or Government agencies to routinely collect. And lurking in the wings behind remote temperature readings are technologies like remote detection of heart rate, breathing rate, and heart rate variability, which studies have found can all be measured using digital cameras (on still subjects, at least for now). There have even been preliminary results on the measurement of blood oxygenation. That kind of data is a significant privacy risk that can reveal a person's medical conditions, from detection of arrhythmias and cardiovascular disease, to asthma and respiratory failures, physiological abnormalities, psychiatric conditions, and even the stage of a woman's ovulation cycle.

Already, Draganfly claims that its COVID-detecting drone can remotely detect heart and respiratory rates in addition to temperature. The TSA has proposed collecting passengers' physiological data in the context of a program (now apparently stalled) called FAST (aka "Project Hostile Intent"), which aimed to detect terrorists by measuring every passenger's heart rate and body temperature as well as things such as eye movement and facial patterns.

In addition, with so little still known about the disease, it's possible scientists could conclude that other metabolic signs are equal to or better than temperature in flagging possible COVID–19 cases. For example, anecdotal reports suggest that "silent hypoxia" often accompanies COVID cases; that might lead to the screening of people's blood oxygen levels using oximeters. It has even been suggested that people be tested for their sense of smell.

This crisis threatens to normalize such physiological surveillance, with the result that even after a vaccine is distributed and COVID–19 retreats as a public health threat, new infrastructures for the routine and suspicionless collection of such data will remain. We don't want to wake up to a post-COVID world where companies and Government agencies think they can gather temperature or other health data about people whenever they want. Before the outbreak, the Department of Homeland Security had already been pushing the use of thermal cameras as body scanners in transit stations as a way to try to detect threats such as suicide bombers—a Constitutionally-problematic and certainly ineffective program that would alert over all kinds of private items that people carry in their clothes. But it's not hard to imagine a network of thermal cameras created to fight the coronavirus repurposed for these suspicionless thermal body searches.

Some companies are betting on the technology outlasting the crisis; as one manufacturer wrote, "We believe the demand for viable solutions like these will last far longer than most people think. Just like 9/11 and how it impacted and changed air-travel forever, this too will change the way we live and work for a long time to come."

That is precisely what we do not want to see.

TEMPERATURE CHECKS AS PART OF A DISEASE SURVEILLANCE EFFORT

It is true that we may be facing a years-long battle to suppress the coronavirus before the advent of a vaccine, and efforts to quickly detect and quarantine COVID–19 cases could be crucial during that time. Such disease surveillance will be needed not only to save lives, but also to provide Americans with the widest possible freedom while they wait for a vaccine. The ideal way to track the disease would be through a fast, inexpensive, easy-to-administer, and widely available test for COVID–19.

Despite all of the technology's shortcomings, it's possible that some public health officials could judge that temperature screening is also worth doing in at least some contexts. Any such judgments should factor in the potential for significant or disparate disruptions in people's lives, for example by creating hour-long waits for transit stops in low-income neighborhoods. In addition, a lot of employers, stores, and other establishments will want to institute temperature screenings based either on similar judgments, out of a mistaken understanding of their effectiveness, or as a kind of "public health theater" meant to reassure customers who themselves hold such a misunderstanding.

Given the balance of factors involved, we do not think that "mass screening" thermal cameras should be used in any temperature screening. Even accurate temperature checks are of dubious usefulness in stopping the spread of the coronavirus. Among all means of trying to detect fever, remote detectors also appear to be the least accurate while at the same time the most likely to outlive the epidemic and end up being used for other purposes, like security screening, when COVID–19 is no longer a threat.

If public health experts decide that properly-conducted temperature checks in certain appropriate times and locations would make sense as part of a disease surveillance effort, then that goal would be better served by deploying more accurate, direct detection devices such as clinical-grade tympanic thermometers. Any contact devices must of course be used in hygienic ways lest they spread the disease they are meant to stop. Thermometer guns and the best close-range, single-subject thermal cameras might also be used if their accuracy rates are found to be reasonable enough that their advantages over tympanic thermometers (speed and lack of direct contact) justify their use.

Like standoff detectors, such devices raise privacy issues because they gather people's physiological data, and they can be mildly more intrusive. Unlike a standoff sensor, more accurate devices have a low throughput rate and will require people to line up and actively participate in allowing their body to be physically measured. At the same time, they do not involve remote checks that can be done without a subject's knowledge, permission, or participation. For that reason, and precisely because they are slightly more intrusive and inconvenient, the use of more accurate devices is far less likely to outlast the pandemic.

Because they are less accurate, standoff fever detectors are also more likely to lead to discriminatory treatment for people of color and members of marginalized communities. What we have found with other imprecise technologies is that they tend to devolve into racial profiling in the hands of at least some of their operators. Examples include the TSA's SPOT program, and polygraphs, aka "lie detectors." This is because when risk-detection systems produce highly ambiguous or unreliable indicators, their operators begin filling that vacuum of reliability with their own judgments. Unreliable devices can also enable harassment or selective enforcement against people because of their appearance or political views.

One point that public health experts have long stressed is that voluntary measures to combat disease tend to be more effective than mandatory ones. This is because they leverage people's own incentives to report disease and receive help rather than creating an antagonistic relationship with the authorities that can spark resistance and evasion. For that reason, people should always have the right to leave rather than submit to a public temperature checkpoint. And employers and other establishments that want to perform temperature checks should consider offering self-serve temperature-checking facilities that allow employees to monitor themselves. People want to know if they may be sick; people don't want to spread a disease to their families or anyone else. And as we have seen, people who are antagonized by mandatory checks have many ways of intentionally defeating temperature screenings.

Finally, many people have fevers not related to infectious conditions. Some have low-grade fevers that may last weeks or longer, which can be caused by conditions such as cancer, urinary-tract infections, or even just stress. Where temperature screening is deployed, provisions will need to be made for them, especially if it is used at essential facilities. One thing that means is having a conversation with

those who show up as positive, rather than summarily blocking them from entry. And anyone denied access to a critical service or function (such as applying for benefits, or appearing in court) because of a temperature screening should be given an alternate means of access to that service or function.

SUMMARY OF RECOMMENDATIONS

- Temperature screening should not be deployed unless public health experts say that it is a worthwhile measure notwithstanding the technology's problems. To the extent feasible, experts should gather data about the effectiveness of such checks, to determine if the tradeoffs are worth it.
- People should know when their temperature is going to be taken. Standoff thermal cameras should not be used.
- People should always have the right to leave rather than submit to a public temperature checkpoint.
- Personally identifiable data about individual readings should not be stored.
- No action concerning an individual should be taken based on a high reading from a remote temperature screening device unless it is confirmed by a reading from a properly-operated clinical-grade device, and provisions should be made for those with fevers not related to infectious illness.
- Anyone denied access to an essential service because of a temperature screening should be given an alternate means of access to that service.
- Hygienic self-serve or voluntary temperature-checking facilities are preferable to mandatory checks.

CONCLUSION

There's a lot of reason to doubt that temperature checks will help stop the spread of COVID–19, and they should not be deployed unless public health experts say conclusively that they will help. What we don't want is a world where inaccurate tests disrupt people's lives—especially those most vulnerable to such disruptions—waste time and other resources that could be better used in fighting the pandemic, and invade our privacy.

Cameron Chell, the CEO of drone company Draganfly, told a reporter, "Drones buzzing a few hundred feet away may seem intrusive, but it's certainly not as intrusive as having a line-up and someone sticking a sensor on your forehead." But how intrusive it seems is not as important as what data is collected about you, what is done with it, whether that data is accurate, and whether that data collection becomes permanent or even expands.

Many new products and approaches for combatting the coronavirus pandemic are being proposed. We need to skeptically scrutinize all such products and proposals, especially where they have implications for our privacy or other civil liberties. Temperature checks do have such implications, so they should be adopted only where their accuracy, and thus their benefits against COVID–19, are reasonably high, and where they are not likely to outlast the disease.

Mr. CORREA. Thank you, Ms. Guliani, for your testimony.

Now I recognize Ms. Barnes to summarize her statements in 5 minutes.

Ms. Barnes, welcome.

## STATEMENT OF VICTORIA EMERSON BARNES, EXECUTIVE VICE PRESIDENT FOR PUBLIC AFFAIRS AND POLICY, U.S. TRAVEL ASSOCIATION

Ms. BARNES. Thanks, Chairman Correa, Ranking Member Lesko, Members of the subcommittee, good afternoon.

I am Tori Emerson Barnes, executive vice president of public affairs and policy for the U.S. Travel Association. Thank you for inviting the broader travel industry to participate in this important hearing.

Before the devastating COVID–19 pandemic, travel supported 15.8 million American jobs but now the Nation's seventh-largest work force has been cut in half, with more than 8 million jobs lost, totaling a third of all jobs lost since March. This represents a total economic impact 9 times greater than the 9/11 attacks. Simply put,

the only way to restore the economy will be to restore travel. To restore travel, we must make sure that Americans are willing and able to fly again.

According to a survey by destination analysts, more than half of Americans said that they will feel safe taking a road trip compared to just 21 percent who said they would feel safe traveling by air, and 53 percent of Americans said they won't fly by air until at least March 2021, if not later.

That is why I am here today, to discuss the hurdles that we must overcome to restore air travel and what Congress, TSA, CBP, and the entire industry can do to help. While there are several opportunities and solutions, today I would like to focus on 3 areas: No. 1, implementing health and safety guidance to protect aviation workers and customers; No. 2, clearly communicating the travel with travelers about what is being done to help keep them safe; and, No. 3, steps that Congress can take to accelerate recovery and invest in the long-term competitiveness of our Nation's aviation industry.

After 9/11, industry leaders said, without security, there will be no travel. The global pandemic requires a similar approach. Without guidance to promote the health and safety of travelers and workers, there can be no travel, no reopening of businesses, and no revival of our economy.

To that end, U.S. travel convened a task force of health experts and travel industry leaders to create a core set of health and safety guidance that the industry can adapt to reopen responsibly, which includes, among other guidance, increased sanitation, transmission barriers, and touchless solutions.

TSA and CBP must also take steps to protect the health and safety of travelers and workers. TSA can focus resources on requiring masks at security checkpoints, modifying security lines to allow for physical distancing, and enhancing sanitation.

As with every other segment of air travel, TSA and CBP must take a flexible, layered, and risk-based approach to health and safety. When physical distancing is not fully possible, other measures such as transmission barriers must be put into place. Similar to security challenges, we will never be able to eliminate 100 percent of risk, but a layered, risk-based response from TSA and CBP can be enormously beneficial.

As we saw in the early days of TSA, once a security screening standard is introduced, it is hard to roll it back. Any measures put in place related to COVID–19 must be temporary and then ease as the threat of the virus is eliminated or reduced. It is critical that CBP and TSA work with the broader travel industry to facilitate consumer confidence by very clearly communicating health and safety procedures that passengers can expect at airports.

There are several steps that Congress can take to mitigate all of this damage, shorten the industry's recovery time, and increase long-term competitiveness for the United States, which includes enhancing a temporary travel tax credit, restoring the business and entertainment tax deduction, and funding a local travel promotion campaign for the United States domestically.

Another important long-term solution is the wide-spread implementation of opt-in biometric identifications and CLEAR, a contactless identification system.

The travel industry and the larger American economy will not recover on its own. We need resources, stimulus, planning, and clear communication to travelers and employees to ensure air travel can safely resume and help power our Nation's economic revival. Travel is not going to look the same as did it before the pandemic. Every segment of the travel aviation community has made significant changes to protect the health and safety of all travelers and workers.

Thank you, again, to the subcommittee for having me here today. I look forward to your questions.

[The prepared statement of Ms. Barnes follows:]

PREPARED STATEMENT OF VICTORIA EMERSON BARNES

JUNE 18, 2020

Chairman Correa, Ranking Member Lesko, Members of the subcommittee, good afternoon.

I'm Tori Emerson Barnes, executive vice president of public affairs and policy for the U.S. Travel Association. Thank you for inviting the broader travel industry to participate in this important hearing.

U.S. Travel is the only association that represents all sectors of the travel industry—airports, hotels, State and local tourism offices, car rental companies, theme parks and attractions and many others. I am here today to discuss the hurdles we must overcome to restore air travel and what Congress, TSA, CBP, and the entire travel industry can do to help.

Before the devastating COVID–19 pandemic, $1.1 trillion in traveler spending in the United States generated a $2.6 trillion total economic impact and supported 15.8 million jobs. But now the Nation's seventh-largest workforce has been cut in half, with more than 8 million jobs lost—totaling a third of all jobs lost since March.[1] Further, we are on track to lose half a trillion dollars in spending by the end of the year, representing a total economic impact 9 times greater than the 9/11 attacks.[2] Following the attacks, it took the travel industry 18 months to recover, indicating the travel industry's recovery time from this crisis could take several years.

Simply put, the only way to restore the economy will be to restore travel. To restore travel, we must make sure Americans are willing and able to fly again. Unfortunately, recent data shows that air travel may be the slowest sector of the industry to rebound.

According to a June 1 survey by Destination Analysts, more than half of Americans (55 percent) said they would feel safe taking a road trip, compared to just 21 percent who said they would feel safe traveling by air.[3] The same survey found that more than half of Americans said they hope to take a road trip before October of this year. Conversely, 53 percent of Americans said they won't fly again until at least March 2021, if not later.

