OVERSEEING THE OVERSEERS: A HEARING WITH NIH DEPUTY DIRECTOR LAWRENCE TABAK

HEARING

BEFORE THE

SELECT SUBCOMMITTEE ON THE CORONAVIRUS PANDEMIC

OF THE

COMMITTEE ON OVERSIGHT AND ACCOUNTABILITY

HOUSE OF REPRESENTATIVES

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C O N T E N T S

WITNESSES

Written opening statements and the written statements of the witnesses are available on the U.S. House of Representatives Document Repository at: docs.house.gov.

INDEX OF DOCUMENTS

* *No additional documents were submitted for this hearing.*

OVERSEEING THE OVERSEERS: A HEARING WITH NIH DEPUTY DIRECTOR LAWRENCE TABAK

Thursday, May 16, 2024

HOUSE OF REPRESENTATIVES
COMMITTEE ON OVERSIGHT AND ACCOUNTABILITY
SELECT SUBCOMMITTEE ON THE CORONAVIRUS PANDEMIC
Washington, D.C.

The Subcommittee met, pursuant to notice, at 9:01 a.m., in room 2154, Rayburn House Office Building, Hon. Brad Wenstrup [Chairman of the Select Subcommittee] presiding.

Present: Representatives Wenstrup, Comer, Malliotakis, Miller-Meeks, Lesko, Joyce, Jackson, McCormick, Ruiz, Dingell, Ross, and Tokuda.

Also present: Representatives Griffith and Castor.

Dr. WENSTRUP. The Select Subcommittee on the Coronavirus Pandemic will come to order. I want to welcome everyone.

At the discretion of the Chair and pursuant to an agreement with the Committee on Energy and Commerce, the Chairman and Ranking Member of the Committee on Energy and Commerce Subcommittee on Oversight and Investigations, Mr. Morgan Griffith and Ms. Kathy Castor, are permitted to participate in today's hearing for the purposes of questions and give 3-minute opening statements.

Without objection, the Chair may declare a recess at any time.

I now recognize myself for the purpose of making an opening statement.

Good morning. I would first like to highlight the action taken by NIH and HHS yesterday to immediately suspend and propose debarment of EcoHealth Alliance.

The Select Subcommittee while investigating the origins of COVID–19 uncovered multiple instances of wrongdoing by both EcoHealth and its President, Dr. Peter Daszak. EcoHealth faces an immediate governmentwide suspension and hold on all taxpayer funds pending a formal debarment investigation. I have said it before, but our investigation into EcoHealth and Dr. Daszak's actions is not over. Dr. Daszak owes us documents and explanations for what appears to be truths or lies before this Subcommittee.

Today we will hear from Dr. Lawrence Tabak, principal deputy director and former acting director of the National Institutes of Health. The Select Subcommittee has serious concerns regarding the processes in which NIH awards Federal grants and conducts

oversight of these grants. EcoHealth and its subgrantee, the Wuhan Institute of Virology, highlighted numerous inadequacies in the NIH grant management and oversight process. This is especially true regarding oversight of gain-of-function work on potential pathogens, pandemic capable or otherwise.

Oversight of grant management is crucial regardless of anyone's operative definition of "gain of function." When the U.S. Government is actively funding research in these areas, as we saw with EcoHealth and the Wuhan Institute of Virology, we need to have the highest possible standards in place. Unfortunately, there does not appear to have been adequate oversight of EcoHealth and its experiments. This issue has highlighted broader concerns with the NIH, especially that it is up to the grantee to oversee themselves. This is a recipe for waste, fraud, abuse, and deception.

We have heard conflicting testimony regarding late grant reporting, the dates experiments were conducted, the interactions with the Wuhan Institute, whether grant terms actually applied or not. We have uncovered outrageous conduct, like intentionally using personal email to avoid FOIA or deleting Federal records from a senior NIAID official, Dr. David Morens. Put simply, Dr. Tabak, the Select Subcommittee has serious concerns regarding the NIH's ability to conduct necessary and proper oversight of its grant processes by what seems to be its current grant process construct. So, the American people pay for this scientific research, and the research needs to be for the benefit of the American people, first and foremost. We hope we can put forth some solutions to help going forward. Unfortunately, as EcoHealth President, Dr. Peter Daszak, made the Select Committee fully aware during a hearing earlier this month, such oversight and responsibility is not always taking place.

In securing your testimony today, Dr. Tabak, NIH assured the Select Subcommittee that you would be able to speak to these issues on behalf of the Agency, and we appreciate that. NIH insisted we do not need to have a hearing with Dr. Lauer, the NIH official in charge of compliance, because you would be knowledgeable on these matters. In anticipation of this hearing, the Select Subcommittee provided you with a list of specific issues that require answers. The Select Subcommittee has been entirely open and transparent in what it requires of the NIH, we expect the same courtesy today.

Forward-looking policy recommendations require us to review what happened in the past and what went wrong in the first place. Without our extensive report on EcoHealth, I don't believe that HHS would have been able to propose debarment, and we are very happy the Department accepted our recommendation. While we acknowledge HHS's actions with respect to EcoHealth, more work needs to be done. How do we prevent this from happening again? While I understand the temptation to simply look forward, we can't learn how to prevent and respond to the next pandemic if we do not learn any lessons from the last one. So, I appreciate my colleagues' assistance in demanding answers from EcoHealth. Our actions have led to real change and a benefit to the American people. I hope you all would join me today in examining what we can do

better going forward, and I look forward to a robust and on-topic discussion, so thank you very much.

I would now like to recognize Ranking Member Ruiz for the purpose of making an opening statement.

Dr. RUIZ. Thank you, Mr. Chairman. Fifteen months ago, the Select Subcommittee declared a mission of getting to the bottom of the origins of the COVID–19 pandemic. As Ranking Member, I made a promise to keep an open mind about how the pandemic started because understanding whether the novel coronavirus emerged from a lab or from nature is essential to better preventing and preparing for future public health threats and to better protecting the American people. And as the origins of the novel coronavirus remain inconclusive, I stand by this commitment. But as we approach the three-quarter mark of the Select Subcommittee's work, this Congress must acknowledge the fact that the majority's probing into our public health agencies and federally funded research has left us with no better understanding of how the novel coronavirus came to be.

We have pored over nearly 450,000 pages of documents provided to us by Federal agencies, universities, and private citizens. We have conducted more than 100 hours of closed-door interviews with 20 current former Federal officials and scientists, and we have held multiple hearings, all in what has at times appeared to be an effort to weaponize concerns about a lab-related origin to fuel sentiment against our Nation's scientists and public health officials for partisan gain. And while this Select Subcommittee's probe has uncovered efforts by Dr. Peter Daszak to mislead his funders at the National Institutes of Health and the National Institute of Allergy and Infectious Diseases, it has not substantiated any allegations that Federal grant funding for EcoHealth Alliance created the COVID–19 pandemic. This is a critically important distinction.

As Dr. Tabak explained in the letter to the Committee on Oversight and Reform in October 2021, research performed under EcoHealth Alliance has grant, including at the Wuhan Institute of Virology, involved viruses that are too genetically distant from SARS-CoV–2 to be its progenitor virus. The Select Subcommittee has obtained no evidence this Congress to suggest otherwise, nor has it nearly spent equivalent time and energy meaningfully examining the still very real possibility that the novel coronavirus could have emerged through zoonosis in nature. And so, at the end of the day, nearly a year and a half into House Republicans' majority, we are right where we started when it comes to understanding COVID's origins.

Now, as the Ranking Member of the Select Subcommittee, I also promised to follow the facts wherever they lead. And as we examined earlier this month, the facts indicate that Dr. Daszak and EcoHealth Alliance may have deliberately misled Federal regulators and investigators, including at NIH, regarding their compliance with reporting requirements and the nature of their scientific work. And we can all agree that demonstrating a reckless disregard for transparency and accountability to the American taxpayers who fund your research is unacceptable, and this misconduct should be taken seriously. But we should also bear in mind that as EcoHealth misconduct has been identified, NIH has taken

decisive actions to rectify the issue at hand, including by recommending the debarment of the Wuhan Institute of Virology, and instituting unprecedented conditions on EchoHealth's use of funds. And just yesterday, the Department of Health and Human Services announced that it had immediately suspended funding to EcoHealth and initiated debarment proceedings for the organization.

While the discussion of how we can continue to strengthen oversight of the use of taxpayers funding is always an important one, it is my hope that we can use this conversation to generate constructive, forward-looking solutions to fortify the work of our Nation's public health agencies and work force as opposed to denigrating them for partisan gain. As Members of the Select Subcommittee, we have an obligation to confront the challenges of declining confidence in science and public health to advance pandemic preparedness, not further weaken it by sowing extreme conspiratorial accusations that our public health leaders caused and sought to cover up the origins of the novel coronavirus for the sake of scoring political points.

