

## Truth in Testimony Disclosure Form

In accordance with Rule XI, clause 2(g)(5)\*, of the *Rules of the House of Representatives*, witnesses are asked to disclose the following information. Please complete this form electronically by filling in the provided blanks.

Committee: Oversight and Reform

Subcommittee: Healthcare, Benefits, and Administrative Rules

Hearing Date: May 16, 2019

Hearing Title :

HIV Prevention Drug: Billions on Corporate Profits after Millions in Taxpayer Investments

Witness Name: Rochelle P. Walensky, MD, MPH

Position/Title: Chief, Division of Infectious Diseases, Massachusetts General Hospital, Professor, Harvard Medical School

Witness Type:  Governmental  Non-governmental

Are you representing yourself or an organization?  Self  Organization

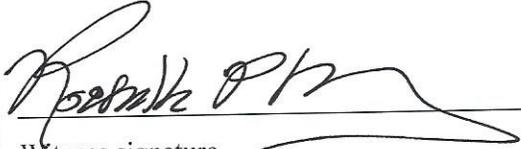
If you are representing an organization, please list what entity or entities you are representing:

If you are a non-governmental witness, please list any federal grants or contracts (including subgrants or subcontracts) related to the hearing's subject matter that you or the organization(s) you represent at this hearing received in the current calendar year and previous two calendar years. Include the source and amount of each grant or contract. *If necessary, attach additional sheet(s) to provide more information.*

If you are a non-governmental witness, please list any contracts or payments originating with a foreign government and related to the hearing's subject matter that you or the organization(s) you represent at this hearing received in the current year and previous two calendar years. Include the amount and country of origin of each contract or payment. *If necessary, attach additional sheet(s) to provide more information.*

### False Statements Certification

Knowingly providing material false information to this committee/subcommittee, or knowingly concealing material information from this committee/subcommittee, is a crime (18 U.S.C. § 1001). This form will be made part of the hearing record.

  
Witness signature

5/14/19

Date

If you are a non-governmental witness, please ensure that you attach the following documents to this disclosure. Check both boxes to acknowledge that you have done so.

- Written statement of proposed testimony
- Curriculum vitae

\*Rule XI, clause 2(g)(5), of the U.S. House of Representatives provides:

(5)(A) Each committee shall, to the greatest extent practicable, require witnesses who appear before it to submit in advance written statements of proposed testimony and to limit their initial presentations to the committee to brief summaries thereof.

(B) In the case of a witness appearing in a nongovernmental capacity, a written statement of proposed testimony shall include a curriculum vitae and a disclosure of any Federal grants or contracts, or contracts or payments originating with a foreign government, received during the current calendar year or either of the two previous calendar years by the witness or by an entity represented by the witness and related to the subject matter of the hearing.

(C) The disclosure referred to in subdivision (B) shall include—

(i) the amount and source of each Federal grant (or subgrant thereof) or contract (or subcontract thereof) related to the subject matter of the hearing; and

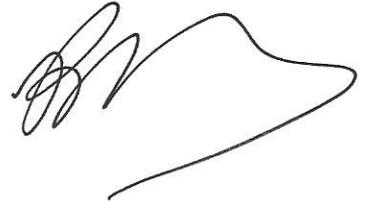
(ii) the amount and country of origin of any payment or contract related to the subject matter of the hearing originating with a foreign government.

(D) Such statements, with appropriate redactions to protect the privacy or security of the witness, shall be made publicly available in electronic form not later than one day after the witness appears.

