

Peer Review

Review of: "Expanding Contracting Authorities Across the Department of Health and Human Services Family of Agencies to Address Critical Public Health Needs"

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This article explains the barriers and facilitators affecting the contracting authority of the U.S. Department of Health and Human Services (HHS) related to the department's response to the COVID-19 pandemic. The use of Other Transaction Authorities (OTAs) by HHS enabled the department to rapidly design and implement a nationwide COVID-19 testing program by contracting with America's expansive and reliable community of non-traditional vendors, specifically including but not limited to retail pharmacies.

The strengths of this commentary lie in the rich detail it provides about the past and current contracting authorities within HHS, and the specific recommendations it outlines regarding changes to federal policies governing the department's contracting authority. Overall, this work addresses a timely issue of national importance, provides concrete information about the barriers and facilitators associated with the use of OTAs, and offers practical recommendations for policymakers to consider.

The weaknesses of this work are minor but important to address. First, there is a need to reference some of the empirical research that has been published about the ways in which changes in federal regulations require organizations that contract with HHS and other federal agencies to adapt or stop their work mitigating public health emergencies. Some of this literature should be referenced to demonstrate that changes to federal policies that govern contracting organizations' response to public health emergencies can create profound opportunities and challenges for those contracting organizations. Second, the authors' recommendation to mirror the Department of War's (previously DoD) OTA framework merits

further explication; specifically, the authors should describe how other components of the Department of War's policies, practices (e.g., workforce training and evaluation), and resources could also be effectively and efficiently adopted by HHS.

Declarations

Potential competing interests: No potential competing interests to declare.