So, as we look toward the future, it is my hope that we can work together to build on the progress Congress made to fortify our shores for future public health threats. Democrats passed the Consolidated Appropriations Act reforms that strengthened protections against undue influence in our biomedical research, improve training and transparency for the handling of select agents, pave the way for the interagency collaboration to fortify zoonotic disease prevention, and invested in our infectious disease work force, and it is my hope that we can work with the Biden administration to continue to fortify biosafety, including by collaborating on the implementation of new guidelines.

The Office of Science and Technology Policy announced earlier this month to strengthen oversight of dual research of concern and research involving pathogens with enhanced pandemic potential, and I look forward to a hearing of the constructive work that is ongoing right now that will actually prevent and help us better prepare for the next pandemic by the administration. And it is my hope that we can make objectively examining the origins of the novel coronavirus a part of this forward-looking work. And I stand by my commitment to take a serious, balanced look at all possibilities for the origins of the COVID–19 pandemic, and I stand ready to work on this critically important mission so that we can save future lives. Thank you, and I yield back.

Dr. WENSTRUP. I now recognize Ms. Castor to make an opening statement.

Ms. CASTOR. Thank you, Mr. Chairman. Thank you for the ability to participate in today's hearing, and I want to thank Dr. Tabak for your years of service to America and the National Institutes of Health, especially during the COVID–19 pandemic, one of the darkest periods in our lifetimes. Approximately 1.2 million Americans died due to COVID–19, they estimate over 7 million worldwide, and even today, the mortality rate for COVID–19 is higher than the flu as is the risk for hospitalization. In early 2020, when there were tens of thousands of new cases of COVID–19 in America each day, Dr. Tabak was one of many public servants who ensured

that NIH's best-in-class scientific research was focused on preventing and treating this terrible new disease.

Overall, this Congress' effort to examine the cause of the pandemic has brought more heat than light. Plus, so many, including me are frustrated that instead of taking time to learn critical lessons from our Nation's response to the pandemic, Republicans in Congress have focused on eroding trust in public health and science. In the Energy and Commerce Committee, we had a tremendous opportunity to build on the very difficult lessons learned throughout COVID by passing the bipartisan Pandemic and All-Hazards Preparedness Act, the PAHPA, which has historically been bipartisan. We wanted to give the necessary resources and authorities to agencies working to address and prevent pandemics, but Republicans in my committee refused to move consensus legislation forward. Instead, they doubled down on ideological partisanship and refused to work together on bipartisan solutions. After a closed-door transcribed interview, public health officials have been hauled in and asked numerous questions, but it doesn't seem like the Republican majority is actually interested in the answers. We have not learned anything more about the origins of COVID–19, but we have learned a lot about NIH's diligent work to tackle the pandemic as well as the decades of scientific work preceding 2019 that dramatically accelerated America's ability to develop and manufacture vaccines in record time, saving countless lives.

I hope that we can use today's hearing to learn how Congress can be a better partner to NIH as it continues to prepare us for pandemic threats rather than lob speculative conjecture at our hardworking public health officials. I also hope the remaining transcribed interviews will be released quickly so that the public can read for themselves the complete answers that we have heard from top scientists like Dr. Fauci, instead of having to rely on misleading tweets about their testimony.

I appreciate the opportunity to be here today. Thank you, Dr. Tabak, and I yield back.

Dr. WENSTRUP. Our witness today is Dr. Lawrence Tabak. Dr. Tabak is the principal deputy director of the National Institutes of Health and served as acting director of the NIH from December from 2021 to November 2023. Thank you, Dr. Tabak, for your many years of service.

Pursuant to Committee on Oversight and Accountability, Rule 10(g), the witness will please stand and raise his right hand.

Do you solemnly swear or affirm that the testimony that you are about to give is the truth, the whole truth, and nothing but the truth, so help you God?

Dr. TABAK. I do.

Dr. WENSTRUP. Thank you. Let the record show that the witness answered in the affirmative. The Select Subcommittee certainly appreciates you for being here today, and we look forward to your testimony.

Let me remind the witness that we have read your written statement, and it will appear in full in the hearing record. Please limit your oral statement to 5 minutes. As a reminder, please press the button on the microphone in front of you so that it is on, and the Members can hear you. When you begin to speak, the light in front

of you will turn green. After 4 minutes, the light will turn yellow. When the red light comes on, your 5 minutes has expired, and we would ask that you please wrap up.

I now recognize Dr. Tabak to give an opening statement.

STATEMENT OF DR. LAWRENCE TABAK, D.D.S, Ph.D.
PRINCIPAL DEPUTY DIRECTOR
NATIONAL INSTITUTES OF HEALTH

Dr. TABAK. Thank you, Chairman Wenstrup, Ranking Member Ruiz, and distinguished Members of the Subcommittee. I appreciate the opportunity to be here today to discuss your investigation into the origins of COVID–19. It has been an honor to serve the NIH in various roles over the past 24 years, and I am pleased to continue my service as the NIH principal deputy director under the leadership of NIH director, Dr. Monica Bertagnolli. I have deep respect for the role of congressional oversight. Since the beginning of the 118th Congress, NIH has worked diligently with HHS to respond to letters and inquiries from this Subcommittee, providing written responses, document productions, and providing NIH employees for full days of interviews. I am here today to answer questions related to your investigation.

Like all the Subcommittee Members here today, I strongly support efforts to identify the origins of SARS-CoV–2, the virus that causes COVID–19. NIH strongly believes that a thorough, expert-driven investigation into the origins of SARS-CoV–2 is critical to prepare for the next potential pandemic. While it is frustrating, it is not a surprise that we still do not know with certainty how this virus came to be. It took 14 years to find a single bat population containing the necessary genetic components of SARS-CoV–2, the virus that caused the 2003 SARS epidemic. Determining the origin of a virus is rarely fast or easy and sometimes not possible. While NIH is not an investigative Agency, we do support scientific research into the origins of SARS-CoV–2 and will continue to make this a priority. We are open to all possibilities, and we will follow where the science leads us.

The body of publicly available scientific evidence thus far suggests a natural evolution and points to the theory that SARS-CoV–2 may have come from a wild animal market in Wuhan. Importantly, agencies in the U.S. intelligence community agreed that the virus was not developed as a biological weapon, and most agencies assess that SARS-CoV–2 most likely was not genetically engineered. A full understanding of the origins of SARS-CoV–2 will require cooperation from other countries, including China, and an independent investigation with coordination from the intelligence community.

We may not know the origin of the COVID–19 pandemic yet, but we have learned a great deal to improve the Nation's preparedness for future pandemics. Decades of investment in fundamental biomedical research were essential to the NIH's rapid development of safe and effective vaccines, diagnostics, and treatments. It took 10 years for a measles vaccine to be approved. We had a COVID vaccine with emergency use authorization in just 11 months. Countless lives have been saved because of this work. The pandemic also demonstrated the need to build, leverage, and sustain partnerships

across the U.S. Government, academia, industry, and not-for-profit organizations to rapidly integrate clinical trial networks across sectors streamlining and expediting research efforts during the emergency. Data-sharing efforts supported by NIH accelerated the field tremendously by allowing for immediate public access to COVID–19 publications and open scrutiny of research outcomes.

The world looks to science for definitive answers. However, the complexities of nature take time to unravel. Scientific discovery is iterative, and we continually try to improve scientific approaches to drive toward more rapid, efficient, and accurate assessments of the world around us. With your continued partnership and support, NIH will continue to make good on these efforts. Thank you for your time, and I welcome your questions.

Dr. WENSTRUP. Thank you, Doctor. I now recognize myself for questions.

Dr. Tabak, we understand that the HHS has suspended EcoHealth Federal grants and is proposing debarment, and we appreciate that, while I understand that HHS will have to conduct their own review before debarring EcoHealth. I understand that. Do you think HHS would have been able to issue this suspension without the Select Subcommittee's investigation? And will it be helpful, the investigation today, will it be helpful toward creating new policies going forward, either through NIH or Congress itself?

Dr. TABAK. As you point out, Mr. Chair, the suspension and proposal to debar is what is conducted by HHS. And so, I really can't comment on what input they considered in preparing that documentation.

Dr. WENSTRUP. Well, I look forward to working with NIH on proposals for better processes going forward based on what we learned. And we have several proposals already, but we will follow-up with you further on that. First, does this suspension apply to Dr. Daszak personally or just EcoHealth?

Dr. TABAK. My understanding is this suspension relates only to the organization.