We clearly have a long way to go in restoring travelers' confidence in air travel. While there are several opportunities and solutions, today I would like to focus on 3 areas:

1. Implementing health and safety protocols to protect aviation workers and customers;
2. Clearly communicating with travelers about what's being done to keep them safe; and
3. Steps that Congress can take to accelerate recovery and invest in the long-term competitiveness of our Nation's aviation industry.

First, changes must be made throughout the entire air travel system to promote the health of travelers and workers alike. After 9/11, industry leaders said, "Without security, there will be no travel." The global pandemic requires a similar approach and demands a comprehensive response. Without guidance to promote the health and safety of travelers, there can be no travel, no reopening of businesses and no revival of our economy.

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[1] *https://www.ustravel.org/sites/default/files/media_root/document/TravelDepression_-FactSheet.pdf.*

[2] *https://www.ustravel.org/sites/default/files/media_root/document/TravelDepression_-FactSheet.pdf.*

[3] *https://www.destinationanalysts.com/blog-update-on-american-travel-in-the-period-of-coronavirus-week-of-june-1st/.*

To that end, U.S. Travel convened a task force of health experts and travel industry leaders—including airports, airlines, and 30 other industry organizations—to create a core set of health and safety guidance that the industry can adapt to reopen responsibly.[4] This guidance has been included with our testimony.

This comprehensive guidance aligns with CDC guidelines for reopening America and includes:

- Limiting crowding in public spaces;
- Providing touchless solutions for identification and payments;
- Enhancing sanitation;
- Encouraging health screening of employees and customers;
- Modifying food and beverage preparation; and
- Developing procedures for if an employee tests positive for COVID–19.

This guidance is being implemented across the industry. Most major domestic airlines have adapted to this "new normal" by requiring passengers to wear masks.[5] Airports have modified spaces to allow for physical distancing and have stringent disinfecting procedures in place. CLEAR, a contactless identification system, has proven invaluable in providing a hygienic, secure alternative to traditional identity verification measures.

TSA and CBP must also take steps to protect the health and safety of travelers and officers. Similar to actions taken in other segments of the travel industry, TSA can focus resources on requiring masks at security checkpoints, modifying security lines to allow for physical distancing and enhancing sanitation at checkpoints.

As with every other segment of air travel, TSA and CBP must take a flexible, layered, and risk-based approach to its health and safety protocols across airports. For example, physical distancing is an asset, but it will be a dynamic challenge at some airports with limitations on physical space. Where physical distancing is not fully possible, other measures such as transmission barriers must be put in place. Similar to security challenges, we will never be able to eliminate 100 percent of the risk, but a coherent, layered, risk-based response from TSA and CBP can be enormously beneficial. Passengers need to see a thoughtful and rational approach from Government officials. As we saw in the early days of TSA, once a security screening standard is introduced, it is hard to roll back. Any measures put in place related to COVID–19 must be temporary and then eased as the threat of the virus is eliminated or reduced.

For these reasons, the broader travel industry has not taken a position on whether TSA should conduct temperature checks at airport checkpoints. During the development of U.S. Travel's health and safety guidance, public health experts did not broadly recommend temperature checks, due in large part to differing views as to whether temperature checks are a reliable tactic to prevent the spread of COVID–19. Concerns included the likelihood of false negatives and false positives.

There are also significant questions as to how TSA would operationalize temperature checks, handle passengers who record a high temperature and the family members or companions traveling with them, and more. Without answers to these questions and without a clear recommendation from public health officials that temperature checks are absolutely necessary, we have not yet endorsed a requirement for TSA to conduct temperature checks.

All of our recommended measures will require TSA and CBP to have adequate funding and staffing. While the CARES Act provided $100 million to airports for janitorial services, TSA has told airports that these funds may only be used to sanitize checked bag drop, TSA checkpoints, or TSA offices. Limiting the scope of janitorial services to these locations minimizes the effectiveness of cleaning and provides little relief to airports; we believe these restrictions are inconsistent with the intended purpose of this funding. TSA should expand the use of CARES Act sanitation services to include all highly-trafficked or high-touch areas at airports, including restrooms, food service, seating, and touched surfaces.

Additionally, now is the time for Congress to end the diversion of TSA fees and finally allow those funds to be reinvested back into adequate staffing and equipment needed to create a more safe, healthy and secure air travel process.

Second, the travel industry is working together to communicate directly with travelers about what's being done to protect their health and safety. It is critical that TSA and CBP work with the broader travel industry to facilitate consumer confidence by clearly communicating health and safety procedures that passengers can

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[4] *https://www.ustravel.org/sites/default/files/media_root/document/HealthandSafetyGuidance.pdf.*

[5] *https://www.airlines.org/news/major-u-s-airlines-announce-increased-enforcement-of-face-coverings/.*

expect at airports; the agencies must have adequate funding to carry out this objective.

Third, there are several steps Congress can take to mitigate damage, shorten the industry's recovery time and increase long-term competitiveness. An important solution is the wide-spread implementation of opt-in biometric identification. This technology has already proven successful at facilitating secure, efficient travel, and further promotes the health of travelers by providing a contactless screening process. Registered traveler program participants are already familiar with biometric identification, but TSA and CBP must invest in CAT–C and CT screening technology to bring touchless security screening to the checkpoint. Importantly, investments in CAT–C technology should happen in tandem with allowing for interaction between the Secure Flight Database and the registered traveler program. Ensuring that all identity verification methods at the TSA checkpoint can utilize the Secure Flight database makes sense for security and the facilitation of passengers.

Congress must also take steps to push back the REAL ID enforcement deadline until the travel industry is fully ready for enforcement and implementation will not interrupt recovery. As stated previously, it took the travel industry 18 months to recover after the 9/11 attacks; the economic fallout of the COVID–19 pandemic is 9 times worse and is likely to stretch across multiple years. Ranking Member Lesko's Trusted Traveler REAL ID Relief Act would be critical in requiring the TSA to develop a contingency plan to allow those with non-compliant IDs to still clear the security checkpoint after the enforcement date.[6]

Finally, it is crucial that we put the right recovery strategies in place now to mitigate the pandemic's economic damage and get our country back on track. According to a report conducted by Tourism Economics, travel loss mitigation efforts could see the industry gain 1.3 million jobs and $147 billion in overall GDP by the end of the year.[7] These strategies include:

- Enacting a temporary travel tax credit that provides a refundable tax credit for transportation (including airfares) lodging, food, and entertainment, as a way to help American families reconnect with each other, stimulate travel demand, and accelerate rehiring.
- Restoring the business food and entertainment tax deductions to encourage companies to reinvest in their communities by doing business at local restaurants and centers for entertainment and the arts; and
- Funding a local travel promotion campaign to help promote businesses that have safely reopened and provide information to travelers about how they can travel safely to a destination and what's being done to protect their health during their stay.

Every month that the downturn is mitigated would bring back almost $17 billion to the travel industry and $21 billion to overall U.S. GDP.

The travel industry—and the larger American economy—will not recover on its own. We need resources, stimulus, planning, and clear communication to travelers and employees to ensure air travel can safely resume and help power our Nation's economic revival. Travel is not going to look the same as before this pandemic. Every segment of the travel and aviation community has made significant changes to protect the health and safety of all travelers and workers.

Thank you again to the subcommittee for having us here today.

Mr. CORREA. Thank you, Ms. Barnes, for the testimony.

I will remind each Member that he or she will have 5 minutes to question the panel, and I will recognize myself for 5 minutes of questions, and I would like to start up with where Ms. Barnes ended, so to speak, her theme.

You know, it is often said that the U.S. airline industry is the hub of international air logistics. We provide the world with not only passengers but with all kinds of products. We are the center, so to speak, of the world in terms of transportation, delivery of goods and services.

Just to let you know how personal the industry is, the biggest employer in my district is Disneyland. They remain closed. They will open up probably sometime in July, but I would imagine that

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[6] *https://www.congress.gov/bill/116th-congress/house-bill/5827?s=1&r=8.*

[7] *https://www.ustravel.org/sites/default/files/media__root/document/Coronavirus2020__-Impacts__April15.pdf.*

getting tourists to start coming back to southern California is going to be a long track. The issue, like Ms. Guliani said, was trust and confidence. How do we get voluntary compliance? How do we get folks to start traveling again? I have got probably 98 percent of my hotel employees out of a job right now. They are not going to last too long.

So my question to each and every one of you is, you know, we have got Mr. Burke with the Airport Council.

Ms. Nelson, flight attendants, essentially, Ms. Nelson, you are representing the employees.

Ms. Guliani, you are talking about the civil rights of how far we can go in terms of addressing some of these issues.

Ms. Barnes, you are with the travel association.

So if any of you can take about a minute to tell me, in coordination, what are the top 2 or 3 things we need to do to get folks to start traveling between in a safe manner?

Mr. Burke.

Mr. BURKE. Mr. Chairman, we have to make the American public feel safe in traveling again. This disease, this COVID–19, has terrified Americans, and rightfully so.

Mr. CORREA. Let me interrupt you and say, how do you do it with everybody having that confidence and that trust? That is what the Chairman and I talked about an interagency task force. What are the top 2 or 3 things we have got to do to make people think, to believe, to be factually correct that they can travel again safely?

Mr. BURKE. Well, we have to convince them, Mr. Chairman, that going into a big, public place like an airport, that they will be safe if they wear masks, if the employees there are wearing masks, if the TSA folks are wearing masks, if they are required to wear masks on airplanes, if they socially distance or if they wear masks, maybe cut the social distance. But we have to, as public institutions, make people feel as though the travel experience is not as terrifying as they think it is going.

As they begin to travel again, the proof is in the pudding, and the reality is the more we protect the traveling public and the better the results, more and more people will want to travel, but that requires cooperation between the private sector, the airports, the airlines, and the regulatory agencies. We have done a tremendous job working with TSA in particular——

Mr. CORREA. Excuse me.

Ms. Nelson, your comments on that? Ms. Nelson.

Ms. NELSON. Thank you so much.

So definitely we need to make sure the mask policies are applied across the airport and airplanes and that it is backed up by Federal regulations. We need to make sure that we are doing self-assessments, wellness checks. That can be done with a corps of individuals who are sent to our airports who are trained to do that.

We have a model just like this in security. This is used as a deterrent. It is used as a means to get travelers to think about their security and to make sure that we are rooting out as many risks as possible through this self-assessment. So we ask travelers all the time: Did you pack the bag yourself? Show us your documents. This gets people to not be violating the security procedures. We can do the same thing with health. We have to have social distancing

policies in the airport. This is impossible on the plane, although——

Mr. CORREA. Thank you.

Ms. Guliani, the same question. Ms. Guliani.

Ms. GULIANI. Yes, I couldn't agree more. We need trust and confidence. I think 2 things that would help with that effort: No. 1, clear public benchmarks for how you are actually going to measure the effectiveness. If the public knows that it is based on science and that we have met those benchmarks, they are going have more trust and confidence in the measures adopted.

The second thing is making sure that we are limiting any information selected to what is necessary and that it is only going to be used for health purposes. We want people to feel comfortable, whether it is a system check or something else, disclosing medical facts, disclosing information about their life. If they are worried that that is going to end up in a law enforcement database or someplace else, I worry that they won't undertake the voluntary compliance measures that are necessary to keep them safe.

Mr. CORREA. Thank you.

Ms. Barnes, last comments.

Ms. BARNES. Sure. Completely agree that a clear communication of health and safety guidance and what the traveler can expect is absolutely necessary. We have a lot of data that demonstrates that, with the right assurances and the right communications as many as 60 percent of folks will get out there and travel again.

We also think that the opt-in, touchless solutions that you can achieve through biometric technology is something that should really be on the table here and something that could help improve the experience. Then we also think that, you know, again, TSA and CBP collaborating and collectively sending the same message. We agree masks are important. In the absence of the ability to have physical distance, then you need to be able to wear a mask.

But just as TSA and CBP have [inaudible] the ability for folks to travel with hand sanitizer and the cleanly and social distances required as airports, we think that should apply across the board. Clear, articulation of the policies is absolutely critical.

Mr. CORREA. Thank you, Ms. Barnes. I would now like to recognize the Ranking Member of the subcommittee, the gentleperson from Arizona, Mrs. Lesko, for 5 minutes of questions. Welcome.

Mrs. LESKO. Thank you, Mr. Chairman.

First of all, I have to say that I give Congressman Dan Bishop extra bonus points because it looks like he was on a plane, then walked through the airport, and is now on another plane. Are you on another—no, he is in a car now. Very appropriate. It is very appropriate [inaudible] airport.

Anyway, I have—I wish that the airlines were on this committee because I have a couple suggestions for them, which I think—I do think that having people wear masks on the airlines, actually, at least for me personally, makes me feel better that the person sitting right behind me isn't going to cough on me and, you know, spread their germs on me, but also when I was on a call with the airlines, oh, boy, I think it was a couple weeks ago, they had said that they thought that they were going to have people board from the back of the plane and instead of the way that they are now.

So I was wondering—I don't know who to ask this of. Maybe the flight attendant association. Do you think that would be helpful? Do you think that would help people feel better? Because, you know—I usually try to wait till the end to get on the plane, but other people sit in the front and then all those people pass by.

So I want somebody's opinion.

Ms. NELSON. Sure. So this is Sara. Some of the airlines are implementing policies like that because it decreases the touch points that passengers are touching with each other. So some of the airlines do have policies to board from back to front, and that is very good thinking.

Mrs. LESKO. Well, I think so too. The other question I have for Mr. Burke is actually about the airports itself and the tenants. When I go into the airports—I mean, it is getting a little bit better now, but most of the stores are closed. A lot of the restaurants are closed, and so how are the airports dealing with the tenants? Are you giving them some rent breaks, or what is happening there?

