

# America's PPE Supply Chain Built on Risks to National Security and Forced Labor, Domestic Makers Warn USTR

*U.S. medical manufacturers warn that America's PPE supply is dangerously concentrated overseas; urge US Trade Representative to support domestic makers*

WASHINGTON, CA, UNITED STATES, April 16, 2026 /EINPresswire.com/ -- The American Medical Manufacturers Association ([AMMA](#)) today filed detailed comments in two new Section 301 investigations launched by President Donald Trump's administration and led by U.S. Trade Representative Greer. This is the trade tool Washington turns to when other countries undercut American workers and businesses.

Section 301 allows the U.S. to call out unfair practices such as heavy subsidies, tariff evasion, or forced labor and respond with targeted tariffs and other remedies. In its filings, the American Medical Manufacturers Association urged USTR Greer to prioritize personal protective equipment (PPE) and needles and syringes. These are the basic items that keep clinicians and patients safe every day.

AMMA's members already run plants across the United States, making gloves, masks, respirators, gowns, and injection devices for hospitals and first responders. Those factories have the capacity to produce billions of units annually and could expand output further if regulations did not favor subsidized imports and if buyers sent a clear demand signal. While USTR weighs trade remedies, the Centers for Medicare & Medicaid Services (CMS) is also considering reimbursement rules that could pull in the same direction and support domestic PPE manufacturing.

"The way America buys gloves, masks, and syringes is now a national security and human rights



decision as much as it is a supply-chain decision,” said Eric Axel, Executive Director of AMMA.

“80 to 90 percent of our PPE comes from abroad, and some of those supply chains are tainted by forced labor and heavy subsidies. The result is that hospitals are rewarded for chasing the lowest price and domestic manufacturers who follow U.S. labor law are left on the sidelines, even when they have the capacity to meet the need here at home,” Axel added.

In its two filings, AMMA highlights:

-Real, underused U.S. capacity: AMMA members can already produce about 4.8 billion nitrile gloves per year, scalable to more than 31 billion by mid-2026, plus billions of masks, hundreds of millions of respirators and gowns, and at least 3 billion needles and syringes.

- Human-rights risk in PPE supply chains: An estimated 28 million people are trapped in forced labor worldwide, generating nearly 64 billion dollars a year in illegal profits for goods, including PPE, shipped into U.S. markets.

- Dangerous dependence on a few countries: The United States imports roughly 80 to 90 percent of its PPE, and in 2024, more than 87 percent of medical glove imports came from just three countries, with one country alone projected to provide 65 to 70 percent of U.S. medical glove imports by the end of 2025.



Eric Axel, AMMA

“

The way America buys gloves, masks, and syringes is now a national security and human rights decision as much as it is a supply-chain decision.”

*Eric Axel, Executive Director,  
AMMA*

AMMA argued that the way the United States buys basic protective equipment is both a human-rights choice and a national-security choice. Forced labor abroad creates artificially low prices that flow straight into U.S. supply chains and hospital loading docks. When countries look the other way on forced-labor imports, they back a business model that rewards abuse and punishes manufacturers that follow labor law and respect workers’ rights.

Tom Allen, President of AMMA and owner of Altor Safety, a PPE manufacturer in suburban New York City, added, “Our members have built U.S. plants that can produce tens of billions of PPE units a year under fair, legal, and humane working conditions, and they can scale up quickly when the nation calls.”

Allen continued, “What they cannot do is compete indefinitely with factories that suppress costs

by exploiting workers or leaning on state subsidies. Trade policy should not put health-care buyers in the position of choosing between the cheapest option on paper and the option that upholds both human rights and America's ability to respond in the next crisis."

AMMA noted that U.S. plants are real, built, and proven, but underused because health-care purchasing leans on subsidized import prices rather than what it actually costs to make compliant products here at home. One AMMA member's 215-acre campus is already producing around 200 million gloves a month and could ramp up to 1.6 billion a month if demand is there.

Success is close at hand with the right trade decisions from USTR Greer, clear commitments from public and private buyers, and even potential newly aligned changes focused on purchasing improvements inside the US through new CMS rules. Domestic makers have the capacity to move quickly and provide a more stable, rights-respecting backbone for the U.S. health-care supply, while supporting President Trump's agenda.

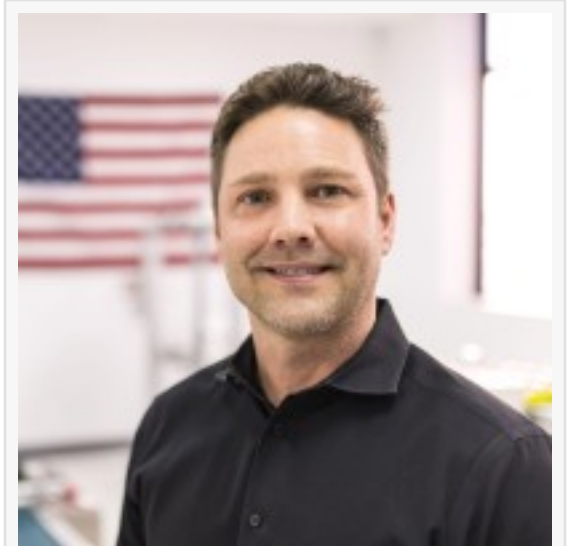
AMMA is asking USTR to use a scalpel, not a sledgehammer. The association supports targeted tariffs that focus on specific PPE products and on economies with the worst mix of subsidies, tariff-circumvention, and forced-labor failures, rather than broad tariffs that raise costs across the board and still leave key PPE categories tied to distorted prices and fragile foreign supply.

AMMA also calls for long-term purchasing commitments, domestic investment incentives, and support for onshoring key inputs such as nitrile butadiene rubber, so U.S. manufacturers can invest with confidence and meet both everyday and surge demand.

For hospitals and group purchasing organizations, AMMA underscores:

- Hospitals and GPOs are not bystanders: prioritize a sustainable and scalable domestic product base for their partners and buyers.
- Support US Workers: Choosing domestically made PPE, when available, supports plants and workers operating under U.S. labor standards and can keep clinicians supplied in a crisis.
- Protect Patients: Aligning purchasing policies with new trade enforcement and proposed CMS payment rules gives hospitals a way to "do the right thing" without gambling with reliability or safety at the bedside.

AMMA's filings argue that public and private health-care decisionmakers are more central to the human-rights and national security story than they realize. When strong trade enforcement under President Trump is matched by smart follow-through from USTR Greer, CMS, and hospital purchasing, every PPE order can both protect patients and clinicians and support lawful jobs in



Tom Allen, President of AMMA and Altor Safety

U.S. factories that will be there in the next crisis.

AMMA's Section 301 filings are available upon request.

Dan Cohen

FCP

+1 510-465-8294

[email us here](#)

Visit us on social media:

[LinkedIn](#)

---

This press release can be viewed online at: <https://www.einpresswire.com/article/906158891>

EIN Presswire's priority is source transparency. We do not allow opaque clients, and our editors try to be careful about weeding out false and misleading content. As a user, if you see something we have missed, please do bring it to our attention. Your help is welcome. EIN Presswire, Everyone's Internet News Presswire™, tries to define some of the boundaries that are reasonable in today's world. Please see our Editorial Guidelines for more information.

© 1995-2026 Newsmatics Inc. All Right Reserved.