Dr. WENSTRUP. OK. I would ask that NIH evaluate the option of Dr. Daszak himself. I think that we looked through some of the findings that we have obtained to date. There may be cause to consider a suspension on Dr. Daszak himself. Next, the ARM, the Action Referral Memorandum, only mentions three active NIH grants, but it doesn't mention the R01 that was used to involve the Wuhan Institute of Virology and not the grant in conjunction with Colorado state to start a bat colony. Does the suspension include those grants as well? Did we miss that?

Dr. TABAK. The suspension includes all grant activities for that organization.

Dr. WENSTRUP. Thank you. Dr. Tabak, EcoHealth, like every other NIAID grantee, was required to submit a 5-year progress report, as you know. This report was submitted nearly 2 years late. Dr. Daszak testified that EcoHealth had tried to submit the report on time but was locked out of the NIH system. Dr. Lauer testified that a forensic audit was conducted, and no such system error was detected. Is NIH willing to share the findings of this forensic audit with the Select Subcommittee?

Dr. TABAK. We certainly will work together with you to obtain things that you require, sir.

Dr. WENSTRUP. Thank you. Does the audit indicate that EcoHealth could have submitted their report on time?

Dr. TABAK. That is what our audit indicates, yes.

Dr. WENSTRUP. Thank you. When EcoHealth eventually submitted its year–5 report, Dr. Daszak testified it took 11 days to unlock the NIH system. Is this true?

Dr. TABAK. We have no evidence of that.

Dr. WENSTRUP. Thank you. Does NIH allow grantees to update progress reports with information gathered outside the scope of the applicable budget period?

Dr. TABAK. It has happened in the past. Occasionally investigators will for context add in additional information, so that is possible.

Dr. WENSTRUP. Despite what Dr. Daszak testified, the Select Subcommittee recently uncovered an email that he wrote on October 1, 2021, to the personal email of Dr. David Morens. He said, "Here's the truth behind this mystery. We got our report ready to file for the Year 5 grant, but when it was funded, we assumed we didn't need to. It was the first time we had a renewal. We then had our grant terminated by Trump and assumed we definitely wouldn't need to at that point." Does this sound like a more accurate description of events as opposed to a system lockout?

Dr. TABAK. I can't comment on his email. All I can say to you is that our system did not lock them out, and there was no impediment for them to provide that report on time.

Dr. WENSTRUP. Thank you. Are grantees still required to submit progress reports, even if they receive that year's funding?

Dr. TABAK. They are indeed.

Dr. WENSTRUP. Thank you. One of the reasons for the debarment was a dispute regarding whether an experiment that showed unexpected viral growth was conducted in Year 4 or 5 of that grant, unexpected viral growth, basically increased pathogenicity. Would you agree with that?

Dr. TABAK. No. Again, just to put a finer point on it, increased viral growth does not necessarily mean increased pathogenicity. It just simply means that the virus is growing more rapidly.

Dr. WENSTRUP. OK. I appreciate that clarification. So, going back to that, whether it was conducted in Year 4 or 5 of the grant, what is NIH's determination? Did it occur in Year 4 or 5?

Dr. TABAK. It was our evaluation that it occurred in Year 5, but because of the uncertainty, we asked for the original metadata, that is the electronic records, and the actual lab notebooks that would have memorialized the actual events. And as you know, we never received those.

Dr. Wenstrup. Thank you. Dr. Daszak wrote in an email that he "verified" this experiment by calling Dr. Shi at the Wuhan Institute of Virology and asking her. Is that alone sufficient to meet his requirements to oversee subgrantees?

Dr. TABAK. It is not, sir, which is why we asked to see the metadata, electronic records, and the laboratory notebook.

Dr. WENSTRUP. Were the lab notebooks that Dr. Daszak failed to produce, provide information that may potentially validate this experiment?

Dr. TABAK. I certainly hoped they would, yes.

Dr. WENSTRUP. And he never produced those to you?

Dr. TABAK. That is correct.

Dr. Wenstrup. OK. Thank you. I would now like to recognize the Ranking Member for questions.

Dr. RUIZ. Thank you. As I have said from the outset of the Select Subcommittee's work last year, better understanding the origins of the COVID–19 pandemic is essential for preventing and preparing for future pandemics. Dr. Tabak, regardless of whether the novel coronavirus came from a lab or from nature, do you agree that we can better protect the American people if we understand the risk factors leading to either potential pathway?

Dr. TABAK. Yes, absolutely.

Dr. RUIZ. So, for the past 15 months, my Republican colleagues have demonstrated that they are more concerned with proving their extreme narrative about Dr. Fauci orchestrating a coverup of Federal funding causing the COVID–19 pandemic than they are with conducting an objective, balanced analysis of the pathways by which the novel coronavirus could have emerged. But three-quarters of the way through this Congress, Select Subcommittee Republicans still have not succeeded in substantiating their allegations that NIH and NIAID through a grant to EcoHealth Alliance created SARS-CoV–2 and conspire to cover it up.

And while we can agree that EchoHealth Alliance has defied its obligations to be a transparent steward of taxpayer dollars, let me be clear about this. No evidence provided to the Select Subcommittee demonstrates that Dr. Fauci lied about gain-of-function research in Wuhan. No evidence demonstrates that Dr. Fauci and NIH lead a coverup of any kind, and no evidence demonstrates that work performed under the EchoHealth grant, including at the Wuhan Institute of Virology, led to the creation of SARS-CoV–2. To date, my colleagues on the other side of the aisle have been unable to demonstrate that any of the viruses studied under the grant could even possibly have been SARS-CoV–2's progenitor virus.

Dr. Tabak, in October 2021, you sent a letter and analysis to then Oversight Committee Ranking Member, James Comer, regarding the EchoHealth Alliance grant. That letter and accompanying analysis in your words "demonstrated that the naturally occurring bat coronaviruses used in experiments under the NIH grant from 2014 to 2018 are decades removed from SARS-CoV–2 evolutionarily." In the letter, you also confirmed that those viruses "could not have been the source of SARS-CoV–2 and the COVID–19 pandemic." That was more than 2 years ago, and the majority still has not identified a single virus related to the grant, whether in Wuhan or elsewhere that could be the progenitor virus. Dr. Tabak, could you remind us why none of the virus as studied under the EchoHealth grant could have been the progenitor virus to the SARS-CoV–2?

Dr. TABAK. The viruses that were approved for study under the EchoHealth grant are very removed, evolutionarily speaking, from

SARS-CoV–2. It would take many, many years for a virus of the type that they use to evolve into SARS-CoV–2.

Dr. RUIZ. OK. And is it correct that the closest known viruses to SARS-CoV–2 are the RaTG13 and the BANAL–52 viruses, neither of which were discovered or created with NIH funds?

Dr. TABAK. That is correct. Those two viruses are 96 and 97 percent identical, and although that may seem close, in fact, that is very far apart.

Dr. RUIZ. OK. And you already made all of this known to Oversight Committee Republicans almost 3 years ago in October 2021, correct?

Dr. TABAK. That is what the letter outlined, yes.

Dr. RUIZ. Yes. So, it is unfortunate that for the past year and a half, the Select Subcommittee has fallen short of its obligation to objectively promote the Americans public's understanding of the viruses origins. And Dr. Tabak, in your view, what actions should Congress take to better understand the origins of the novel coronavirus and to prevent and prepare for future pandemics?

Dr. TABAK. Well, again, we need to continue the studies about the evolution of these viruses. We have to somehow encourage foreign partners to engage because it is only through engagement of foreign nations that we are going to truly get to the bottom of this. As you know, these viruses do not originate in this country. They originate in Southeast Asia.

Dr. RUIZ. OK. Well, let me just be clear once again that it could have been lab leak, and it could have been zoonotic, although what we haven't proven because so far there is no evidence, is that it was created from grant money from NIH or NIAID to EchoHealth, and that there was a coverup, which is what my colleagues on the other side have been repeatedly mentioning throughout these investigations. So, I do think that we need to continue to do the research to investigate if it was a lab leak, where and how, and how to create better biosafety, which is what the administration is currently undertaking. I think it would be helpful to hear from them their efforts and what we can do to bolster the administration's efforts to keep lab safety a priority in our country and in our efforts in other countries. And I think we should also have more hearings on zoonotic high-risk detection in other countries so that we can set up better systems to build capacity to identify emerging novel viruses immediately and contain them at the source site. So, with that, I yield back.

Dr. WENSTRUP. I now recognize Ms. Malliotakis from New York for 5 minutes for questions.

Ms. MALLIOTAKIS. Thank you. Dr. Tabak, Dr. Daszak came before us and said he was not sure of all the work, or all the research being conducted at the WIV. Are you aware of all the work that was being done at the WIV?

Dr. TABAK. Certainly not. We just have a window into what we support.

Ms. MALLIOTAKIS. OK. Are you aware or were you aware that the CCP, the military wing, was doing work at the WIV?