Mr. BURKE. Very good question, Madam Congressman. Some airports are. The majority of them are. Some of them are not, depends on what their contracts are. Some have closed because there is no business for them. You walk through some airports, there is literally no business at all. So it has been a very, very difficult time, and we hope to have those tenants when things come back, but they can't pay rent when they have no money coming to them and when we have no money coming into airports, we can't give abatement.

But an awful lot of airports in this country have given abatement on rent, on minimal annual guarantees and things like that, but it has been across the board a little bit uneven. But for the most part, airports have done their level best to try to help out their tenants because when it does come back, the passengers are going to need these tenants to be able to buy things, to buy food. Right now, they do grab and go, for example, rather than sitting down.

The other thing that airports are doing is working with the tenants to make sure that they are safe and the fact that they are adhering to health standards as well. One of the challenges we have is physical separation in airports that were not built for this type of crisis, nor were they built for the crisis at 9/11 and, that is, separating people with gates and separating people in lines whether it be at TSA or whether it be at lines boarding planes.

Six-foot separation really means 6 by 6 by 6 by 6. So, in airport jargon, that is a big piece of real estate to be able to separate people. So wearing masks is going to be key, and we welcome Federal guidelines to do that. Absent those Federal guidelines, we would accept any regulations from State and local authorities, but we think, to even things off, that the Federal Government, on a temporary basis even, would put out some guidance to require people to wear masks in airports to protect passengers and vendors.

Mrs. LESKO. Thank you, Mr. Burke.

Ms. Singh, I have a question for you. On the one hand, I think in previous testimony, previous hearings in Homeland Security, the ACLU and others is concerned about pat-downs. Like, let's say, someone has a hair-do, hair bun, that type of thing and they have an extra pat-down, but then also I know that the ACLU and others

are concerned about new technologies that it would actually then eliminate more of the use for pat-downs.

So I am trying to reconcile where you are at and how we can solve this problem? Because on the one hand, you don't want pat-downs, but then it seems like you are also against new technologies.

Ms. GULIANI. Sure. So thermal detection has been one of the things for pros to try to reduce pat-downs. In the past, TSA has tried to use thermal detection outside the airport context, and that does raise a number of Fourth Amendment and Constitutional concerns.

Within the airport context, I think there is just questions. There are some threshold questions about whether that type of thermal detection will be helpful. There are a lot of false positives, right, and so will it actually serve the purpose for which it is intended? But if it is done in a way where it is pursuant to rulemaking, privacy impact assessments, it is proven to be effective, you know, a temporary measure to reduce pat downs in a way that is consistent with civil liberties is certainly possible.

I think we just have to have the data and the information to understand what exactly is being done and to what extent is it consistent with individuals' rights.

Mrs. LESKO. Thank you. You know, I know that my time is up, but I do know that if they are good systems, I think that the National Institute of Science has said that some of these are really good, the technology is really good, and doesn't have that many false readings.

Mr. Correa, I would yield back. Thank you, Mr. Chairman.

Mr. CORREA. Thank you, Ranking Member Lesko.

The Chair will now recognize other Members for questions they may wish to ask the witnesses as previously stated. I will recognize Members in order of seniority, moving between Majority and Minority. Members are reminded to unmute themselves when they are recognized for questions. With that said, I would like to recognize the Chair of the full committee, Mr. Thompson, for 5 minutes of questions.

Sir.

Mr. THOMPSON. I thank the witnesses for their testimony today. You know, when we had the unfortunate incident on September 11, we put a lot of things into place. We created TSA. We did a lot of things.

Mr. Burke, are there some things being put in [inaudible] maybe should become part of the new protocol in this COVID–19 environment?

Mr. BURKE. Mr. Chairman, thank you for the question. I think what is happening now is airports are responding to make certain that they can gain out what it will look like when air travel is up to 50, 60, 70 percent. For all intents and purposes, we might have for a long period of time social separation of 6 feet.

The challenge airports have there, sir, is, how do you do that in limited space without interfering with other lines and other gates? The use of Plexiglass, for example, is being used not only in airports, but in other industries across the country.

Use of masks. I can't emphasize that enough where we would welcome regulations on a temporary basis that you should wear a mask in an airport when you are transferring through it. If, in fact, you have to wear it on an airplane, you should be wearing it during [inaudible] mask going through an airport as you would if you got on an airplane.

So long term, I think what we need is we need more funding to be able to look at, how do we do this in the future if, in fact, we have to inspect people outside the [inaudible] infrastructure change.

Because look at airports. In the middle of January, you are going to have people standing in lines outside Minneapolis when it is 25 degrees below zero or 115 degrees in Phoenix in the sun [inaudible] very complicated. What is required in the end, Mr. Chairman, if we have to make these changes is we are going to need money to be able to adapt to a system that was kind-of thrown upon us since January.

We are willing to work and be able to do this, but we are going to need the money [inaudible].

Mr. THOMPSON. Comments on that?

Ms. NELSON. I would just like to reiterate what Mr. Burke said and also say that we do need the flexibility to be able to put these things in place. There are a lot of issues to deal with here, and what we need to do, especially, is that we need to have these procedures in place before we actually have people return to travel.

Because if we are trying to put this in place when you have the back-up of those lines, we are going to have a much harder time actually planning out properly, putting plexiglass in place, having procedures for wellness checks [inaudible] having guidelines around the masks.

All of that needs to be put in place now before we have the influx of additional travel.

Mr. THOMPSON. Well, thank you much for both of your comments. One of the things TSA did, they talked about a biometric roadmap. As we look toward the future and look at what opportunities are out there, and there is obviously enhanced interest, Ms. Guliani, what are your thoughts about the prospect that TSA expands its biometrics operation beyond the Known Traveler Program?

Ms. GULIANI. I mean, I am very concerned by the proposed TSA roadmap. I mean, as an initial matter, we don't have clear legislation or rulemaking around how facial recognition is going to be used by TSA. I think that is a serious problem.

Second, there still remains serious accuracy concerns. The most recent in this test noticed demographic differences and false positives and negatives, and even beyond that, if we look at the full TSA roadmap, it contemplates integration with other DHS databases.

So I think that raises serious questions, like, what data is being collected? Are you going to undergo additional extra checks that have never been implemented in the domestic air travel space? How are we going to preserve privacy? I think we are generally having a bigger National conversation about whether we want facial recognition used by the Government at all. So I am troubled

by the roadmap, and I am troubled by, you know, recent stories we have heard of, for example, in Hawaii where CARES funding is being used to purportedly expand facial recognition, and there is very little information about what the report is doing, how the information is being protected, whether it actually has any efficacy or is tied to a COVID response at all.

Mr. THOMPSON. OK. With your indulgence, Mr. Chair, Ms. Barnes, do you have a comment on that?

Ms. BARNES. Yes, Mr. Chairman. We really do think that travelers see touchless identification, you know, that could help really promote the confidence and the health opportunities, you know. It is proven to be safe, secure, and accurate. We support strictly opt-in. So make it available for travelers but not make it mandatory. We think that is something that could really be helpful and so for those folks who choose to take that route that will alleviate the lines in other parts of the airport.

So we think that that is something that should really be considered, and we do share some privacy concerns, so we need, clearly, clear guidance, but generally speaking, opt-in biometrics can really move us a long way to more secure, more confident traveler.

Mr. THOMPSON. Thank you.

I yield back, Mr. Chairman.

Mr. CORREA. Thank you, Chairman Thompson.

I would now like to recognize the Ranking Member of the full committee, Mr. Rogers, from Alabama.

Sir.

Mr. ROGERS. Thank you, Mr. Chairman.

Ms. Barnes, you talked about in your opening statement the need for more or better communication between TSA and CBP. What are some examples of improved communication techniques or approaches that we could take?

Ms. BARNES. Sure. So we think that some of the work that TSA and CBP have been doing to clearly communicate the changes, for example, on the side of hand sanitizer that you can take. They did a united communication on that. You know, they talked very clearly about the need for cleaning and social distancing.

So we think, to the extent that they can articulate the need for masks, you know, that there are new procedures in place and that, you know, we in the travel industry are happy to amplify all of the communications that are being done, but really what the traveler needs to understand is that there is a consistency and that their health and safety is being put first and foremost.

So, to the extent that they can collaborate together and we can help to amplify and articulate that, that would be really appreciated.

Mr. ROGERS. [Inaudible] the main things that we could do to give comfort or confidence to the traveling public to start flying, again, what would you—you didn't get a chance to reply to his question. What would you suggest are the most essential things that we can do to invigorate confidence in the traveling public?

Ms. BARNES. So we really think that, again, clearly communicating health and safety guidance, really articulating the things that folks can see consistently across the ecosystem. We actually worked with 30 different organizations throughout the whole travel

ecosystem to do a base set of what we would recommend to include, you know, providing touchless solutions for [inaudible] and payments, enhanced sanitation, encouraging, you know, that their procedures for testing as necessary, but really ensuring that we have health and safety guidance that is clearly communicated.

We also think that the biometric opportunity is really significant, that opt-in technology and communicating that there is that kind of option for travelers, we think can really help, you know, clear up some of the congestion issues that would otherwise be, but also present a more confident traveling experience and, quite frankly, a better facilitation of travel. Then, again, the clear messages that we would like to see across the Government on what the expectations can be for the traveler so that, when they come from one State to another, there is an overarching Federal communication of what to expect across that travel ecosystem.

Mr. ROGERS. Ms. Nelson, in your written testimony, you note that the AFA believes the Government should conduct health monitoring of passengers, industry, including the possibility of temperature checks on passengers. You also note that the lack of Government plan means that the temperature checks are not occurring and suggest that a new Federal work force the size of TSA could perform the role of taking passenger temperatures.

Now, the Chairman Thompson did a very good job in his opening statement listing a variety of concerns that I share that go along with this temperature-taking, and you heard Ms. Guliani [inaudible] civil rights concerns.

How would you respond to Chairman Thompson's expressed concerns that go along with this temperature taking and Ms. Guliani's statements?

Ms. NELSON. So we would agree with that. I want to be clear that we were using temperature checks as an example of wellness checks but not to be the be-all end-all at all. That what we would like to have the committee and anyone working on putting these procedures in place focus on is self-wellness checks.

So walking people through questions that help them self-identify: Have you been in contact with anyone who has coronavirus in the past 14 days? Is that possible that you have been or have you been? Have you had a rise in temperature? Have you had a cough?

There are a series of questions that could be asked that are much like, have you packed your own bags? What this will do is, it will create a deterrent. It will also get travelers thinking about these issues and take some self-responsibility for that. What that will do is it will limit the number of people who are entering the airport who actually may be at risk.

This is not going to completely eliminate the risk of coronavirus. That is why you have to have a layered approach with the masks, the hand sanitizer, and the like, but it is a step to help have a layered approach to safety and health so that we are eliminating the risk by taking on all of these measures.

Mr. ROGERS. Thank you.

Mr. Chairman, I yield back.

Mr. CORREA. Thank you very much, Ranking Member Rogers. I would like to recognize for 5 minutes the gentleman, Mr. Cleaver.

Mr. Cleaver, welcome.

Mr. CLEAVER. Thank you, Chairman Correa.

I appreciate you calling this meeting, and actually it is increasingly important to me as I listen to our great witnesses. Let me just say, I have a 97-year-old father who we are probably going to put into a facility. He does have Alzheimer's, but it is difficult for him to kind of manage everything right now.

So I was really upset when I got to the facility to find out that the admittance to the facility was based, first and foremost, on whether or not you had a temperature. On the surface it sounds reasonable and, you know, preventive. However, Black and Brown people in the United States have a disproportionately higher blood pressure than others as it relates to hypertension and some other diseases, and the reason for these disparities remains unclear. There is no definitive study, but the fact remains that they—when you take temperatures, you allow people to admit [inaudible] a person could be a thousand miles from having COVID–19, but because of the hypertension and diabetes and so forth [inaudible] higher.

So, as these issues are being discussed, my No. 1 concern would be that I don't think there would be any intentionality to keep people out, but that is when we talk about systemic. It would keep more Black and Brown people [inaudible] unreasonable.

Ms. GULIANI. I think that you have identified a real problem with temperature checks, right? There is the threshold question of, are these even helpful? There is some suggestion that actually they are not even that effective for identifying people with COVID.

You know, in the travel context, if you take Tylenol or you take other medication that might suppress your fever. You know, many people who have COVID are, actually, asymptomatic and don't exhibit a fever at all. So there are questions about whether it is an effective screening technique, but even if it is, we are going to need allowances for people who have a fever for other reasons, right?

If you are pregnant, if you have hypertension, you have chronic illnesses. Let's say if you are traveling to receive medical care and you have a fever for other reasons, the last thing we want is denying those people their Constitutional right to travel. So what I would say, if there is a temperature check, at most it should just trigger further conversation and further examination of the individual to have, you know, a conversation about what their other symptoms might be, whether there are alternative reasons, and whether they are actually are at risk or do, indeed, have COVID.

Mr. CLEAVER. I yield back my time.

Mr. CORREA. I am sorry, Mr. Cleaver? I didn't hear.

Mr. CLEAVER. That was my principal question. I yield back the balance of my time.

Mr. CORREA. Thank you very much.

I would like to recognize Mr. Bishop, Congressman Bishop, for 5 minutes of questions.

Mr. BISHOP. Thank you, Mr. Chairman. I am going to yield. Appreciate it.

Mr. CORREA. Be safe, sir. Be safe. Drive and be safe.

