Good afternoon and welcome to today's hearing. This is the second in a series of oversight hearings examining pandemic risks.

On February 2nd, the subcommittee held a hearing on how to quickly identify the root cause of a disease outbreak or biological incident. That hearing examined what structures, technologies, and capacities are needed to investigate more effectively the origins of disease outbreaks in the future.

Today's hearing will examine biosafety practices at high-containment laboratories handling dangerous pathogens. We will focus on addressing whether advancements in biotech have outpaced our existing biosafety guidelines. And whether or not we are following these guidelines. The NIH clearly did not enforce those guidelines with EcoHealth Alliance and the Wuhan Institute of Virology into novel coronaviruses.

While the hearing today is not explicitly related to the origins of COVID-19, our examination of biosafety has to be informed by the real possibility, and at this point perhaps the likelihood, that a pandemic which killed over a million Americans was the result of an accident at a laboratory that received NIH funding. The Wuhan Institute of Virology enjoyed close ties to U.S. researchers, and was the beneficiary of technology transfers from the U.S. to China.

As I have said at past hearings, I believe the available evidence favors COVID-19 emerging due to a lab-related incident. My belief that COVID-19 came from a lab-leak is now shared by the Department of Energy and the FBI. But regardless of our individual opinions as to the origins of COVID-19, we in Congress have a responsibility to understand the potential benefits and the perils of this kind of research. As the Committee with authorizing jurisdiction over federal biomedical research, all of us here today have a special responsibility to grapple with these issues.

In response to the terrorist attacks on September 11, 2001, and the anthrax mailings, over the last two decades our nation has seen a rapid expansion in the number of high-containment laboratories.

These facilities are expensive and complex to build, maintain, and run. Research conducted in these laboratories involves pathogens that can cause serious, potentially life-threatening disease and, in the case of biosafety level four (BSL-4) laboratories, diseases for which no vaccine or therapy exist. It is crazy to me that the Wuhan Institute of Virology appears to have conducted at least some high-risk coronavirus research at a biosafety level 2 lab.

In 2000, there were less than ten BSL-4 labs in the world. There are now 59 in operation, under construction or planned. In the United States alone, there are over 1,500 biosafety level 3 (BSL-3) facilities. It is not just increased risks from the number of high-containment labs being built that is concerning. Rapid advances in biotechnology have opened up potential new cures and expanded our scientific knowledge.

But this has also led to the proliferation of new technologies and research techniques that are inherently dual-use and potentially dangerous if done in inappropriate biosafety conditions. Balancing safety with innovation is an enduring challenge.

The motivation for holding this hearing, is that our existing oversight framework for risky research. Whether it's called gain-of-function research or whether it's called research with enhanced potential pandemic pathogens. I fear we have not kept pace.

In fact, the United States doesn't have a comprehensive regulatory system for high-containment laboratories. Practically speaking, the research institutions, companies, and universities that operate these facilities police themselves.

Back in 2017, the White House's Office of Science and Technology Policy issued guidance, the Potential Pandemic Pathogen Care and Oversight framework. It was intended to apply to all executive branch agencies. It has been implemented by exactly one Department, Health and Human Services.

But, HHS has largely delegated implementation to the NIH, a funding entity who has shown a lack of significant oversight towards risky research with their grantee EcoHealth Alliance and subgrantee the Wuhan Institute of Virology.

As the debacle with EcoHealth Alliance and the Wuhan Institute of Virology makes clear, NIH is neither inclined nor equipped to exercise oversight of the risky research it funds within the U.S. or abroad.

NIH is not only indifferent, but reflexively hostile to outside oversight. NIH has stonewalled and slow-walked our document requests related to the EcoHealth Alliance grant.

As a result of this institutional indifference, an unknown number of accidents at high-containment laboratories are unreported and there is no government-wide effort understand the frequency and nature of laboratory accidents.

Since last October, NIH has not provided the information about an in-house National Institute of Allergy and Infectious Diseases gain-of-function experiment involving a highly lethal clade of monkey pox classified as a federal select agent.

NIH won't even tell us if these experiments have or are taking place. It makes me wonder what the NIH has to hide. How bad is it when they won't even give the authorizing committee the information. We have to assume they are doing something very dangerous.

I'll conclude my opening remarks by noting that the highest-ranking NIH official Dr. Larry Tabak appeared before this Committee in February. In response to questions about NIH's failure to enforce biosafety measures it placed on coronavirus research it funded at the Wuhan Institute of Virology, Dr. Tabak testified that NIH is not an enforcement agency.

I'm beginning to think he's right. It may be time for us in Congress to relieve NIH of the burden of conducting risky research at the institutions it funds.