Dr. TABAK. I am not personally aware of that.

Ms. MALLIOTAKIS. OK. And just for the record, Dr. Collins came before us and said that the hypothesis that the COVID–19 pan-

demic was a result of a lab leak or lab-related accident is not a conspiracy theory. Would you agree with that?

Dr. TABAK. I think it is just an alternate theory that needs to be considered.

Ms. MALLIOTAKIS. OK. And we also had the former head of the CDC come before us and say that it was American tax dollars that went to the WIV, and it wasn't just NIH funding. It was funding from Department of State, Department of Defense, USAID. Are you aware of that?

Dr. TABAK. I am aware that they received funding from other organizations, but I don't know the specifics.

Ms. MALLIOTAKIS. OK. So, there is still the possibility that American tax dollars didn't make their way to the WIV and that this was a lab leak, and we can put together the dots here, but aside from that, I want to actually focus on NIH. When NIH certified EcoHealth's compliance and we negotiated the grant, was NIH aware of the EcoHealth would still be communicating with the debarred Wuhan Institute of Technology? Last year was when they were debarred, and they were still obtaining data and conducting experiments with that information.

Dr. TABAK. Once they were debarred, I do not believe that there is any requirement that they can no longer have conversations with WIV. Is that the timeframe——

Ms. MALLIOTAKIS. Well, no. Well, WIV was debarred——

Dr. TABAK. Right.

Ms. MALLIOTAKIS [continuing]. And EcoHealth was still talking to them. Are we certain that no Federal funds have gone to the WIV since the debarment?

Dr. TABAK. No NIH funds have gone to the WIV since the debarment.

Ms. MALLIOTAKIS. OK. And is that possible that it has gone through the EcoHealth to WIV as a subgrant? I'm saying——

Dr. TABAK. We checked USAID spending, and to my knowledge, no funds, once they were debarred, went to WIV from NIH.

Ms. MALLIOTAKIS. OK. Well, that is why Ways and Means yesterday passed a bill to make sure that all this information is made public, these subgrants, so we know exactly where this money is going once they are given because we don't believe EcoHealth should have received this money, No. 1. No. 2, the fact that they were working with this lab in Communist China that had subpar conditions is very disturbing. But we also know that at least 20 more EcoHealth research projects received funding since March 2020. And they are conducting research, NEPA, zoonotic viruses, bat coronaviruses, MERS. They are doing a lot of this research, mostly actually in Third World countries, subpar safety conditions.

How do you ensure that our Federal dollars are not going to do risky experiments in countries where there are subpar safety regulations, and do you believe that that should be a criteria that is put forth to ensure that the money doesn't?

Dr. TABAK. Well, again, once we established special conditions for award on EcoHealth Alliance, we have monitored them very carefully with regard to expenditure and with regard to their various administrative processes. There was never a concern with the danger, if you will, of the experiments that NIH approved for

EcoHealth Alliance to work under sub-award with WIV. As I just indicated, the viruses that they were working with are nonhuman pathogens that presented no threat.

Ms. MALLIOTAKIS. But you said that you don't know all the work that was being conducted at WIV.

Dr. TABAK. I can only speak to the funds that NIH approved and the work that we approved. I cannot speak to the other side.

Ms. MALLIOTAKIS. How are you sure about the work that we approved? Did you go there? I mean, did you talk to WIV officials? How did you confirm that the money was not used?

Dr. TABAK. We monitor reports. We monitor their publication record.

Ms. MALLIOTAKIS. The WIV's reports?

Dr. TABAK. The EcoHealth Alliance——

Ms. MALLIOTAKIS. OK.

Dr. TABAK [continuing]. Reports because as a sub-awardee, we do not directly connect to WIV.

Ms. MALLIOTAKIS. I just have one last question. In October 2021, NIH changed the website for the definition of a "gain-of-function." Who authorized that change?

Dr. TABAK. I don't know if anybody specifically authorized it.

Ms. MALLIOTAKIS. Who made the change?

Dr. TABAK. The change was made by our communications department because of the confusion that people have about the generic term of gain-of-function and the specific term gain-of-function.

Ms. MALLIOTAKIS. OK. So, you don't know who specifically made the change?

Dr. TABAK. It was done by our communications office that wrote——

Ms. MALLIOTAKIS. The communications office is communications and not scientists, so somebody must have gave him the——

Dr. TABAK. The content was vetted.

Ms. MALLIOTAKIS. By who?

Dr. TABAK. By individuals who are subject matter experts.

Ms. MALLIOTAKIS. OK. Well, we would like to find out who that person is, who is the subject matter expert, if you could let the committee——

Dr. WENSTRUP. OK. Now I recognize Ms. Castor from Florida for 5 minutes for questions.

Ms. CASTOR. Thank you, Mr. Chairman. Dr. Tabak, in your transcribed interview of January 5th, 2024, you shared that during the COVID–19 pandemic, we happened to know a lot about coronaviruses because of a lot of antecedent work. How did Congress' years of investment in basic research accelerate NIH's ability to respond to the pandemic, and what would have been different had those investments not happened?

Dr. TABAK. In many ways, the congressional investment allowed NIH to understand the biology of the SARS family viruses. It allowed us to understand how they are able to attach the host, how they are able to infect and then induce pathogenesis. It enabled us to understand better how the host would respond to the virus. So, it gave us insight as to what potential targets there might be in order to develop therapeutics, as well as vaccines. The spike protein, which many people have heard about, represented such a tar-

get for a vaccine, and indeed that turned out to be the case. It also laid the groundwork for rapid testing for the virus, which was important as well as we sought to control the pandemic.

Ms. CASTOR. I also think it demonstrated how vital it is that American scientists and our agencies are able to monitor new potential public health threats because right now, we are faced with an avian flu, and we are monitoring of course, new COVID–19 and flu variants and measles outbreaks. Just in my time in Congress, we have had to deal with outbreaks of Zika and monitor Ebola in other countries. So confronting public health threats requires a strong, resilient NIH, which is why I was so disappointed when my Republican colleagues proposed in the last Fiscal Year to slash the budget of NIH by almost $4 billion because as you stated, this reliable support has helped accelerate our response to COVID–19, and it will continue to lay the foundation for response to future pandemics.

Dr. Tabak, what would be the effect of slashing $4 billion from NIH? What would be the effect on our preparedness for the next pandemic?

Dr. TABAK. Obviously, with fewer resources, our progress would be slowed.

Ms. CASTOR. In your transcribed interview, you also shared examples of what productive cross-departmental coordination to tackle disease threats look like. In some parts of the country, including my home state of Florida, we learned the hard way what a failure to collaborate and coordinate looks like when Governor DeSantis deliberately hid death and infection information from the public. More people died in Florida from COVID–19 after a safe and effective vaccine was available, and, I believe, largely due to the state's disinformation campaign.

Democrats in the Energy and Commerce Committee tried to implement the lessons learned through the reauthorization of the Pandemic and All-Hazards Preparedness Act. A lot of the things that Dr. Ruiz mentioned, we tried to develop plans for public-private partnerships and also focus on data sharing across local, state, and Federal Government. Unfortunately, Energy and Commerce Republicans refused to work with us on this critical legislation.

In your transcribed interview, you shared that we as a country have had a mixed response when it comes to applying the lessons learned from COVID–19 and that we can't become complacent as the pandemic wanes. Aside from maintaining critical funding, what does NIH need to see from Congress in order to help the Agency best implement the lessons learned from COVID–19?

Dr. TABAK. Well, I think the forward thinking of making the fundamental investments so that we can investigate the remaining viral families of concern. Sometimes it is difficult to understand why such basic research is critical when at the end of the day where is the vaccine, where is the therapeutic. But until you have that fundamental knowledge, you can't get to that final step, which is so crucial. I think also in facilitating in whatever way the Congress has at its disposal, to cross departmental integration of things which is very helpful. We did that. We came together to do that, and hopefully we are able to stay in that in the future and do it in even better ways.

Ms. CASTOR. We still have time in this Congress to implement a bipartisan bill and to establish new policy on lessons learned from COVID–19. We have learned a lot, and I want to thank you again for your service and urge my colleagues to work in a bipartisan way on the real solutions. Thank you, and I yield back.

Dr. Wenstrup. I now recognize Mrs. Lesko from Arizona for 5 minutes of questions.

Mrs. LESKO. Thank you, Mr. Chair. Dr. Tabak, did the NIH fund the gain-of-function research at the Wuhan Institute of Virology through EcoHealth?

Dr. TABAK. It depends on your definition of gain-of-function research. If you are speaking about the generic term, yes, we did, but the generic term is research that goes on in many, many labs around the country. It is not regulated, and the reason it is not regulated is it poses no threat or harm to anybody.