Mr. BISHOP. Thank you, Mr. Chairman.

Mr. CORREA. I would like to recognize Ms. Watson Coleman for 5 minutes of questions.

Mrs. Coleman.

Mrs. WATSON COLEMAN. Thank you, Mr. Chairman. Thank you to the witnesses that we have had today. I find your testimonies very interesting. Two things stick out with me. One is that there is some need for a task force of some sort to bring together some sort of universal guidelines that make sense during this period of time.

I believe it was suggested that a number of departments or department components could be in this, but I also think Ms. Barnes suggested some outside experts, so I kind-of want to hear what additional people you think should be considered,

The other one was oversight of the implementation of the guidelines. So [inaudible] mentioned that and how do you see that happening? I guess the third thing I want to know, and this is from Ms. [inaudible] what are the things that are being implemented during this particular time to try to make people as safe as possible and give as much confidence to the traveler as possible that you believe can be permitted now but should end when the pandemic ends?

Those are my questions, Mr. Chair.

Ms. BARNES. So, Congresswoman, I will start with that. Thank you so much for the question. I think one of the things that we have really focused on is the need for a phased and layered approach, but something that is not so overly prescriptive that it can't be phased out over time as things evolve with [inaudible] convened a group of 30 different organizations and many of us different associations had members so it was even broader than that working with medical professionals and infectious disease doctors, as well as preventive disease doctors and others throughout the community to really talk through, what are medically necessary options for helping to stop the spread of COVID and also help to give the traveler more confidence?

Mrs. WATSON COLEMAN. Ms. Barnes, have you submitted those findings? Have you submitted those recommendations to any of the Federal departments? If so, have you gotten any response to them? Has anything happened as a result of your coming together and proposing some phased-in safety and health guidelines?

Ms. BARNES. Yes. We submitted it to, actually, to the White House, to CDC, to all Governors. It was also submitted with my testimony to the committee. Happy to talk to you all about that in more detail, but we do think that having that consistency across the ecosystem is critical, but happy to engage further as well.

Mrs. WATSON COLEMAN. Thank you.

Ms. Guliani, with regard to those measures that are going to be or trying to be or should be implemented during this period of time, including technology to reduce the touching, interaction of employees and passengers, what are the things that you think are OK for to be done in screening? What are the things that you think are OK but need to be eliminated the moment the pandemic is supposedly ended?

Ms. GULIANI. Sure. I mean, there are a variety of things that can be done, if implemented correctly, to both protect public health and respect civil liberties, things like mask requirements. You know, if there is clear information to the public, there is allowances made for people who may not be able to wear masks for medical reasons,

if it is nonpunitive in nature, I think that is something that can be done and is consistent with what public health professionals have recommended.

Something Ms. Nelson talked about is, you know, efforts to provide clear communication and ability for people to self-monitor, right? Giving them lists of symptoms to check for themselves. The best-case scenario is that somebody who doesn't feel well or is high-risk doesn't come to the airport at all. So I think mechanisms to prompt that self-monitoring are things we can do. Efforts to reduce pat-downs, which Ranking Member Lesko talked about. We need more information. We need to understand efficacy, and we need to understand exactly what information is being collected. But a temporary measure with no further data collection that, you know, is equitable and that works could also be something.

But I also want to talk about—you know, briefly you asked about oversight. I think one of the really important pieces of all of this is to make sure that there is independent oversight by an entity like the GAO, right? To make sure that what we are doing actually works; it is not window dressing. No. 2, that privacy rights are being respected.

In the past we have seen with programs like CAT 2 or even SBInet, inspector general and GAO reports have really helped expose problems that, frankly, prompted discontinuation of programs that had deep problems.

Mrs. WATSON COLEMAN. Thank you very much.

I yield back.

Mr. CORREA. Thank you very much, Mrs. Watson Coleman.

I would like to recognize Mr. Van Drew for 5 minutes of questions.

Welcome, sir.

Mr. VAN DREW. Thank you. It is good to be here, and it is—I appreciate all of you being here to testify. Certainly, we have really got to get to the root of these problems. I guess I have 2 questions. The one question is—and I guess would be to Mr. Burke and maybe Ms. Barnes.

Smaller airports—so we are thinking, generally, we are talking Kennedy. We are talking about obviously Philadelphia, at least in my area, and some of the very large airports, but we have smaller airports like Atlantic City International Airport.

What role do you see for them? Are they all going to survive? How are the changes going to be different for them because they are significantly different and especially when I think of the tourism piece, because that is my area, small airports [inaudible] for people to get to their destination?

Mr. BURKE. Congressman, this is Mr. Burke. Thank you for the question. Small airports have taken a huge hit in this crisis, and you are absolutely correct. When air service returns, they will do much better. Right now, with our enplanements down 90 percent that is a challenge. However, the health challenge remains the same for a small airport as it does for the large airport.

Passengers are going through Atlantic City have to be treated with the same level of safety as people going through Philadelphia or JFK or any other large hub or medium hub. The challenge is getting people back into the airport, making them feel safe. The

only way they are going to get back is if flights return to those airports and when the airlines make the decision that they will be able to fly to Atlantic City, provide aircraft for people who go from, say, Indianapolis to Atlantic City for tourism and fill the hotels that Tori Barnes and her members represent.

It is all about when people feel safe to come back out. The airports will do their job to keep the passengers safe inside the airport. When it comes to making certain that people travel, there is a whole bunch of factors there, one of which is when the airlines decide they are going to increase their enplanements, the airports will do much better, from the small to the medium to the large, but right now, you are absolutely correct. The small airports are having a very, very difficult time.

Some were helped in the CARES Act, but that money will not last forever. That is why we have asked for more money in the next CARES Act provision for another additional $13 billion. A lot of that will go to the small airports to keep them functioning.

Mr. VAN DREW. Thank you.

Ms. Barnes.

Ms. BARNES. Thank you, Congressman. I would echo what Kevin said. We support and agree with everything that he noted, and I would just add on to that that the continued need for relief, as Kevin mentioned, additional dollars for airports, I think additionally dollars for destinations like the ones that you mentioned that are so important that will help to draw visitors back to destinations.

You know, the 501(c)(6) organization is another Governmental destination marketing organizations that are left out of PPP. That is really another critical piece of relief that is necessary.

Additionally, we are also hoping that the fourth phase of the CARES Act can include some tax incentives to actually help encourage individual travelers to get back out there and to fly again.

So happy to work with your team on that, but we really think it is additional relief in added stimulus that is going to help to get folks out there. In addition to what we have been saying here is the need to have that clear, consistent message communicate [inaudible] when they go to an airport of any size and get on an airplane or if they go to a hotel or to an attraction or other destination.

Mr. VAN DREW. I thank you for that. [Inaudible] and I have dealt with them over the years too. It might also be easier to make them be able to actually abide by whatever the regulations all finally end up being because they are smaller, they are quieter, and it is easier to have the distancing and so forth, actually, in those areas other than the really crowded large airports.

That is the other question I wanted to ask real quickly as well. I know [inaudible] and that we all try to maintain that. However, if you really think it is 6 foot between you and me and 6 foot this way and 6 foot this way and 6 foot behind, you know, I have done some air travel in my time, and, again, we are nowhere near there now. Nobody is in the airport, but even when an airport is moderately busy, everybody is kind-of moving together in some way, even the lines, it is tough. I think that, you know, the masks are much easier and the hand sanitizer is much easier.

I would think that is going to be really difficult to do at certain times once we are really back and we are in full motion here.

Mr. BURKE. Yes, sir. If you wear masks, the 6 foot separation could be changed. That is if everybody is wearing masks. You are absolutely correct. The geography of airports were all different. It is very, very difficult to be able to figure out if 50 percent load factors, 70 percent load factor, if the load factors go up, those lines are going to get very close to one another. It is going to be physically impossible to keep people 6 feet away.

So it is really inherent that people protect themselves by wearing these masks inside these terminals. So, unless we expand the size of the terminals where we can separate these lines, both the TSA as well as at the gates—because, remember, gates bump into gates and then sometimes load at the same time. Then they have concessionaires on the other side of restaurants where these lines will bump in to.

So that 6-foot separation as people come back to the airports is going to be very, very difficult to keep and also to enforce. People will be bumping into each other. So, for them to remain safe, wearing masks is important.

Mr. VAN DREW. We pray that wearing masks is as good as they think it might be. Because we have all heard various doctors say various things about the value of the mask. You are only protecting the other person, or it depends which mask you are wearing, how you are wearing it.

You know as well as I do, so many people wear the mask only on half of their face, their nose [inaudible]. So it is interesting [inaudible] yield back, Chairman, and thank you.

Mr. CORREA. Thank you, Mr. Van Drew.

I would like to recognize the gentleperson, Ms. Barragán, from Pennsylvania.

Ms. BARRAGÁN. Thank you, Mr. Chairman, for having this really important hearing. We are going to be [inaudible] all this week. We are still in the first wave, and this is still very real. We are seeing increased numbers across different places in the States, and there is nothing more than we hear from the own House Physician how the highest risk for Members of Congress and for travel, really, is the airplane and the airport.

So that is why I think it is so critically important that we get this right and do what we can to make sure we are protecting passengers and employees.

Ms. Nelson, thank you for starting your comments today by recognizing the two very important Supreme Court decisions and your comments there. I want to echo those. I also want to say, Ms. Nelson, I can relate to a lot of your concerns and those of flight attendants. I have a sister, I have 2 sisters who are flight attendants, and I hear a lot [inaudible] among flight attendants and the concerns that flight attendants are having. It is, No. 1, about public feeling safe and coming back, but we need to make sure flight attendants are feeling safe.

From what I have heard, [inaudible] flight attendants that they are not getting the support that they believe they should be getting. So let me turn to my first question for you, Ms. Nelson.

Social distancing has been one of the most important recommendations as we have heard from public health officials. Airlines have aggressively pushed against leaving a middle seat open for economic reasons behind that, and I can understand that.

From your perspective, how does the absence to a limit on load factors and limited change and cancellation flexibility during this pandemic affect flight attendants and passengers?

Ms. NELSON. Well, we have—thank you for that question, and we have pushed for change fees to be waived during this time. Much like we have said, it needs to be very clear that if anyone is calling in sick, they are not disciplined, and they are able to get sick leave and paid for that when they are an essential worker and coming in and putting themselves at risk, but then also if they are not taking proper precautions, they are also adding to the problem at work.

On the social distancing, there is no way to properly social distance on the plane. That is why we need to have clear Federal requirements for the masks. Mr. Van Drew brought up the issue of people not knowing how to wear the masks. This is part of what we are talking about.

When you don't have those clear guidelines and you don't have clear instructions and you don't even have proper training for the crews to be able to instruct passengers or give those instructions, then you are not practicing all of the layers of safety that are necessary to make up for the fact that you are working in a space that you cannot properly social distance in.

So it needs that layered safety and security approach. I should just note also for this committee that it is very, very important to continue those job protections as well. The continuation of the CARES Act through the end of January so that the airlines have the ability to implement these policies like paying people for the sick leave and being able to do that. Also this committee would be concerned about the security credentials that are in place.

So all those airport workers and the people who work at the airlines also have to have security clearance. As they are let go from their jobs, then it makes it that much harder to start up the economy again.

So we need proper PPE. We also have had a problem with the supply chains and getting the proper PPE for the workers on the front lines, the gate agents, the flight attendants, who are coming most in contact with the passengers, but all of these issues are necessary to be addressed by the Federal Government because the airlines are not well-enough equipped to take all this on and to put the proper procedures in place. There are the financial strains, too, that are getting in the way of making good safety and health decisions.

Ms. BARRAGÁN. Thank you.

The other concern I keep hearing is, what is going to happen after September 30? What is going to happen to flight attendants? A lot of concern there. As Congress passed the CARES Act and provided funding to airlines, of course, I think the ability for them to lay folks off is only through September 30.

When October 1 comes around, how do you think airline employees will fare? What is your estimation?

Ms. NELSON. If Congress does not act to extend to do a clean extension of the payroll support system, this is only about jobs now at this point. The airlines have essentially stabilized themselves. All that will happen is that pink slips will be signed, and they will be in the hundreds of thousands on October 1 if there is not an extension of the payroll support system.

We believe that that needs to go through the end of January to get us through the worst of this and to get policies and procedures in place that give people confidence in flying, get us through the holidays, that will get us through the worst of it we believe, but if we do not have that in place there will be massive furloughs in October.

Ms. BARRAGÁN. Well, thank you for your service. Many times people don't realize that our flight attendants are public safety professionals. They think something else. So thanks for pointing that out in your testimony today.

With that, Mr. Chairman, I yield back.

Mr. CORREA. Thank you, Ms. Barragán.

I would like to recognize Mr. Katko for 5 minutes of questions. Welcome, sir.

Mr. KATKO. Thank you, Mr. Chairman. I miss seeing you and everybody on Homeland. I wanted to touch base to wish you all well and hope to see you all soon in person.

As this hearing went on today, I started thinking—and I apologize if I missed this part of the testimony if this was discussed, but I want to talk about the use of technologies at the checkpoints and the impact that can have on a travel experience.

For years I have been particularly interested in the next generation of scanners and what they would do for the travel experience, No. 1, and now because of COVID, what that would do for safety and the health of the TSOs.

We appropriated a small amount of money, relatively small amount of money, to start the next generation of 3D scanners. Now the 3D scanners, as you all know, allow the TSOs to have much less physical contact with bags and individuals because the scanners will identify the anomalies for the person, and then only those bags that have anomalies that the machine finds will be taken aside.