**Truth in Testimony Disclosure Form**

**Rochelle P. Walensky, MD, MPH**

**May 16, 2019**



**Please list any federal grants or contracts:**

- 2011-2020 Novel Methods to Inform HIV/TB Clinical Trial Development  
NIH/NIAID, R37AI093269-MERIT  
Principal Investigator (\$4,098,782)  
In collaboration with the ACTG, the focus of this study will be to apply novel microsimulation methods to evaluate trials under development for efficiency and to optimize the value of trials that are ultimately conducted.
- 2004-2023 Optimizing HIV Care in Less Developed Countries  
NIH/NIMH, R37AI058736 MERIT  
Co-Investigator (PI: Freedberg)  
This study will assess the clinical impact, cost, and cost-effectiveness of alternative strategies for HIV management in South Africa, Brazil, India, and Côte d'Ivoire.
- 2006-2020 NIH Adult AIDS Clinical Trials Group (AACTG)  
NIH/NIAID, U01AI068636  
Co-Investigator (PI: Kuritzkes)  
The goal of this project is to conduct cost-effectiveness studies alongside selected ACTG trials using the CEPAC model. Modeling studies will use efficacy and cost data from the clinical trials to project long-term clinical outcomes and costs, and to evaluate the cost-effectiveness of the clinical trial interventions.
- 2012-2021 Impact Evaluation of Combination HIV Prevention Interventions in Botswana  
Centers for Disease Control and Prevention (RFA GH11-006/U2GGH001911)  
Site Principal Investigator (PI: Essex) (\$682,653)  
The Cost-Effectiveness of Preventing AIDS Complications (CEPAC) group and HSPH will evaluate the impact and cost-effectiveness of combination HIV prevention strategies in Botswana. The prevention strategies to be studied include enhanced HIV testing and counseling (HTC), adult male circumcision (MC), antiretroviral therapy (ART) for individuals qualifying by local guidelines, ART-for-prevention in individuals with high HIV load (regardless of CD4), and prevention of mother-to-child transmission (PMTCT).
- 2014-2019 Improving Outcomes for HIV-Infected Children in South Africa and Côte d'Ivoire  
NIH/NICHHD, R01HD079214  
Co-Investigator (PI: Ciaranello)  
The goals of this project are to determine the most effective and efficient strategies for early infant HIV diagnosis and to investigate and project the clinical outcomes and cost-effectiveness of ART initiation strategies in HIV-infected children.

- 2014-2019 Novel Approaches to the Design and Evaluation of Combination HIV Prevention  
NIH/NIAID, R01AI112340  
Site Principal Investigator (PI: Paltiel) (\$1,167,245)  
This study will use novel mathematical modeling methods to examine combination HIV prevention and new methods to examine the value of economic incentives to improve HIV outcomes including linkage, retention and adherence.
- 2016-2021 Global TravEpiNet: Global Travelers' Health Surveillance, Applications, and Consortium Centers for Disease Control and Prevention, U01CK000175  
Co-Investigator (PIs: Ryan/LaRocque)  
This project supports web tools to facilitate optimizing health advice and immunization approaches for global international travelers, and incorporates a national consortium of global travelers' health research centers to assess vaccination strategies.
- 2016-2021 The Silver Tsunami: Projecting Multimorbidity, Polypharmacy, and Health Care Costs for Those Aging with HIV in the US  
NIH/NIA, R01AG053100 (Johns Hopkins University, prime)  
Site Principal Investigator (PI: Althoff) (\$485,067)  
The proposed research will use simulation modeling to project the annual costs of non-HIV-related healthcare among people living with HIV/AIDS and in care in the US.
- 2018-2019 Cost-effectiveness of Preventing HIV Complications (supplement: The Clinical and Economic Impact of Alzheimer's Disease and Alzheimer's Disease-Related Dementias in People with HIV)  
NIH/NIAID, R01AI042006  
Co-Investigator (PI: Freedberg)  
The purpose of this Administrative Supplement is to develop an expansion of the CEPAC-US model to: 1) investigate Alzheimer's disease and Alzheimer's disease-related dementias (AD/ADRD), including clinical outcomes, quality of life, and associated costs of case and 2) project lifetime clinical, quality of life, and economic outcomes associated with AD/ADRD among people with HIV in the United States.

I have served since 2011 on the DHHS Panel on Antiretroviral Guidelines for Adults and Adolescents