Mrs. LESKO. Thank you. Dr. Tabak, since COVID–19, we have seen many problems with the Wuhan Institute of Virology and the Chinese Communist Party hiding information and refusing to provide data to the United States. Do you believe this lack of transparency cost Americans their lives?

Dr. TABAK. I can't speak to that directly. I can tell you that the failure of the Wuhan Institute of Virology to provide us with the data that we requested and the lab notebooks that we requested certainly impeded our ability to understand what was really going on with the experiments that we have been discussing this morning.

Mrs. LESKO. And because of that, do you think NIH should continue to provide grants where lab work will be done in China?

Dr. TABAK. Well, as you know, the Wuhan Institute of Virology has been disbarred, so we will not do——

Mrs. LESKO. How about any other labs? Should we fund any work in labs in China?

Dr. TABAK. I think if you look at the new policy that has just been released, there is mention of consideration for funding in countries of concern, and China is one of those countries.

Mrs. LESKO. So, I don't understand your answer. Does that mean you don't want to fund labs in China anymore?

Dr. TABAK. That would have to come under very, very high scrutiny before it was done.

Mrs. LESKO. Dr. Tabak, at the time of funding to EcoHealth, did the NIH have a concrete, understandable definition of risk of concern, gain-of-function research throughout NIH?

Dr. TABAK. I can't talk for the whole of NIH, but certainly the organizations that support this type of research, I don't understand.

Mrs. LESKO. All right. In the United States, what level of biosecurity would be used for the type of research that was being done at the Wuhan Institute of Virology under this subgrant from EcoHealth?

Dr. TABAK. There were two types of experiments they did. The experiments involving cell culture would likely be done at a BSL–2 level, and the experiments involved with mice would likely be done at a BSL–3 level.

Mrs. LESKO. Thank you. And how much time do I have? Oh, I got some time, good.

NIH boasts a rigorous grant review process. Dr. Morens, a senior advisor to Dr. Fauci, stated the following about Peter Daszak, the President of EcoHealth: "Peter Daszak is one of my oldest and best friends, and I talk to him all the time." Indeed, after one of Dr. Daszak EcoHealth grants from NIH was suspended in response to EcoHealth's violation of grant policies, Dr. Morens wrote to Dr. Daszak from his private Gmail instead of his official email. It appears from what our committee has learned that Dr. Morens and Dr. Daszak regularly conspired to reinstate Dr. Daszak's grant, all while avoiding Federal records laws and the transparency of FOIA. My question is, do you believe these statements that were made and actions between Dr. Morens and Dr. Daszak undercut NIH's claim of a rigorous grant review process?

Dr. TABAK. I can't speak to the specifics because I am not privy to any of this, but certainly, one would not have a Federal official having discussions of that type with a potential grantee.

Mrs. LESKO. And does Dr. Morens still work for NIH?

Dr. TABAK. Dr. Morens is an employee of NIH, yes.

Mrs. LESKO. And was there any repercussions for him using private emails and avoiding FOIA?

Dr. TABAK. We do not discuss personnel issues, as you know.

Mrs. LESKO. Well, I certainly hope that when somebody violates Federal law, that there should be some type of repercussions, so it seems very convenient that you can't tell us anything, but I thank you, and I yield back.

Dr. WENSTRUP. I now recognize Mrs. Dingell from Michigan for 5 minutes of questions.

Mrs. DINGELL. Thank you, Mr. Chairman. Internal documents and testimony provided by EcoHealth Alliance, and the NIH, and the National Institute of Allergy and Infectious Diseases—NIAID—officials demonstrate potential efforts on EcoHealth's part to mislead the Federal Government. As Democrats stated in our recently released staff report, these efforts raise serious questions about EcoHealth's credibility as a continued recipient of taxpayer funding. For example, EcoHealth has argued to this committee NIH that they are not at fault for submitting their Year 5 progress report nearly 2 years late. One of EcoHealth's defenses is that NIH Report Submission System locked them out from submitting the report. NIH investigated EcoHealth's claims.

Dr. Tabak, we spoke to Dr. Michael Lauer, the NIH official responsible for overseeing EcoHealth's compliance with NIH grant policy. He testified that NIH performed an electronic forensic investigation and found no evidence that the system had locked out EcoHealth. Do you have any reason to dispute Dr. Lauer's testimony about the electronic forensic investigation that NIH conducted?

Dr. TABAK. None at all.

Mrs. DINGELL. Thank you. When it was finally submitted, the Year 5 report ended up becoming a point of disagreement between NIH and EcoHealth. EcoHealth makes certain representations about the results in that report, and for good reason, it appears that NIH is not entirely convinced. For example, EcoHealth has ar-

gued that its viruses did not grow in excess of permitted thresholds, and, therefore, EcoHealth had no obligation to immediately notify NIAID. Dr. Tabak, in October 2021, you wrote to then Oversight Ranking Member, James Comer, that EcoHealth had failed to immediately report the Year 5 results as was required by the terms of the grant. EcoHealth submitted its Year 5 report nearly 2 years late. Do you consider that immediate notification?

Dr. TABAK. Certainly not.

Mrs. DINGELL. Thank you. So EcoHealth has argued they did immediately notify NIAID of the experiments in the Year 5 report because those were the same experiments in the Year 4 report. Now, if you are watching the C-SPAN, I want to tell you something. EcoHealth's argument is as convoluted as it sounds. Dr. Tabak, at your transcribed interview, you testified that NIH disagrees with EcoHealth and thinks that Years 4 and 5 reports probably show two different sets of experiments. Is that still NIH's view today?

Dr. TABAK. That is our view, and that is why we requested the electronic records, metadata, and lab notebooks so that we could reconcile this issue.

Mrs. DINGELL. Thank you. When misconduct in EcoHealth's part has been identified, NIH worked in good faith to ensure improved transparency and compliance. For instance, NIH required EcoHealth to submit all of its sub-award agreements, to submit invoices for work performed as NIH determined appropriate reimbursement, and to submit two progress reports per year. Dr. Tabak, do you agree that those special conditions, like the general conditions on all grants, helped to ensure the grantee was a responsible steward for American taxpayer dollars?

Dr. TABAK. They certainly are designed to do that, yes.

Mrs. DINGELL. We have some issues, and we are all talking to him about them. Prior to his hearing, just a couple of weeks ago, EcoHealth president, Dr. Peter Daszak, submitted written testimony to the Select Subcommittee stating that because of the additional conditions NIH instituted to monitor EcoHealth grants, no other research organization in the United States has more oversight than EcoHealth. Yesterday, HHS announced that it would proceed with disbarment proceedings against EcoHealth and bar the organization from receiving Federal funding. Pursuant to that announcement, HHS has suspended Federal funding immediately and noted the many decisive actions NIH took to investigate EcoHealth's contact and use of taxpayer dollars.

I believe we have worked constructively on a bipartisan basis. I know we all here are deeply concerned on a bipartisan basis to examine EcoHealth's potential misconduct, and I commend the administration for taking the action that you now have to ensure that all Federal grantees use Federal taxpayers' dollars responsibly and transparently. And that is what we all must guarantee going forward. Thank you, Mr. Chairman. I am out of time, and I yield back.

Dr. WENSTRUP. I now recognize the Chairman of the Full Committee, Mr. Comer from Kentucky, for 5 minutes of questions.

Chairman COMER. Thank you, Mr. Chairman, and Dr. Tabak, I want to thank you for being here today representing NIH. I want to ask both about the situation regarding EcoHealth and a few

questions regarding the Institute's record retention policies. Starting with EcoHealth, yesterday HHS proposed debarring them from receiving Federal funds. Does NIH agree with this decision?

Dr. TABAK. Yes, we do.

Chairman COMER. Back in 2020 when NIH originally terminated and then suspended the EcoHealth grant, many scientists were outraged. We have emails where Dr. Daszak called NIH actions Stalinesque. He called you "NIH Acting Dentist Director Tabak" and your oversight actions as "an anti-science shitshow". And that is a quote. It is not my word. Dr. Tabak, do you agree with the request NIH made of EcoHealth?

Dr. TABAK. Oh, absolutely.

Chairman COMER. Dr. Tabak, do you agree with the actions NIH has taken against EcoHealth?

Dr. TABAK. Completely.

Chairman COMER. Is anyone entitled to receive Federal funds?

Dr. TABAK. Of course not. You have to demonstrate your ability to oversee them correctly.

Chairman COMER. And did EcoHealth fail to satisfactorily answer NHI's request?

Dr. TABAK. They have.

Chairman COMER. So, NIH reinstated EcoHealth's grant on the condition that there would be no work in China and the Wuhan lab had already been debarred. Dr. Daszak testified that since then and during the course of the grant, he spoke routinely with the Wuhan Institute of Virology to get data and publish papers. Did Dr. Daszak ever inform the NIH that he would keep working with the Wuhan lab even though they were debarred?