I just think, from a safety standpoint, from an antiterrorism standpoint, but now from a health standpoint, it is really important. I think the more you can do to [inaudible] checkpoints and to the planes and all of the other discussions we have been having, talking about keeping the planes safe and healthy is important, but I think that is really about keeping the masses moving and keeping them apart as much as possible, is really going to be important.

As air travel goes back up, I don't know how you can keep people 6 feet people apart. So keeping the throughputs is going to be very important. So, with that, I just want to know, what do you all think about it? I think in the next package [inaudible] I say to tell my colleagues in Homeland Security and try to get full funding for all the next generation of scanners once and for all.

Because at the rate we are going, we are not going to get them for 10 years, and by that point, they will probably be obsolete and we will have to replace those. So I would argue that we need to

work on getting the scanners now and getting them moving now from a health and safety standpoint.

I would like to just open it up and see what you think.

Mr. BURKE. Mr. Katko, the airports totally agree with you. We have been supportive of getting more money to TSA to increase throughput even prior to the pandemic. I can remember 2 to 3 years ago when there were less TSOs, transportation security officers, long, long lines [inaudible] and the technology not working.

The technology exists to make people get through quicker and safer. As I mentioned in my testimony, we are looking at a touchless technology——

Mr. KATKO. Correct.

Mr. BURKE [continuing]. Where people go through and they don't have to touch anything. They would have to look into a camera. From what I understand is, when you look into the camera and the information that the TSO looks at, once you go through, my understanding is that information is deleted because if TSA kept that information, that would be enormous amount of information to hold on any given day.

So there are 2 things here. No. 1, at this juncture, it is the safety of the passenger going through, the confidence that they are going to go through and not have to have any interaction other than looking at a TSO, scanning their own ticket, scanning their own license, and having the ability to be able to walk through and look at a camera or walking through a scanner.

The scanning technology is far better than it was 2, 3 years ago, and we would welcome more funding for that through TSA. It would make the travel experience faster and, frankly, safer as we move forward.

Mr. KATKO. Yes. Several years ago, I got off the plane in London on my way to Ireland for something for the Government. I get off the plane before I went through Customs and did a facial [inaudible] human contact. Before I got on the plane, you had to stand in front of a camera. They did the facial recognition software. You got on the plane. They didn't look at many other documents.

So the technology is there, and the biometrics is a way of decreasing human contact considerably and moving people through quicker. So I would argue to all of my colleagues it is something we should continue going forward just from a safety standpoint, from a health standpoint, and just from [inaudible].

Ms. BARNES. Yes, Congressman, we absolutely agree with you. This is from the U.S. travel perspective. We think that we would love to see a greater investment in CAT–C, CT screening technology. We absolutely support the idea of touchless security screening and opt-in biometrics and could not agree with you more that it is a vital tool to facilitate a safe and secure return to travel.

It is so important for travelers to have that confidence as they come back into the travel environment, and we fully support that [inaudible].

Mr. KATKO. You should use your considerable clout, Tori, to get American Airlines flights back going from Syracuse to D.C. because I have none right now. I used to have 4. So come on now. All right?

Ms. BARNES. We are on it.

Mr. CORREA. While you are, get some from Orange County directly to Reagan Airport, OK.

With that being said, I would like to recognize the gentleperson from Florida, Mrs. Demings.

Welcome.

Mrs. DEMINGS. Thank you so much, Chairman Correa, and thank you to all of our witnesses who are with us today. It is good to see everybody, and I, too, miss you, but we need to continue do some of the things that we are talking about here today to make sure that we are safe and others are safe as well.

I certainly enjoyed the discussion about the touchless technology. I would believe that every worker and every passenger would appreciate us pursuing that. So I look forward to further discussions along those lines.

Ms. Nelson, there was a discussion earlier about the absence of clear guidelines as it pertains to wearing a mask and, you know, practicing social distancing and all of that. You talked about some of the challenges around flying and being able to do that, but we still should do what we can do. I certainly appreciate the efforts of the airlines to make sure that we are traveling as safely as possible.

I know the last few flights that I had been on, masks, for example, were required. I thank God for that. Yet we had some passengers for some reason who still resisted that. So I would just like to hear a little bit more—I know we have had a great discussion here—but about the self-wellness checks and are we seeing zero-tolerance policies because, while we want as many people to be able to fly, flying is still a privilege, and we all have an obligation to do what we can.

So could you talk a little bit more about that? How it is enforceable? Is it done electronically like when we say, like you mentioned earlier, did you pack your own bags? So just talk a little bit more about that for me, please.

Thank you.

Ms. NELSON. Sure. Thank you [inaudible] of a corps of trained individuals who are able to recognize symptoms themselves and also be able to identify that, but also prompt travelers to be able to ask questions so that they can self-evaluate their own well-being. We—actually, this conversation here today has been a great example of why you need to put together a task force with all the different stakeholders so that you can make sure that when you are implementing these policies, you don't have any unintended consequences so that it is implemented fairly and without bias.

So this is really about having a work force that could be in the airport that could help to do this first assessment that would be a health assessment, but would be run through a really self-assessment with the individual and that can relate also to what is happening with the employees.

We are seeing some concerns right now about the airlines putting in place some of this health monitoring, and they are asking employees to input that data, and there are concerns around privacy concerns for the employees that we are addressing right now.

There is also potentially discipline lobbied against those employees for reporting that they actually have these symptoms as op-

posed to encouraging them then to stay home and be well. So we have some issues to work through here, and the reason that it is not perfect is because we don't have the kind of leadership and Government oversight that we need to be able to put this in place in a way that puts the health and safety first and isn't really putting it on the backs of the airlines, who are worried about the viability of the airline and taking into consideration their financial concerns.

Mrs. DEMINGS. But, of course, the airlines does have, you know, in the absence of guidelines kind-of like we are seeing right now with civil unrest in our country, the airlines does have the primary responsibility to do what it can to protect the traveling public and its employees until those guidelines come down. Would you agree with that?

Ms. NELSON. 100 percent. I don't want to leave you with the wrong impression because, actually, I want to really applaud our airlines for doing more than I have ever seen them do before in any situation like this. The self-initiative that they have taken to try to address these issues and, more recently, talk about making it a requirement that people are wearing masks and not just a suggestion and actually taking—if someone doesn't do that, putting them on a no-fly list for the airline.

Those are all really important steps, but we really believe that there needs to be backing from the Federal Government, a Federal regulation that everyone understands that we are all communicating together and actually standards to train the employees on the front lines who are implementing that and guidelines that would include things like it is on the back of the ticket or it is a requirement when you are checking in and getting your ticket that you are acknowledging that you will wear a mask.

These types of things could be put in place through clear, coordinated guidelines that are communicated across the board that everyone understands, and we know in aviation that it is certainly possible: You have to wear a seat belt. You have to put your tray table up. You have to stow your bag. These are all things that we do to have the ability to have the magic of flight.

Mrs. DEMINGS. Just as we made the adjustment after 9/11, I was assigned as a police captain at the Orlando International Airport during 9/11, and just like we all had to make that adjustment, I think we will never really fully—of course, until we develop a vaccine, return back to flying as we once knew it. Hopefully, in the mean time, we will get technology to assist us in making it a smoother transition.

Thank you so much, Ms. Nelson, and thank you to all of our guests once more.

Mr. Chairman, I yield back.

Mr. CORREA. Mrs. Demings, thank you very much, and I am glad Orlando finally got it right and made you a chief as opposed to just keeping you——

Mrs. DEMINGS. Yes. Yes. Take care, everybody.

Mr. CORREA. Any other Members wish to ask additional questions?

Seeing no hands raised, I want to thank the witnesses for their valuable testimony today and the Members for their tremendous

questions. I am going to ask unanimous consent to insert the following documents into the record.

First, a statement from the gentleman from Hawaii, Representative Ed Case; second, a letter from the Airline Pilots Association; third, a letter from the Blue Sparks Technologies Group; and, fourth, an Op-Ed from the Consumer Reports and [inaudible].

No objection. Thank you.

[The information follows:]

LETTERS FROM THE HONORABLE ED CASE

*June 18, 2020.*

The Honorable LOU CORREA,
*Chairman, Subcommittee on Transportation and Maritime Security, House Committee on Homeland Security, H2–176 Ford House Office Building, Washington, DC 20515.*

The Honorable DEBBIE LESKO,
*Ranking Member, Subcommittee on Transportation and Maritime Security, House Committee on Homeland Security, H2–117 Ford House Office Building, Washington, DC 20515.*

DEAR CHAIRMAN CORREA AND RANKING MEMBER LESKO: Thank you very much for the opportunity to submit a statement for the record of this subcommittee hearing titled "Climbing Again: Stakeholder Views on Resuming Air Travel in the COVID–19 Era." I appreciate your efforts to accelerate consideration of the best way forward for air travel as our country confronts this pandemic and its aftermath.

As U.S. Representative for Hawaii's First Congressional District, I write to this subcommittee because, far more than most States, Hawai'i has vital interests in pursuing a safe restart of passenger air travel for the duration of this COVID–19 pandemic and after. I am proud that Hawai'i has achieved relative success in containing the spread of COVID–19, reporting one of the nation's lowest rates of infection since the start of this public health emergency. At the same time, achieving such a low rate during this pandemic has caused a precipitous decline in our No. 1 industry, tourism, which is virtually wholly dependent on air travel. That has severely damaged Hawaii's local economy, among the worst-hit in our country, with one of the highest unemployment rates and most severely impacted government and business revenue results.

Air travel is essential to Hawai'i as the primary means by which residents and travelers can enter and leave our State or travel between our islands. Prior to the COVID–19 pandemic, daily incoming passenger counts to Hawai'i easily exceeded 20,000 passengers a day and could reach nearly 40,000 passengers a day during peak travel periods. In 2019, over 10 million visitors arrived in Hawai'i. On any given day, visitors and tourists averaged about 250,000 people, or close to 20 percent of our de facto population when aggregated with our resident population of about 1.4 million people.

Unfortunately, air travel has been a significant way to spread highly communicable diseases such as COVID–19. Passengers who have been infected and are contagious present a serious public health risk not just to their fellow passengers but to all who come into contact with them at their destinations.

One of the biggest challenges to recovery for the travel and tourism industry and to air travel overall is restoring public faith in the safety of travel. According to the U.S. Travel Association, most travel in the United States in the immediate future and aftermath of this pandemic is expected to take the form of road trips, as most Americans feel safe driving in their vehicles. Because travelers cannot simply take a road trip to Hawai'i, it is essential to the recovery of Hawaii's travel and tourism industry that steps be taken to make air travel as risk-free as possible and restore public confidence that people can safely fly and safely visit without fear of contracting infectious diseases like COVID–19.

One of the best and most common-sense approaches to restoring public faith in the safety of air travel is to ensure that all intended passengers aboard an aircraft have tested negative for COVID–19 prior to boarding and departure. This would allow passengers to fly with the knowledge that their fellow passengers are not likely carrying COVID–19 and also allow arriving travelers to disembark at their destinations without having to comply with a mandatory 14-day quarantine, as currently required in Hawai'i, which can be difficult to enforce and is undesirable for travelers in the first place. Implementing this approach would require coordination

that extends beyond State boundaries, raising jurisdictional issues at the Federal level.

To address these issues, I wrote to Administrator Steve Dickson of the Federal Aviation Administration (FAA) on May 13, 2020 requesting clarification of the authority of States like Hawai'i to impose and enforce conditions on air travel to protect public health, including by requiring COVID–19 testing of all intended passengers prior to departure. In his response dated May 27, 2020, Administrator Dickson wrote that the FAA "has no authority to either grant permission or prohibit a local of State unit of government to pursue such a policy."

Unfortunately, this narrow interpretation of FAA authority does not clearly allow for actions focused on the broader public health consequences of passenger air travel, especially in a pandemic. That is why I have introduced H.R. 7128, the Air Travel Public Health Emergency Act, to explicitly confirm FAA's authority and responsibility to consider public health necessities and require reasonable guidelines and restrictions by States to protect public health. The bill would also require airlines to pay for any restrictions, such as a pre-boarding testing requirement, and ensure that Federal airport funding would not be affected by any State's reasonable guidelines or restrictions.

I have also written to the Health and Human Services Secretary Alex Azar, as recommended by FAA, as FAA suggested that HHS has wide-ranging authority during public health emergencies that may be utilized to authorize pre-board testing as a condition of boarding. I am awaiting his response, but also believe that if HHS answers that it does not have such authority or declines to exercise its authority, a similar approach as my H.R. 7128 should be taken to provide legislative authority.

As the subcommittee is aware, the Transportation Security Administration (TSA) has been leading interagency discussions about potentially launching a pilot program to require pre-board COVID–19 screenings for passengers. Such an effort would be an important step toward allowing for a Nation-wide infrastructure and standards for a testing regime. However, it appears these discussions have been going on for months and there has been little public information on the status of these efforts. When I have asked about such plans, no real information has been shared. As the subcommittee engages with TSA or the Department of Homeland Security, I would urge you to ensure they are actively pursuing this course of action.

In conclusion, the Federal Government must take a more active role in adapting air travel to the demands of COVID–19 and the post-pandemic era. Clearly many Federal agencies could play a role but appear to be reticent to take the actions necessary to allow for regular air travel to resume. This can only be successfully done in close coordination with stakeholders across the board, including States, the airline industry as well as public health officials, airport operators and more. The current approach in which States are left to determine their own policies on air travel once a passenger has landed is inadequate, and they have thus far been denied the authority to implement policies that will in fact adequately allow for the reopening of safe air travel. In that case, then States must be clearly given the authority to impose whatever restrictions and standards as may be reasonable and necessary to protect public health, and I ask for the subcommittee's support of H.R. 7128 and related proposals.

