RON ESTES 4TH DISTRICT, KANSAS

2411 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515 PHONE: (202) 225–6216 DISTRICT: (316) 262–8992

estes.house.gov

## Congress of the United States House of Representatives Washington, DC 20515–1604

WAYS AND MEANS
SUBCOMMITTEE ON TRADE
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JOINT ECONOMIC COMMITTEE

COMMITTEES:

February 2, 2022

The Honorable Xavier Becerra
Secretary
US Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Secretary Becerra,

I write to thank you for your correspondence on December 20, 2021 regarding your testimony before the Ways and Means Committee and the ongoing concern of mismanaged taxpayer dollars allowed for gain of function research. Unfortunately, your letter raised additional concerns about the National Institute of Health's (NIH) failure to follow its own stated procedures, discrepancies on timing of official review of progress reports, and need to further examine grant peer review processes. I would appreciate your ongoing communication to address the following concerns.

In 2017, the department of Health and Human services (HHS) published the Framework for Guiding Funding Decisions about Proposed Research Involving Enhanced Potential Pandemic Pathogens (HHS P3CO Framework). The P3CO framework defines a potential pandemic pathogen (PPP) as highly transmissible and highly virulent. Further, the framework defines an enhanced PPP as "resulting from the enhancement of the transmissibility and/or virulence of a pathogen." It is understood that the initial grant application submitted by, the non-governmental organization EcoHealth Alliance, did not indicate intent to create or research an enhanced PPP. However, your December 20<sup>th</sup> statement that the research submitted in the progress reports "did not fit the definition of research involving an enhanced potential pandemic pathogen" runs counter to the definition in the P3CO framework and the details outlined by then Deputy Director Tabak in his October 20, 2021 letter to House Committee on Oversight and Reform<sup>2</sup>.

Director Tabak's letter outlined that the August 2021 progress report from EcoHealth Alliance, which indicated research was conducted on a virus that was altered and capable of binding to the human ACE2 receptor, therefore capable of human transmission. Given the aforementioned P3CO definition, it is clear that the virus created by EcoHealth Alliance should have been considered an Enhanced PPP and thus triggered a review through the HHS P3CO Framework. The lack of consistent application of the

<sup>&</sup>lt;sup>1</sup> https://www.phe.gov/s3/dualuse/documents/p3co.pdf

<sup>&</sup>lt;sup>2</sup> https://republicans-energycommerce.house.gov/wp-content/uploads/2021/10/NIH-Document-Production-Cover-Letter-2021.10.20 McMorris-Rodgers.pdf

department's own safeguards indicates, at best, a systemic failure to comply with federal policy, and at worst, a politically motivated and willful disregard for public safety.

Further, you indicated that "NIH also reviewed the research progress reports during the funding period." Your assurances regarding the timely review of progress reports from EcoHealth Alliance are again counter to details provided by Director Tabak in his October 20<sup>th</sup> letter. The research in question was conducted at the Wuhan Institute of Virology (WIV) between 2018 and 2019. Director Tabak indicated that EcoHealth <u>failed to submit a progress report until August 2021</u>. Given these timeframes, I cannot determine how NIH was able to review this progress report during the funding period as EcoHealth had yet to submit this progress report to NIH.

Given the discrepancies in the statements from your letter and the one provided by Director Tabak, I request answers to the following questions:

- 1. Given your assertion that the alteration, by EcoHealth and WIV, of a coronavirus so that it became transmissible to humans with the ability to bind to the ACE2 receptor does not meet the definition of enhanced PPP; What is the definition of Enhanced PPP that HHS used when evaluating the progress report submitted by EcoHealth Alliance?
- 2. What policies are in place to ensure that the HHS P3CO framework is uniformly and appropriately applied to research funded by the United States?
- 3. How were the progress reports reviewed by NIH during the funding period when EcoHealth Alliance failed to produce a progress report until August of 2021, two years after the research was conducted?
- 4. What protocols are in place to prevent bias or fraudulent practices during the peer review process?
- 5. Did Dr. Petter Daszak have any involvement in the peer review process outside of submitting the formal grant application?

I appreciate your ongoing attempt to clarify your statements and hope you will endeavor to resolve the discrepancies between your previous letter and that of Director Tabak. I request that you provide answers to my questions in a more timely manner than your last response so that the American public may feel assured that your department is capable of preventing future pandemics.

Sincerely,

Ron Estes

Kansas 4th District