Dr. TABAK. Not to my knowledge.

Chairman COMER. Shifting to some questions regarding NIH's document retention policies. Dr. David Morens, a senior advisor to Dr. Fauci for decades, wrote in an email to Dr. Daszak, "I learned from our FOIA lady here how to make emails disappear after FOIA but before the search starts, so I think we are all safe. Plus, I deleted most of those earlier emails after sending them to Gmail." Is that consistent with NIH document retention policies?

Dr. TABAK. It is not.

Chairman COMER. Does the NIH FOIA Office teach employees how to avoid transparency?

Dr. TABAK. I certainly hope not.

Chairman COMER. He also later wrote Dr. Daszak, "We are all smart enough to know to never have smoking guns, and if we did, we wouldn't put them in emails. And if we found them, we would delete them." Is that consistent with NIH document retention policies?

Dr. TABAK. It is not.

Chairman COMER. Finally, emails show that Dr. Morens would share internal discussions regarding upcoming FOIA releases with Dr. Daszak. He would then help Dr. Daszak craft responses to documents being released in these FOIAs. Are those actions consistent with NIH policies?

Dr. TABAK. If those actions occurred, they would not be consistent.

Chairman COMER. So, do these actions concern you, Dr. Tabak?

Dr. TABAK. It does indeed.

Chairman COMER. What is Dr. Morens' current employment status?

Dr. TABAK. He is an employee of NIH.

Chairman COMER. Well, I think you see where my lines of questioning were leading. We have some serious concerns. We have fought in this Select Subcommittee, the Oversight Committee on obtaining information. And here you have admission of deleting information, going to great lengths to not be transparent in an apparent coverup of something that, I think, we would agree in a bipartisan manner, is one of the most serious issues that our country has ever faced, the COVID–19 pandemic. So, I appreciate the work of the Chairman Wenstrup and the full committee here to try to get to the truth, give the American people the truth because that is what they want and that is what this committee's role is, but we also want to hold people accountable for wrongdoing. So, we look forward to working with you to help us achieve what the American people want us to achieve in this Select Committee. With that, Mr. Chair, I yield back.

Dr. WENSTRUP. I now recognize Ms. Ross from North Carolina for 5 minutes of questions.

Ms. ROSS. Thank you, Mr. Chairman, and thank you, Dr. Tabak, for being with us today.

As we have heard earlier and really ever since COVID came to light, there has been a lot of controversy and confusion about gain-of-function research. And I think some of that has been caused by the fact that we have heard different people use the same term to mean completely different things with completely different definitions. But as an institution, it seems like you and your colleagues at NIH and NIAID have been fairly consistent in that your North Star with respect to proposed research has consistently been the context of the Federal regulation. Is that correct?

Dr. TABAK. It is.

Ms. ROSS. And I would like to turn to the definition of gain-of-function research that Republicans raised at your transcribed interview. Republican questioning referred to it as a broad definition, and it defined gain-of-function research as a type of research that modifies a biological agent, so it confers new or enhanced activity to the agent. I believe that the definition existed at some point in a digital media kit on NIH's news and events webpage. And I understand that you are several levels removed from where the assessments like this are made, but for the purpose of the NIAID staff assessing whether the proposed research is or is not gain-of-function research, did that very broad definition have any regulatory significance?

Dr. TABAK. It does not. The broad definition is unregulated because those types of experiments are conducted in virtually every lab across the country with no consequence of safety to anybody.

Ms. ROSS. And in your experience as deputy director of NIH, if you are interested in getting government guidance or regulations relevant to an issue, would that news and events webpage maybe be your first stop?

Dr. TABAK. It likely would be one of the stops, yes.

Ms. ROSS. And with respect to EcoHealth Alliance's grant, program staff had to assess at different points in time whether the proposed research was or was not gain-of-function research. At those different points of time, did staff refer to government guidance and regulation, such as the P3CO framework when making their assessments?

Dr. TABAK. Yes, once it was instituted, that is correct.

Ms. ROSS. And the definitions for gain-of-function research provided in government guidance and regulations were very much different than that broad definition we discussed earlier. Is that correct?

Dr. TABAK. That is correct.

Ms. ROSS. And did NIAID staff ever use the broad definition when assessing proposed research as far as you know?

Dr. TABAK. No, it wouldn't be applicable.

Ms. ROSS. So, I think there is a natural logic to that process. NIAID as the regulator refers to regulation when determining whether proposed research is within the scope of the regulatory term of art. And just to be clear, each time NIAID program staff was asked to answer whether the proposed research on the EcoHealth grant met the regulatory definition of gain-of-function research, the answer was no. Is that correct?

Dr. TABAK. That is correct.

Ms. ROSS. So, I am just going to end by saying that I believe it is a disservice to our Nation's scientific enterprise when there are attempts to make regulators judge research outside of the regulatory context. And if we want to have a serious conversation about regulation, we can do that, and the Democrats support those conversations. That is why the Biden administration recently announced a new policy for overseeing high-risk research that could otherwise cause the next pandemic. Dr. Tabak, I want to thank you for your many years of service and for appearing before the committee today, and I yield back.

Dr. WENSTRUP. I now recognize Dr. Joyce from Pennsylvania for 5 minutes of questions.

Dr. JOYCE. Thank you, Chairman Wenstrup, for convening this hearing. Thank you, Dr. Tabak, for taking time to speak with us this morning. I think it is time to really reset the table of what the core agenda of this Select Subcommittee is. We want to evaluate how the effects of the COVID virus affected America. We want to come up with best practices, and we want to see what investing in a Chinese Communist Party-guided Wuhan Institute of Virology, what those effects were, and how our taxpayer dollars were spent.

Earlier this month, we heard from Dr. Peter Daszak before this committee and examined how he misled the NIH to secure taxpayer funds which were used to perform gain-of-function research at the Wuhan Institute of Virology. The important work of this committee has led to HHS suspending all active grants to EcoHealth and commencing formal debarment proceedings. We must now scrutinize the system that allowed the reinstatement of Federal funds to EcoHealth. During questioning about the term of EcoHealth's renegotiated grant with NIAID, Dr. Daszak revealed that EcoHealth continues to communicate with the Wuhan Institute of Virology and relies on them for the data required to carry

out the reinstated grant. This level of communication and reliance on Wuhan Institute of Virology to meet grant terms is alarming. And based on this information, I questioned how EcoHealth could have fulfilled grant requirements without violating the terms of the Wuhan Institute of Virology's debarment.

Dr. Tabak, at the time NIH certified EcoHealth's compliance and NIAID renegotiate the grant, was NIH aware that EcoHealth would still be in communication with the Wuhan Institute of Virology?

Dr. TABAK. Not to my knowledge.

Dr. JOYCE. At the time that the NIH certified EcoHealth's compliance and NIAID renegotiated the grant, was NIH aware that EcoHealth would rely on data from the Wuhan Institute of Virology to meet the aims of the grant?

Dr. TABAK. To put a point on it, data that they already had in their possession or data that they had yet to gain?

Dr. JOYCE. Both.

Dr. TABAK. We assume that they would use data that was already in their possession, but we did not assume that they were still interacting about data that they did not yet have and——

Dr. JOYCE. So, there was no awareness of continued interaction?

Dr. TABAK. I had no awareness of that, no.

Dr. JOYCE. Does the NIH consider that ongoing relationship and reliance on the WIV as a violation the WIV's debarment?

Dr. TABAK. I would have to consult with attorneys, but it would seem to me that that would be inappropriate.

Dr. JOYCE. It certainly seems to this Subcommittee Member that it is. Is the NIH certain that no Federal funds have been obligated to the WIV or in furtherance of the WIV's research activities since it was debarred?

Dr. TABAK. I have been told that there have been no funds issued to the WIV since their debarment by NIH.

Dr. JOYCE. I think one of the key components of what we have learned from the Select Subcommittee hearing is that no taxpayer dollars should go toward research by the Wuhan Institute of Virology or EcoHealth. The NIH must improve their grant processes to ensure that information relied on for funding is truthful and that information is complete. While it is apparent that Dr. Daszak and EcoHealth did make false statements during the grant negotiations, NIH must ensure that the grants that they provide are responsible use of the taxpayer dollars. This Select Subcommittee, I will reiterate, looks to learn the lessons and be prepared for best practices in the face of any future attack by a virus from within these borders or from outside these borders. I thank you again for being here to present to us this morning, and, Mr. Chairman, I yield.

Dr. WENSTRUP. I now recognize Dr. Jackson from Texas for 5 minutes of questions.