Thank you for your consideration of these views. Please call upon me for any questions or assistance in your important work.

Sincerely,

ED CASE,
*Member of Congress.*

Enclosure: May 13, 2020 letter to Administrator Steve Dickson, Federal Aviation Administration
May 27, 2020 response from Administrator Steve Dickson, Federal Aviation Administration
Text of H.R. 7128, the Air Travel Public Health Emergency Act
June 2, 2020 letter to Secretary Alex Azar, Department of Health and Human Services

ATTACHMENTS

*May 13, 2020.*

The Honorable STEVE DICKSON,
*Administrator, Federal Aviation Administration, 800 Independence Avenue, SW Washington, DC 20591.*

Re: Protecting Hawai'i Public Health; Required COVID–19 Testing of All Passengers Prior To Boarding Direct Flights to Hawai'i

DEAR ADMINISTRATOR DICKSON: As we all continue to address the COVID–19 global pandemic, I write to request your cooperation in confirming Hawaii's ability to impose and enforce conditions on air travel to Hawai'i which are critical to ensuring (a) the health of Hawai'i residents and visitors and (b) the safe recovery of Hawaii's economy and in particular our travel and tourism industry.

These conditions would be as reasonably determined by the State of Hawai'i as necessary to protect public health. This could include requiring testing of all intended passengers (including in this letter crew) on any direct air travel to Hawai'i before boarding. Such testing could include at least fever testing and, as available, on-site rapid COVID–19 testing, as now required by international airlines such as Emirates on some flights. The requirement for enforcing these conditions would be borne by the airlines as a condition of accepting any intended passenger on any direct flight to Hawai'i, and any airline would be required to deny boarding to any intended passenger with a fever which, under Centers for Disease Control and Prevention (CDC) guidelines, indicates potential COVID–19 infection or who tests positive.

By way of background, almost all passenger transportation into Hawai'i, both domestically and internationally, is by air. In 2019 there were some: (i) 13,620,000 total air seats operated to Hawai'i, (ii) 10,280,000 visitor arrivals; (iii) 7,250,000 domestic visitor arrivals; (iv) 3,030,000 international visitor arrivals; and (v) an average daily visitor count of 250,000 (against a resident population of 1,400,000). In short, prior to the COVID–19 crisis, the great majority of passenger air arrivals in Hawai'i were non-resident, discretionary visitors (tourists), who arrived at a rate of close to 30,000 per day, and on any given day they constituted close to 20 percent of our de facto population.

This is, of course, a recipe for the rapid spread of COVID–19 among Hawaii's population (and, for visitors returning to their homes and residents exiting elsewhere, back to their destinations). And, in fact, in the stages of the spread of COVID–19 to date in Hawai'i, a major contributor (especially in the first few weeks of the pandemic, when it was virtually the sole contributor) has been travel-related from both returning residents and visitors.

Hawaii's response has been among the most restrictive in the Nation. A Statewide work-at-home, stay-at-home order except for essential services has been in effect since March 26. And a mandatory 14-day quarantine for any air passenger arriving in Hawai'i has been in effect since March 26 as well.

As applied to returning residents and visitors staying in resident homes, the quarantine requires them to remain in those home for the 14 days. As applied to non-resident visitors not staying in residences but instead in hotels or other transient accommodations (tourists), the mandatory 14-day quarantine requires such visitors to stay in their hotel or accommodation rooms for the full period.

This and the other impacts of COVID–19 have had the effect of significantly reducing air travel to Hawai'i. From institution of the air passenger quarantine on March 26 through April 30 there were 23,302 arrivals, of which 8,224 were returning or intended residents and 4,508 were visitors.

However, these numbers have been increasing rapidly in May, especially the visitor count, reflecting that the quarantine is not operating as any real deterrent. Moreover, it is very evident that these air passengers, especially the visitors, are generally not honoring the 14-day post-arrival quarantine.

These air passengers arrive from various destinations with widely varying efforts to mitigate the public health effects of COVID–19. Some jurisdiction are just as stringent as Hawai'i, if not more so, while most others are not. Their continued arrival in Hawai'i, at increasing numbers, with an ineffective post-arrival quarantine, constitutes an unacceptable risk, and it is reasonable for Hawai'i to seek to institute pre-boarding conditions to minimize this risk wherever and however possible.

In my discussions with Federal Aviation Administration (FAA) personnel to date, I understand that FAA does not question restrictions imposed on air passengers once they arrive in Hawai'i as an exercise of Hawaii's general police powers. But that is a far more cumbersome, unworkable, resource-intensive effort (diverting critically stretched and needed first responders to tracking and enforcement efforts), with far more public health risk, than straightforward pre-screening of intended passengers for compliance with reasonable restrictions before they board airplanes and denial of boarding for non-compliance.

I further understand that FAA has expressed some concerns as to who would enforce airline compliance with reasonable pre-board restrictions. I believe most if not all airlines would take the restrictions and their responsibility for enforcement very seriously, and do not in any event see a requirement that each intended passenger submit to a basic test as imposing any significant requirement on the airlines (in the same way as is true currently for many international airlines and travelers to

Hawai'i or other domestic destinations). The first domestic carrier, Frontier Airlines, has announced it will implement a similar restriction requiring temperature screenings for all passengers and crew prior to boarding flights beginning June 1. Airlines for America, the industry trade group for the largest American passenger carriers, has endorsed requiring temperature screenings as well.

I further understand that the State of Hawai'i imposed the 14-day incoming quarantine requirement in large part because it understood from the FAA, in its March and April guidance and otherwise, that the imposition of such pre-board conditions was not authorized by existing statutes and regulations and would jeopardize Federal funding. I also understand from my discussion with the FAA to date that in fact the FAA is focused on the safe and efficient use of the Nation's airspace (with safe not generally including protection of general ground populations from COVID–19 and efficient generally referring to maximum use), that the protection of the general public health in addition to air-related risks is not within FAA's mandate, and that absent superseding authority in other Federal agencies such as the CDC, the FAA is unwilling or unable to authorize the State of Hawai'i to impose reasonable public health-related restrictions on travelers as a condition of travel to Hawai'i.

I ask and urge you to revisit these issues and assist me, the State of Hawai'i, the people I represent, the visitors to Hawai'i and the destinations to which they will return in finding a solution allowing the State of Hawai'i to impose reasonable public health pre-board conditions on intended passengers to Hawai'i. This could include flexibility within existing statutes and regulations, identification of superseding authority in other Federal agencies, and proposed changes to existing regulations and statutory authority. In the latter case, I ask that you initiate any required rule changes under expedited authority, and propose to me specific statutory amendments which would provide you with the necessary authority.

I ask that you do so on an emergency basis considering the continued public health threat to Hawai'i from our inability to impose and enforce effective mitigation requirements. But I also ask that you do so because these questions will have to be answered and the necessary changes will have to be made for Hawai'i to reopen to any great extent to air travel. Simply put, if passengers do not feel safe coming to Hawai'i because they fear contracting COVID–19 on the flight or in Hawai'i, or if Hawai'i residents do not feel safe with passengers getting off planes in Hawai'i, air travel to Hawai'i will not recover leading to many consequences to include FAA and airport-supportive revenues. The same is true throughout the country and so the necessity of safe travel is in all respects a National one which FAA should better face now.

Considering the urgency of protecting Hawaii's current and future public health, I ask for your specific response by no later than Wednesday, May 20. I stand ready, together with the State of Hawai'i and other interested parties both in Hawai'i and Nationally, to work with you on fashioning an effective solution to this critical matter.

I appreciate your prompt and full attention. Please call on me for any questions or needs.

Sincerely,

ED CASE,
*Hawai'i—First District.*

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*May 27, 2020*

The Honorable ED CASE,
*House of Representatives, Washington, DC 20515.*

DEAR CONGRESSMAN CASE: Thank you for your May 13 letter regarding the imposition of health screening requirements on all Hawai'i bound passengers and crew members prior to boarding.

Specifically you stated the desire to find a solution, "allowing the State of Hawai'i to impose reasonable public health pre-board conditions on intended passengers to Hawai'i." The Federal Aviation Administration (FAA) is unaware of an authority that would allow individual States to effectively institute the type of pre-boarding screening you described within the jurisdiction of another State. As you noted, the FAA has stated the agency has no authority to either grant permission or prohibit a local or State unit of government to pursue such a policy.

As previously communicated by FAA counsel, the most productive conversation may be between your office and the U.S. Department of Health and Human Services, which is provided many authorities under the Public Health Service Act to combat the spread of communicable disease.

While the FAA does not prescribe public health rules and requirements, the agency shares your desire to see air travel return as a common manner of transportation. To that end, the FAA has consistently emphasized to air carriers that they should implement public health guidelines established by the Centers for Disease Control. The U.S. Government is currently working to develop a set of public health risk mitigation measures for aviation to support the reinvigoration of healthy passenger air travel. We believe a comprehensive and consistent set of guidance to airports and airlines is the most effective and efficient way to protect travelers, crews, and the public from risks associated with COVID–19.

Thank you again for your letter. If I can be of further assistance, please contact me or the Office of Government and Industry Affairs [.]

Sincerely,

STEVE DICKSON,
*Administrator.*

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116TH CONGRESS
2D SESSION

# H. R. _____

To ensure the safety of air passengers and the public by authorizing States to implement reasonable guidelines and restrictions on passenger air travel, to amend title 49, United States Code, and for other purposes.

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IN THE HOUSE OF REPRESENTATIVES

Mr. CASE introduced the following bill; which was referred to the Committee on _____

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# A BILL

To ensure the safety of air passengers and the public by authorizing States to implement reasonable guidelines and restrictions on passenger air travel, to amend title 49, United States Code, and for other purposes.

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

**SECTION 1. SHORT TITLE.**

This Act may be cited as the "Air Travel Public Health Emergency Protection Act".

**SEC. 2. FINDINGS.**

Congress finds the following:

(1) Passenger air travel is or can be a major vector in the spread of certain communicable diseases such as COVID–19.

(2) Air passengers who have been infected by such communicable diseases, especially during a declared national public health emergency, present a serious public health risk not only to their fellow passengers but to all who come in contact with them at their destinations and upon their return.

(3) Further, such air passengers present a serious negative economic consequence to the airlines on which they fly and to the destinations at which they arrive, especially destinations reliant on the travel and tourism industry, as they destroy public confidence in the health and safety of air travel and of such destinations.

(4) The best mechanism to address these negative consequences during a declared national public health emergency is for potential air passengers to be tested for symptoms of the relevant communicable disease before boarding airlines and to be denied boarding if such symptoms are indicated.

(5) The Federal Aviation Administration has taken the position that it does not have existing statutory authority to impose a public health-related

requirement on passenger airlines that they test all potential air passengers for symptoms of the relevant communicable disease before boarding airlines and deny boarding if such symptoms are indicated, and further that individual States are not authorized to impose such requirements in the exercise of their police power to protect the public health and foster economic and social stability.

(6) As a result, some States, in furtherance of those goals, have been required to adopt far more risky and less effective methods which consume scarce resources, including a post-arrival self-policing quarantine which is widely disregarded.

**SEC. 3. PURPOSE.**

The purpose of this Act shall be to authorize any State to impose reasonable public health-protective conditions on the boarding of any passenger on a passenger airline at the point of origin of a direct flight to such State during a public health emergency.

**SEC. 4. PUBLIC HEALTH ACCOMMODATIONS.**

(a) IN GENERAL.—The Administrator of the Federal Aviation Administration shall allow States, territories of the United States, and Indian Tribes to implement reasonable guidelines and restrictions to ensure the public health and safety of air passengers and the public.

(b) AMENDMENTS TO TITLE 49.—Title 49 of the United States Code is amended—

(1) in section 40103—

(A) in subsection (a)(2) by striking "A citizen" and inserting "Except as provided in subsection (f), a citizen"; and

(B) by adding at the end the following:

"(f) PUBLIC HEALTH EMERGENCY EXCEPTION.—During a public health emergency, the Administrator shall allow States, territories of the United States, and Indian Tribes to implement and enforce reasonable restrictions on air passengers at the point of origin of a direct flight to such State, territory, or Indian Tribe jurisdiction in accordance with requirements and restrictions determined by the State, territory, or Indian Tribe at the point of destination which may include, a temperature or other rapid check for any communicable disease which is the subject of the public health emergency, and which requirements and restrictions may include denial of boarding if such intended passenger is indicated for such disease. Such reasonable restrictions shall be implemented at the expense of the air carrier as determined necessary by a State, territory, or Indian Tribe.

"(g) DEFINITIONS.—For purposes of this section, the following definitions apply:

"(1) PUBLIC HEALTH EMERGENCY.—The term 'public health emergency' means a declaration under section 319(a) of the Public Health Service Act (42 U.S.C. 247d(a)) related to a communicable disease.

"(2) REASONABLE RESTRICTION.—The term 'reasonable restriction' means any good faith restriction or condition imposed or implemented on intended passengers prior to boarding a plane by a State, territory of the United States, or Indian Tribe to prevent the spread of a communicable disease during a public health emergency."; and

(2) in section 47107 by adding at the end the following:

"(x) WAIVER OF REQUIREMENTS.—

"(1) IN GENERAL.—Notwithstanding the requirements of this section, during a public health emergency, the Secretary shall waive any grant assurance that conflicts with a reasonable restriction implemented by a State, territory, or Indian Tribe as set forth in section 40103(f) without an airport owner or operator submitting a request for such a waiver.

"(2) DEFINITIONS.—For purposes of this subsection, the following definitions apply:

"(A) PUBLIC HEALTH EMERGENCY.—The term 'public health emergency' means a declaration under section 319(a) of the Public Health Service Act (42 U.S.C. 247d(a)) related to a communicable disease.

"(B) REASONABLE RESTRICTION.—The term 'reasonable restriction' means any good faith restriction or condition imposed or implemented on intended passengers prior to boarding a plane by a State, territory of the United States, or Indian Tribe to prevent the spread of a communicable disease during a public health emergency.".



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*June 2, 2020.*

The Honorable ALEX M. AZAR II,
*Secretary, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W. Washington, DC 20201.*

DEAR SECRETARY AZAR: I write to request your Department's assistance in ensuring that Hawai'i can require pre-boarding COVID–19 testing of all domestic passengers seeking to board direct flights to Hawai'i.

I enclose copies of my recent correspondence with the Federal Aviation Administration (FAA) making the same request. My letter to the FAA outlines Hawaii's efforts, as an isolated island State virtually completely dependent on air travel for incoming passenger transportation and further largely dependent economically on high volume travel and tourism, to ensure that intended passengers with indicated

COVID–19 be screened out before they board planes rather than addressed after arrival. This is critical not only to ensuring the public health of Hawai'i residents and visitors but to creating the public confidence in safety without which our travel and tourism industry will not recover.

As you can see, the FAA has responded that the FAA is not able to authorize Hawai'i to impose such a requirement under its existing statutory authority, essentially because protection of the public health other than for the safe operation of air transportation itself is not within its statutory mandate. However, FAA recommended engaging with the Department of Health and Human Services (HHS), as FAA believes HHS does have the appropriate authority to allow Hawai'i to implement such conditions.

Accordingly, I ask that you review my request to determine whether and how HHS may authorize Hawai'i to impose such conditions or, in the alternative, to impose those conditions itself. This could include flexibility within existing statutes and regulations, identification of superseding authority in other Federal agencies, and proposed changes to existing regulations and statutory authority. In the latter case, I ask that you initiate any required rule changes under expedited authority and propose to me specific statutory amendments which would provide you with the necessary authority.

I ask that you do so on an emergency basis considering the continued public health threat to Hawai'i from our inability to impose and enforce effective mitigation requirements. As an island State, we were able to keep our infection rate very low, and increased travel increases the risk of infection in our State.

I also believe that as the country reopens, the question of the health and safety of commercial aviation will play a major role in whether we can fully return to pre-COVID–19 rates of travel globally. Our Government must take active steps to ensure the health and safety of communities, passengers and crew arising from proposed resumption of any major airline travel.

I appreciate your prompt and full attention. Please call on me for any questions or needs.

Sincerely,

ED CASE,
*Hawai'i—First District.*

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LETTER FROM CAPTAIN JOSEPH G. DEPETE, PRESIDENT, AIR LINE PILOTS ASSOCIATION, INTERNATIONAL

*June 18, 2020.*

The Honorable LOU CORREA,
*Chairman, Transportation and Maritime Subcommittee, 1039 Longworth House Office Building, Washington, DC 20515.*

The Honorable DEBBIE LESKO,
*Ranking Member, Transportation and Maritime Subcommittee, 1113 Longworth House Office Building, Washington, DC 20515.*

DEAR CHAIRMAN CORREA AND RANKING MEMBER LESKO: On behalf of the Air Line Pilots Association's (ALPA's) 63,000 professional airline pilots at 34 U.S and Canadian airlines, we would like to thank the committee and subcommittee for holding the hearing "Climbing Again: Stakeholder Views on Resuming Air Travel in the COVID–19 Era," and for its leadership during the pandemic, which has taken a significant toll on the global aviation industry. This hearing comes at a pivotal time for commercial airline operations as we work to ensure the health and safety of our returning crews and passengers. Steps are being taken to stabilize the financial health of our airlines, as we continue to welcome back an increasing number of passengers.

We applaud Congress for taking swift and decisive action early in this crisis to pass the CARES Act, which provided a major financial lifeline for the airlines and included strong worker protections. We believe that additional steps must be taken to ensure the aviation industry recovers and front-line workers are not harmed to include the following:

- Extending the CARES Act worker support program or other financial instruments directed toward worker payroll and benefits beyond October 1 to ensure the stability of the airline industry and a robust rebound to passenger travel,
- Ensuring health care coverage for front-line workers, including COBRA subsidies for airline workers displaced as the result of the industry downturn due to the pandemic,
- Hazard pay for essential workers,

- Reforming the bankruptcy code to provide protections to workers' collective bargaining agreements should companies seek to reorganize as a means to shed labor costs, and
- Extended sick leave, unemployment benefits, and furlough mitigations related to COVID–19.

We believe that the key to restoring public confidence in air transportation is taking the necessary steps to protect passenger health, safety, and security. While the Centers for Disease Control and Prevention (CDC) and Federal Aviation Administration (FAA) have issued strong guidance on protecting the health of our passenger and crew members, these protocols are simply guidance.

Compliance with that guidance is currently voluntary and non-standard. A recent article on this subject sums up our concerns quite well: "Each of the country's major airlines has taken a different approach to reconcile ways of increasing revenue with peace of mind for flyers . . . Some carriers have gone to the extreme by blocking middle seats and flying extra flights to keep passenger loads light. Others are continuing on with business almost as usual, not requiring so much as a face covering for passengers."[1]

As recent data demonstrates, airlines have made positive strides in promoting a safer environment, but absent a Federal requirement for standard safety and health requirements, there will continue to be a patchwork system, which will be increasingly under strain as more people return to flying.

And returning to flying is exactly what must happen because it is essential for the economy, the airlines, their employees, and the millions of others who rely on a safe and interconnected travel industry.

We are also concerned that complacency will be a factor without a mandate.

Shortly following the outbreak of the COVID–19 pandemic, the International Civil Aviation Organization (ICAO) established the Council Aviation Recovery Taskforce (CART). The goal of this body was to provide practical, aligned guidance to governments and industry operators in order to restart the international air transport sector and recover from the impacts of COVID–19 on a coordinated global basis. CART offers guidelines for airports, aircraft, crews, and cargo and were guided by the following considerations:

1. Remain focused on fundamentals: safety, security, and efficiency
2. Promote public health and confidence among passengers, aviation workers, and the general public
3. Recognize aviation as a driver of economic recovery.

ALPA believes that this hearing and the participation of all of our industry partners in the ICAO CART measures is an essential step toward our Nation's successful recovery effort.

While our energy and resources are focused on fighting the global pandemic, the need for an enhanced, risk-based, and efficient approach to aviation security at our Nation's airports has not diminished. This aligns with ICAO CART's position of "remaining focused" on safety, security, and efficiency concurrently. ALPA continues to push for necessary changes in aviation security, and we encourage the Transportation Security Administration (TSA) to seek improvements of their screening processes. These improvements must ensure we maintain the level of security required at airports to address the everchanging threats our industry faces, while simultaneously ensuring passengers and workers are able to quickly and efficiently traverse secured areas is unaffected. U.S. ingenuity and innovation has led to significant improvements in individual and cargo screening technologies that will significantly improve the screening process well into the future. Our nation's leadership in aviation demands that we embrace these technologies and continue to pursue still undiscovered ones. This has been an on-going strategy of TSA Administrator Pekoske and ALPA supports his efforts.

ALPA believes that this pandemic offers the opportunity to move forward with science-based safety and security initiatives and improvements.

### NO-TOUCH SAFETY AND SECURITY SCREENING

With the need for social distancing ranking high on the COVID–19 mitigation and prevention spectrum, any initiative which will remove the need for close interaction between Transportation Security Officers (TSOs) and individuals to be screened should be encouraged. The Known Crewmember® (KCM) program and CBP's Global Entry program are two examples of resources which can efficiently screen individuals with very little physical contact. TSA PreCheck also reduces the contact be-

[1] Business Insider, June 15, 2020 *(https://www.businessinsider.com/us-airline-new-coronavirus-travel-rules-comparison-american-united-delta-2020-6)*.

tween TSOs and those being screened. CBP and TSA should be encouraged to maximize the use of these programs for the safety and security benefits which they offer during this pandemic and beyond. ALPA has long supported biometric technologies to expedite the security screening processes. TSA should implement biometrics for KCM and PreCheck program participants, and for all those who work at airports, to reduce the potential of physical contact.

ALPA supports mandatory temperature checks for passengers and crews as a means of mitigating the risk of spreading COVID–19 and in order to provide some level of reassurance to the traveling public. The TSA has been recognized as a possible agency to perform this function. If this proposal were to be implemented, we would urge the agency to use additional TSOs who are not engaged during that shift in security screening activities to perform that function. A TSO should not be distracted by any additional, unrelated duties while conducting security screening. Another consideration is to have medically trained staff accomplish these functions. Those engaged in temperature screening should have appropriate training and be provided with personal protective equipment. We would also recommend that temperature screening be conducted in advance of the baggage checking process, to limit the exposure to others by an individual with a temperature and preclude the need for retrieving the bags of such an individual.

In conclusion, the COVID–19 pandemic has pushed our once thriving industry to the brink of destruction. Airlines which just a few months ago were purchasing new aircraft and enjoying record-low fuel costs are now exploring cost-cutting strategies to remain solvent. For our industry to fully recover, all stakeholders must work together to develop a plan that restores the public's faith in flying.

We appreciate the opportunity to offer these comments and we look forward to the hearing.

Sincerely,

CAPTAIN JOSEPH G. DEPETE,
*President, Air Line Pilots Association, International.*

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STATEMENT OF JOHN GANNON, CEO/PRESIDENT, BLUE SPARK TECHNOLOGIES, INC.

JUNE 18, 2020

Blue Spark Technologies, the manufacturer of TempTraq® a wireless remote body temperature monitor, is respectfully submitting this paper to the Homeland Subcommittee on Maritime and Transportation Security relative to its June 18 hearing on Stakeholder Views on Resuming Air Travel in Covid–19 Era.

It is universally recognized that 80 percent or more of those who contract COVID–19 show early signs of the virus through an increase in their body temperature. Protecting employees and business operations from disruption by simply taking an employee's temperature as they arrive at work only insures a reading at that particular moment in time. To effectively protect the total system, employees need to be constantly monitored during the entire workday so if an employee's temperature should rise on the job, they can quickly be removed to determine if it is COVID-related or another issue.

TempTraq®, the first FDA-cleared single-use, wireless, continuous temperature monitor available was originally developed for hospital patient use. TempTraq® is a soft, comfortable, and disposable patch the size of a Band-Aid that integrates state-of-the-art ultra-thin printed batteries based on technology originally licensed from Energizer Corporation. TempTraq® is a one-time-use disposable device that is placed in the armpit and continuously measures and records body temperature and sends the information in real time to a remote dashboard where the wearers' patch is centrally monitored or to the wearer's smart phone through an app. TempTraq® Connect is the HIPAA-compliant cloud service supported by the Google Healthcare Cloud Platform that enables those wearing the patch to monitor body temperature from anywhere even to their smart phones.

During the pandemic, TempTraq® was approved by HHS and FEMA to be utilized to monitor front-line health care providers and other critical essential workers. This included use within command centers of nuclear power plants where critical personnel entering these command centers are monitored throughout their shift to make sure they are not experiencing a fever rise. This protects not only the wearer but also helps to eliminate disruption of the critical facility.

We believe that the uninterrupted operations of our airports and especially that of our air traffic control system is vital to the safety of air travel and to rebuild confidence with the flying public. To safeguard the integrity of our air traffic control system, we suggest that each air traffic control employee be issued 24-Hour

TempTraq Patches at the beginning of their shift. The unique ID of the TempTraq® patch would be aligned with the employees profile in the TempTraq® dashboard. The dashboard continuously updates the temperature of all employees from the time they enter the operation to when they leave and flags an alert if there is a fever incident. A COVID–19 outbreak in this highly critical industry could be catastrophic due to the lack of qualified backup personnel.

As for large- and medium-hub airport facilities, we believe all employees should be monitored in the same fashion as the air traffic controllers using the TempTraq® patch during the entire time they are present at the airport facility. This would include all TSA staff, airport staff, and those companies that operate concessions. The airport management could easily monitor all employees at a common command center and should any one of the staff on-site show a spike in temperature, that individual would be immediately removed to a secure place to determine if they have the virus. Utilizing the patch for all those non-fliers at an airport would protect not only the employees and the facility but also provide additional confidence to fliers that those facilities are taking all the precautions needed to safeguard their travel.

TempTraq® has been successfully used to identify infected personnel mid-shift in front-line health care applications. Operations that simply check the temperature of the workforce as they enter the facility, fail to fully safeguard both the employee and the facility after that initial test. TempTraq®'s continuous monitoring is the only way to guarantee real-time full coverage of the workforce and facility.

Last, although the cruise line industry is not the subject of today's hearing, we have also reached out to that industry to utilize the patch on both their staff and the customers while on-board the ship. This would provide an early sign for all so the impacted wearer could be isolated until such time the cause of the rise was determined. Once again, this would provide all with a sense of protection and overcome many of the fears associated with taking a cruise.

By submittal of our statement we hope it will provide the committee with a better understanding of this modern technology that currently exists which could greatly help fight the spread of COVID–19. We appreciate the time of the committee.