Dr. JACKSON. Thank you, Mr. Chairman. Thank you, sir, for being here today. I just wanted to start off just to make a point that Federal money doesn't grow on trees around here in D.C., despite what people around here sometimes think. It is provided by hardworking Americans, and the Constitution entrusts Congress with the responsibility to utilize public dollars to provide for the

national defense and to create programs that benefit those who are paying for them in the first place, in the case of NIH and critical research that is beneficial to the citizens of this country.

Dr. Daszak and EcoHealth Alliance were dishonest in their stewardship of taxpayer dollars, and, ultimately, they were caught and tried to find ways to cover this up, and that is pretty obvious from what we have heard today. Dr. Daszak's testimony in front of this committee contradicted statements of the National Institute of Health and the National Institute of Allergy and Infectious Disease, and we appreciate you, Dr. Tabak, for taking time to clarify the record today.

However, we are having this hearing today because of the NIH's failed policies and procedures and lack of oversight that granted EcoHealth Alliance dollars to conduct dangerous gain-of-function research in the first place. And despite what you hear from colleagues on the other side of the aisle, often hear, I am astonished that they continue to bury their head in the sand on this issue. The evidence is overwhelming, from what we have heard on this committee, that the virus did not evolve naturally but was a result of some sort of gain-of-function manipulation.

It is not logical to assume at this point that this is a total coincidence and that it just happened to emerge in Wuhan, China, and it just happened that Dr. Fauci, Peter Daszak, and NIH, and EcoHealth Alliance just happened to be funding gain-of-function research on a coronavirus with U.S. taxpayer dollars, and that is becoming more and more obvious every day. We saw that the funding was suspended by HHS just yesterday.

I have an article here that I was reading online just before coming in here that was published last night. It says, "For years now, EcoHealth has generated immense controversy for its use of Federal grant money to support gain-of-function research on bat coronaviruses in the Wuhan lab." It goes on to say, "In a memo justifying its funding suspension, HHS said that EcoHealth had failed to properly monitor the work it was supporting at Wuhan. It also failed to properly report the results of experiments showing that the hybrid viruses it was creating there had improved the ability to infect human cells." That is from HHS. And then it goes on to describe some of the research and what it was intended to do, and then it says, "Soon enough EcoHealth used some of the viruses that they collected to create chimeric or hybrid viruses that might be better able to infect human lung cells in genetically engineered humanized mice."

I think that in my particular opinion, it has become obvious that NIH has become too independent, too rogue, and too unregulated at this particular point. There needs to be a complete audit of the policies and procedures and proper oversight from outside entities at this point. It has become obvious that NIH is just another government bureaucracy, to some extent, that is too large and refuses to hold those who do wrong accountable. This is evidence, in my opinion, by what we have heard today from you, unfortunately, with the continued employment of Dr. Morano, and your insistence that you have no obligation to discuss "personnel matters" with Members of Congress that provide millions and millions of dollars

to perform research and pay for the salaries of employees such as Dr. Moran.

I want to ask you, in August 2021, the NIH finally received EcoHealth Alliance's 5-year annual progress report, nearly 2 years after the September 2019 deadline. In September 2023, the Wuhan Institute of Virology, which was funded by EcoHealth Alliance, was disbarred from receiving Federal funds because of the implications in the development of the COVID–19. Then on November 14, Dr. Daszak testified that samples from experiments funded by the United States are in possession of the Chinese Communist Party in the Wuhan Institute of Virology. Today some of the samples remain under the custodianship of the CCP.

Dr. Tabak, in your opinion and with this information, was Dr. Daszak a good steward of taxpayer dollars?

Dr. TABAK. He was not.

Dr. JACKSON. OK. I am running out of time here, so I am not going to ask the following questions. I will just submit those for the record.

Dr. JACKSON. But I just want to reiterate that one of the things that drives me crazy on all the committees I am on, this one included, is the complete lack of accountability when things go wrong. I think there has to be accountability. I think that when we come up with stuff here that is a danger to our country, when we find out that we are on the wrong path on something like this research that was happening in NIH, that we were funding what was going on in Wuhan Institute of Virology, that we have to make corrections, that it has to be bipartisan efforts to do that. And that entities like NIH and people like you that are in leadership roles have to have the level of responsibility, there has to be some accountability, and you have to be accountable, not only to yourself and to your Institution, but to Members of Congress. Thank you. With that, I yield back.

Dr. WENSTRUP. I now recognize Ms. Tokuda from Hawaii for 5 minutes of questions.

Ms. TOKUDA. Thank you, Mr. Chair. Dr. Tabak, I want to quickly clarify for the record a crucial distinction regarding the relevance of different definitions of gain-of-function research. To make it abundantly clear, under the regulatory definition of gain-of-function, which is the applicable definition for the purposes of evaluating and funding proposals, NIH and NIAID at no point funded gain-of-function research through the EcoHealth Alliance grant. Is that correct?

Dr. TABAK. That is correct.

Ms. TOKUDA. And the website's broad definition, the non-regulatory definition, is not relevant for these purposes. Is that correct?

Dr. TABAK. That is correct.

Ms. TOKUDA. OK. Thank you. I want to move on now to some of the comments we received last week. During the Select Subcommittee's last hearing with EcoHealth's president, Dr. Daszak, it became abundantly clear that he and EcoHealth had fallen markedly short of their obligation to use taxpayer dollars transparently and with care and so truly appreciate the initiated debarment proceedings that are currently underway. With my time today, I would like to make sure the record is clear about an issue that I discussed

with the doctor. That issue involves representations he made to NIAID officials regarding EcoHealth's access to key samples when their grant was being considered for reactivation.

In transcribed interviews, NIAID officials told us that part of the logic in reactivating the EcoHealth grant was preserving access to the grant's bat samples previously collected by the Wuhan Institute of Virology. However, it appears that Dr. Daszak may have misrepresented his access to the samples. The truth is Dr. Daszak did not have access to the samples as they are currently sitting in freezers in Wuhan. That truth notwithstanding, it seems that Dr. Daszak told NIAID division director that he had access to the samples. We spoke to the NIAID division director, and she explained that Dr. Daszak had directly informed her he had access. She further explained that had she known that the samples were in Wuhan and inaccessible to EcoHealth, NIAID would have reconsidered reactivating EcoHealth's grant. When Dr. Daszak appeared before this committee 2 weeks ago, he suggested that the NIAID division director may have mistaken sequences for samples during their conversation.

Dr. Tabak, do you think it is likely that the director of NIAID's Division of Microbiology and Infectious Diseases does not understand the difference between sequences and samples?

Dr. TABAK. I am sure she does.

Ms. TOKUDA. And that would make sense to all of us here and given the work and expertise she has. In our conversation with the division director, she demonstrated no lack of understanding that we saw for the difference between bat virus sequences and bat samples. We are concerned about the apparent gap in understanding between NIAID and EcoHealth regarding the location of previously collected bat samples and EcoHealth's access to them, particularly when we step back and consider all the other instances mentioned today and during our last hearing that draw into question EcoHealth's integrity and professional conduct as a grantee. Dr. Tabak, do you share our concerns?

Dr. TABAK. I do.

Ms. TOKUDA. Thank you very much. Chair, I yield back the balance of my time.

Dr. WENSTRUP. I now recognize Dr. Miller-Meeks from Iowa for 5 minutes of questions.

Dr. MILLER-MEEKS. Thank you, Mr. Chairman, and thank you, Dr. Tabak, for testifying before the Select Subcommittee this morning. As you have heard and as you know, Dr. Daszak testified in front of the Select Subcommittee on May 1st and clearly highlighted the need for more effective oversight of Federal grants, as has been elucidated by my colleagues.

In 2024, the National Institute of Allergy and Infectious Diseases, NIAID, awarded EcoHealth Alliance almost $4 million for understanding the risk of bat coronavirus emergence, which included the collection of coronaviruses at the Wuhan Institute of Virology. While Dr. Daszak denied using American taxpayer dollars for gain-of-function research, the evidence indicates otherwise, and it has been incredibly challenging obtaining information from both EcoHealth and the NIH. Members of this committee on both sides of the aisle were right to question Dr. Daszak's integrity and han-

dling of funds, which also highlighted NIH's sloppy oversight process. Dr. Tabak, are you aware of the different definitions various Federal agencies use to define gain-of-function research?

Dr. TABAK. I am aware of two different definitions, one very broad and generic, which is unregulated, and one more precise and certainly regulated.

Dr. MILLER-MEEKS. So, it seems to me that this is sort of like what the definition of "is" is. Do you believe having one definition that is universally employed would be more effective?

Dr. TABAK. The broad definition is lab jargon. It is just the way scientists speak. The precise definition which is regulated, of course that is the important one because that is the one that regulates the experiments that people are concerned about.

Dr. MILLER-MEEKS. Well, it seems that there was gain-of-function research occurring but denied that it was occurring because it didn't meet that precise definition. Do you believe that having multiple definitions of gain-of-function research has led to gaps in oversight?

Dr. TABAK. I believe it leads to confusion. I think those who are regulating things understand that they need to use the regulatory framework.

Dr. MILLER-MEEKS. Have grant recipients like EcoHealth exploited these inconsistencies?

Dr. TABAK. I can't speak to that. I don't know.

Dr. MILLER-MEEKS. As I mentioned, the understanding the risk of bat coronavirus emerging grant was almost $4 million grant that partially went to the Wuhan Institute of Virology and the Wuhan University of Public Health. Do you believe this grant was an effective use of taxpayer dollars and would you support issuing the same grant today?

Dr. TABAK. Well, with the benefit of what we know today, no, of course not.

Dr. MILLER-MEEKS. There is great concern with Dr. Daszak's interaction with NIH and NIAID pertaining to the one long growth term of the award. The NIH relied on Dr. Daszak to monitor and report virus growth after being a month late on his annual reporting requirements, which were outlined in the grant. Dr. Tabak, looking back, did the NIH rely too much on Dr. Daszak's self-reporting information?

Dr. TABAK. Again, with the benefit of hindsight, we did because we never received the information, unfortunately.

Dr. MILLER-MEEKS. Well, as an ophthalmologist, hindsight is always 20/20.

Dr. TABAK. Indeed.

Dr. MILLER-MEEKS. Was the information NIH received accurate?

Dr. TABAK. From Dr. Daszak, we don't think so, and that is why we asked for the additional materials, the metadata, the electronic records, the laboratory notebooks, which hopefully would have been able to clarify all of these issues.

Dr. MILLER-MEEKS. And I think it is one of the reasons why HHS yesterday took the extraordinary step, after the great work of this Select Subcommittee under Dr. Wenstrup's leadership, took the extraordinary step of defunding EcoHealth, which was appro-

priate given the inconsistencies, inaccurate information, and denial of research. With that, I yield. Thank you.

Dr. WENSTRUP. I now recognize Dr. McCormick from Georgia for 5 minutes of questions.

Dr. MCCORMICK. Thank you, Mr. Chair. I love that statement about the ophthalmologist and hindsight being 20/20. In the ER, we just say I have no idea what is just about to happen. I am happy to have you here today. Thank you for your testimony. We have a lot of things to sort out here, and I just want to make sure we are getting things in order. I am hoping you can provide some clarity on some previous statements that were made by both Dr. Daszak and other folks that are coming together right now, some things you have already testified on.

Dr. Tabak, when the National Institute of Health requested the notebooks from EcoHealth, was EcoHealth required to produce them under its grant's terms?

Dr. TABAK. Yes, they were.

Dr. MCCORMICK. OK. Thank you. When NIH requested notebooks from EcoHealth, should EcoHealth have been able to access them or already have access to them?

Dr. TABAK. That is correct.

Dr. MCCORMICK. OK. Thank you. Did EcoHealth ever produce the requested notebooks?

Dr. TABAK. They have not.

Dr. MCCORMICK. Never did. Thank you. Dr. Daszak testified 2 weeks ago that he was not required to produce the lab notebooks. Would NIH disagree with that testimony?

Dr. TABAK. Yes, we disagree with that testimony.

Dr. MCCORMICK. Thank you, Dr. Tabak, for clarifying that. The testifying here today clarifies the inconsistency between Dr. Daszak's testimony and the testimony of numerous NIH officials and NIAID officials, also including yourself. Dr. Daszak continues to talk congressional oversight through semantics and outright dishonesty, quite frankly. He has routinely failed to produce pertinent documents and made countless misleading statements to the Select Subcommittee right here. I think he needs to be held accountable, Mr. Chair. I am looking forward to that, and with that, I yield.

Dr. WENSTRUP. Thank you. Thank you for coming before the Select Subcommittee this morning, Mr. Tabak. We appreciate your testimony. We are pleased that the American people had a chance to hear from you directly today. The purpose of today's hearing was to have a transparent examination of the process in which NIH awards Federal grants and conducts oversight on these grants. If we find things that we can do better, then that is where we want to go, and we are all subject to that.

It was important to hear from the deputy director directly on this matter, especially as it pertains to EcoHealth Alliance. While investigating the origins of COVID–19, we uncovered very concerning behavior and wrongdoing by EcoHealth Alliance and its President Dr. Peter Daszak. It was made all the more troublesome as EcoHealth had been awarded Federal funding taxpayer dollars and were conducting research at the Wuhan Institute of Virology. Our investigation was essential, I should say, for uncovering this behavior and for laying out the facts for all to see because just 2 weeks

after publishing a report on EcoHealth wrongdoing, they now face an immediate governmentwide suspension and hold on all taxpayer funds pending a formal debarment investigation. That is appropriate and a good result in my opinion. I want to reiterate my proposal that NIH consider personally suspending EcoHealth president, Dr. Peter Daszak, in addition to EcoHealth, from receiving Federal funds and also be immediately suspended from the current Federal funding.

We understand based on past history, the possibilities of natural origins of COVID and pandemic type of viruses. We recognize the need for surveillance, the benefits of enhanced predictability. We applaud those efforts. What is new and in need of greater study is the culpability and the capability of creating a pandemic or creating a pathogen that is capable of being more infectious. Even in 2012 in an interview when Dr. Fauci was questioned about gain-of-function research and the question was, aren't you concerned about something getting out of the lab and creating a pandemic, he felt at that time that the benefits outweighed the risk and that the risk was small. I think we have greater concerns today when it comes to biosafety standards. And so there is a concern about biosafety standards throughout the world being inadequate. We need to address that as best we can as a Nation, not having control over other nations. That is a concern on who we engage with, so that is a concern throughout the world.

So I appreciate, Dr. Tabak, you testifying today, that not only is a lab leak theory not a conspiracy, but it is a hypothesis, and I will use your words, that should be considered. I agree with you 100 percent, and I have felt that way from the beginning. And I have said in this committee from the very beginning that we need to consider nature, and we need to consider a lab because the capabilities of creating something in lab didn't exist 100 years ago when we had a pandemic, they didn't exist 50 years ago, but they do exist today.

Look, I believe the origins of COVID will likely only be potentially resolved through intelligence, as testified by former CDC Directors Redfield and Walensky. That is where we are going to figure it out. Why? Because China is not cooperative. And I agree with that because China has not been transparent, they have not been accountable, so it makes it very difficult. The threats of existing gain-of-function technology in the hands of bad actors is and should be a huge concern to every American and freedom loving people everywhere. This is not to be taken lightly.

And when we had Dr. Fauci in transcribed interview he said that the conspiracy theory is possible, but I asked him if he reviewed studies or scientific evidence related to that possibility of creating this in the lab, and he said no. I asked him, I said, are you familiar with the published research onsite-directed mutagenesis. He said, no, I am not. Well, if you are open to that, we should be researching it. We should be looking at it, and many of us have been. I have since 2020, when I discovered that Ralph Baric with Zhengli Shi in China created a chimera. That concern has been there for me since that time.

We don't know all the viruses that EcoHealth and/or the WIV either with EcoHealth Alliance or independently or possibly with the

PLA, or with their Academy of Military Medical Science, we don't know all the viruses that they created. So, for some here to say that it is impossible for COVID–19 to have originated from this work, it is possible it didn't come from their work directly. But that is inconsistent with unknown unknowns, including testimony from numerous public health officials and from Dr. Peter Daszak himself. So, I appreciate Dr. Tabak testifying that we do not know everything that was occurring at the WIV and that we just had a window of insight. It is important that we recognize our vulnerabilities, so that we can improve upon them in the future.

I appreciate you, Dr. Tabak, and I appreciate you clarifying that the NIH found that their reporting system did not, in fact, lock Dr. Daszak and EcoHealth out of their account which impeded them from submitting their report on time. That honesty is tremendously welcomed here. The more we look into Dr. Daszak and EcoHealth, the more concerned I get and the more untruths it seems to uncover, and we will continue our work.

Today's hearing was important as we continue our investigation into the origins of COVID and the effects of the pandemic on the United States in the world, and work to uncover any impropriety by public health officials or grantees in a government of we, the people, truth, justice, transparency, and accountability matter. And on that note, I thank you for being here today, Dr. Tabak.

With that and without objection, all Members will have 5 legislative days within which to submit materials and to submit additional written questions for the witnesses, which will be forwarded to the witnesses for their response.

Dr. WENSTRUP. If there is no further business, without objection, the Select Subcommittee stands adjourned.

[Whereupon, at 10:31 a.m., the Subcommittee was adjourned.]

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