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ARTICLE FROM USA TODAY

OPINION.—SECRETARY CHAO HAS AUTHORITY TO REQUIRE AIRLINE REFUNDS, COVID SAFETY. SHE SHOULD USE IT.

*Transportation Secretary Elaine Chao could be doing more to protect air travelers amid COVID. Refund and safety decisions should not be up to airlines.*

*Anna Laitin and William J. McGee, Opinion contributors.*

The COVID–19 crisis has dramatically impacted the lives of Americans—their health, their economic outlook and much more. Air travel is one area of life that has been completely turned upside down. For months, very few Americans stepped onto an airplane. As more and more people start to think about flying again, concerns about the layouts of airports and airplanes make them problematic transmission risks for travelers.

This situation demands an attentive and consumer-focused Department of Transportation. Unfortunately, Transportation Secretary Elaine Chao has stepped back from her duty to protect passengers. She has not taken the actions needed to assist the thousands of consumers who can't get their money back from airlines after canceling flights. And she has failed to set guidelines for airline and airport safety measures that protect travelers and employees. Instead, she is deferring to the airlines to do this work for her.

*Use authority to protect passengers*

In the face of a record number of complaints from consumers seeking refunds, Secretary Chao has called on airlines to treat passengers fairly during the pandemic. While we heartily agree with her that consumers should be entitled to refunds for travel disrupted by the COVID–19 crisis, we urge the secretary to recognize and act on her authority to resolve this problem for consumers.

Since the COVID–19 crisis began, Consumer Reports has heard from nearly 3,500 consumers who were denied refunds for canceled travel. We've heard from people whose scheduled events—graduations, weddings, reunions, conventions, conferences—have been canceled with no expectation that those trips will ever happen again. Some have told us they're afraid to fly now, because of age or medical conditions. Many are in desperate need of cash to replace lost wages and have no use for a voucher for future travel. These consumers resent giving interest-free loans or total write-offs to airlines they just bailed out with billions of tax dollars.

Secretary Chao has the authority to fix this. If she truly agrees that consumers are not being treated fairly, she can declare the airlines' refusal to provide refunds to be "unfair"—and unlawful. And on that basis, she can require the airlines to refund consumers' money.

More broadly, as States begin to open and travelers begin flying again, it is incumbent on the secretary to use the authority of her position to ensure that consumers are safe and healthy when they fly. Rather than merely urge the airlines to act fairly and with travelers' health in mind, the proper job of the Transportation secretary is to protect consumers when the airlines fail to do so.

Secretary Chao can do this using the same authorities used by past Transportation secretaries who required airlines to include all fees in advertised fares and adopt stronger security measures following 9/11. Just as flyers are looking to the Department of Transportation to help them secure refunds when their travel is canceled, they are counting on the DOT and the Federal Aviation Administration to ensure that their health is not unreasonably put at risk when they do travel.

*Uniform health and safety standards*

The secretary must work with other key administration officials and take an active role in establishing requirements for airlines, airports, and travelers to protect against the transmission of COVID–19 during air travel. Among the key areas where expert guidance is needed:

- How and whether to screen passengers and employees for COVID–19 before travel.
- Appropriate social distancing in airports and airplane cabins.
- Use of face masks and other personal protective equipment for passengers and employees.
- Appropriate airport and airplane cleaning procedures.
- Effectiveness of airplane cabin air circulation systems.

These decisions should not be made in a patchwork. Individual airports and private sector airlines should not be left to fashion these critical yet delicate health, safety, and privacy policies on their own. And consumers should not be left to evaluate which airlines and airports are ensuring adequate precautions for the health and well-being of travelers and their families.

Our view: Airlines got coronavirus aid, so why are they stingy on flight refunds and safety?

The most critical responsibility of the DOT and the FAA is to secure the safety and well-being of all passengers and of everyone working in commercial aviation. Secretary Chao says she recognizes that U.S. airlines and airports need to do more. But we urge her to also recognize that it is her own department that needs to provide the leadership to see all air travelers safely through this COVID–19 crisis.

*Anna Laitin is director of financial fairness and legislative strategy for Consumer Reports, and William J. McGee is an aviation adviser for Consumer Reports. Follow them on Twitter: @AnnaLaitin, @WilliamJMcGee.*

Mr. CORREA. The Members of the subcommittee may have additional questions for the witnesses and, we ask that the witnesses respond expeditiously in writing to those questions.

Without objection, the committee records shall be kept open for 10 days.

Hearing no further business before this committee, this subcommittee stands adjourned.

Thank you, everybody.

[Whereupon, at 5:55 p.m., the subcommittee was adjourned.]

# APPENDIX

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QUESTIONS FROM HONORABLE DINA TITUS FOR KEVIN M. BURKE

*Question 1.* How is restoring consumer confidence in air travel critical to districts like Nevada's 1st Congressional District that rely on millions of visitors from around the world to come work, play, and stay?

Answer. Restoring public confidence in air travel is absolutely critical to ensure the economic vitality of cities and towns across the United States that rely on travel and tourism. In support of this initiative, ACI–NA in April 2020 established the Airport Industry Recovery Advisory Panel (AIRAP) comprised of airport representatives from many of our association's committees to provide guidance and direction as the industry navigates restart and recovery. The advisory panel issued a report outlining 42 immediate industry recommendations and priorities for ACI–NA to move forward on as the industry prepares for the future. The initial recommendations focus on legislative policy changes, new regulatory efforts, and instituting good practices. ACI–NA also launched a "Ready for Every Journey" campaign to help educate passengers and local communities about the steps airports are taking to protect health and safety as travel resumes following the coronavirus (COVID–19) pandemic.

Prior to the COVID–19 pandemic, U.S. airports were powerful economic engines in their local communities, generating more than $1.1 trillion in annual activity and supporting over 11 million jobs. They have since been reduced to mere shells of their former selves, with passenger traffic down—at the peak—by over 90 percent from the levels we saw this time last year. As a result, airports and tenants are struggling to survive. ACI–NA estimates U.S. airports face at least $23 billion in operating losses as a result of the COVID–19 pandemic, based on preliminary data about air service reductions to date.

*Question 2.* Air travel is picking up, even though the virus continues to loom large. Can airports continue to meet cleaning and sanitation standards as passenger volume grows?

Answer. Airports responded quickly to COVID–19 by implementing measures to provide for the health and safety of their passengers, employees, and tenants, through the establishment of enhanced cleaning and sanitation protocols, with an intense focus on "touch points." In addition, airports have deployed additional hand sanitizer in airport public areas for passengers and employees, and enhanced communications to raise awareness about measures—including social/physical distancing—to reduce the spread of COVID–19.

The cleaning and sanitization reimbursement program established by TSA through the CARES Act has helped ensure that airports are better positioned to support increased cleaning and sanitization in response to the COVID–19 National emergency. We encourage Congress to fully authorize and appropriate funds for this program so it can be sustained in the future.

*Question 3.* Currently the security fee the Government collects on each airplane ticket goes to the general fund to pay down the National deficit. I cosponsored a bill led by our Chairman and the Chairman of the House Committee on Transportation and Infrastructure that would change that. Especially in light of this pandemic, does continuing to allow this diversion make sense, or is it time for those funds to go toward aviation security?

Answer. ACI–NA has long called on Congress to end the diversion of user fees designed to enhance security. Each year billions of dollars from the 9/11 Passenger Security Fee (and CBP user fees) are diverted from their intended purpose to subsidize other Federal programs. In this time of National emergency, it is critical to stop these budgetary gimmicks, end the fee diversion, and ensure the revenue is restored to its proper use of funding and enhancing crucial transportation security programs. In particular, the 9/11 Passenger Security Fee should be used for its intended purpose, to fund civil aviation security services, including the salary, bene-

fits, and overtime for Transportation Security Officers, as well as the acquisition, operation, and maintenance of screening technology. In ending the fee diversion, however, it is critical to ensure the agencies are fully funded to support existing and new programs.

QUESTIONS FROM HONORABLE DINA TITUS FOR SARA NELSON

*Question 1.* Have you heard of your members being furloughed or having pay or benefits reduced? When October 1, comes around how do you think airline employees will fare?

Answer. As of July 31, none of our members have been involuntary furloughed because of the CARES Act's Payroll Support Program (PSP). Only PSP has protected the jobs and health care of our members during this unprecedented crisis for aviation, including a near-total collapse of flight volume and passenger demand in the months following the pandemic. While compensation varies across carriers and positions, many carriers have reduced payroll to the level of the contract minimum for members who aren't working flights. Many flight attendants have experienced a 30 percent reduction in take-home pay, a direct consequence of the drop in flight volume across the industry. Only PSP has kept us on payroll and health care and protected our members against massive furloughs, permanent layoffs, and further dislocation.

If the Payroll Support Program is not extended immediately, hundreds of thousands of airline workers will be laid off on October 1. Major airlines and regional carriers Nationally have already begun sending WARN Act notices to thousands and thousands of flight attendants and other aviation workers. The result will diminish the industry for years to come, eliminate regular air service to communities across the country, and undermine aviation's role in economic recovery for the broader economy.

*Question 2.* Keeping in mind that aviation workers have shown up to work every day, have airline employees received hazard and sick pay since this pandemic began? Should they?

Answer. Flight attendants have not received any hazard or sick pay since the pandemic began. We are deeply grateful for the Payroll Support Program (PSP), which has kept us on the job, on health care, and off unemployment. Without an extension of the PSP program, hundreds of thousands of front-line aviation workers will lose their jobs starting on October 1.

QUESTION FROM HONORABLE DINA TITUS FOR VICTORIA EMERSON BARNES

*Question.* How is restoring consumer confidence in air travel critical to districts like Nevada's 1st Congressional District that rely on millions of visitors from around the world to come work, play, and stay?

Answer. Restoring Confidence in air travel as well as confidence in the travel experience broadly is absolutely critical: 38 percent of all jobs lost due to COVID–19 are travel-related jobs and without restoring consumer confidence throughout the travel ecosystem, quite frankly, the economy will not recover in the short term.

Prior to the COVID–19 pandemic, 1 of every 10 American jobs represented the travel and tourism industry, 15.8 million American jobs. These jobs were supported by $1.1 trillion in traveler spending in 2019 that generated $2.6 trillion in total economic output. As a result of the COVID–19 pandemic, the industry, and the economic impacts, have been decimated. While the rest of the economy is in recession, the travel industry is in a depression. Nearly 40 percent of all jobs lost through April represent the travel industry, that's more than 8 million jobs or 51 percent of the pre-COVID–19 workforce. Travel spending is expected to lose $519 billion causing $1.2 trillion in economic loss. For perspective, these figures are 10 times worse than the economic impacts of September 11, which took the industry 2 years to recover.

U.S. Travel and our partners have been closely monitoring travel economic data and traveler sentiment. After shrinking below 100,000 for much of April (down 96 percent year over year), TSA has steadily seen increased screening throughput, peaking at 764,000 just before the July Fourth holiday.[1] Unfortunately, it seems traveler sentiment has recently begun trending negatively. After many weeks of improving sentiment, recent spikes of new COVID–19 cases seem to be having an impact. An increasing number of travelers now report changing plans (76 percent up from 69 percent 2 weeks ago), and 40 percent now say they will delay air travel

[1] *https://www.tsa.gov/coronavirus/passenger-throughput*.

for at least the next year. Domestic air and hotel bookings for future travel is down 70 percent over the same period last year.

Reversing this trend and accelerating recovery will take two primary steps. These steps will take a mutual effort between government and the private sector. First, implementing health and safety protocols to protect aviation workers and customers is essential. While all risk cannot be mitigated, applying a consistent, phased, and layered approach to health and safety will help give travelers confidence in what they can expect throughout the travel experience. U.S. Travel, in coordination with 30 industry trade groups including airports and airlines, has developed guidance that aims to provide consistency in the approach to safety employed by travel brands and destinations during the customer experience. The guidance includes using transmission barriers, enhanced sanitation and promoting touchless solutions.

Second, clearly communicating the health and safety operations of businesses and expectations of travelers will provide clarity and confidence to travelers. Destination marketing organizations (DMOs), which already have tools for communicating directly with travelers, should be activated to communicate health and safe travel throughout the country. To maximize effectiveness, Congress should provide DMOs the resources they need by passing the STEP Act (S. 4299) which was introduced in the Senate this month. The STEP Act would allocate up to $10 billion in Economic Development Administration (EDA) grants for promoting safe and healthy travel practices and marketing destinations that have safely reopened for business. By providing DMOs the resources to clearly communicate health and safety protocols, Congress can safely boost travel confidence, demand, rehiring.

Implementing industry-wide National marketing campaign and Federal grants to DMOs, will help restore demand for travel that is critical to State and local economies. Without assistance from the Federal Government, the travel industry is not expected to reach 2019 levels until 2024. According to Tourism Economics, these 2 relief efforts, coupled with consumer tax incentives, will generate $71 billion in additional travel industry spending by the end of 2021.[2]

The top priority of travel businesses is helping to keep travelers and employees healthy and safe. When we all do our part, which includes individual responsibly for wearing masks, following sanitation recommendations, and staying home if you're sick, we can all travel confidently. Thank you and please don't hesitate to reach out to me or my team to follow up and provide more details about our proposals for stimulating air-travel by instilling confidence in the traveler.



[2] *https://www.ustravel.org/toolkit/covid-19-travel-industry-research?utm_source=-MagnetMail&utm_medium=email&utm_content=7%2E28%2E20%20%2D%20-COVID%20Weekly%20%2323&utm_campaign=ust*.