

# 2025 Current Fiscal Year Report: Office of AIDS Research Advisory Council

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<b>1. Department or Agency</b>	<b>2. Fiscal Year</b>
Department of Health and Human Services	2025
<b>3. Committee or Subcommittee</b>	<b>3b. GSA Committee No.</b>
Office of AIDS Research Advisory Council	1918

<b>4. Is this New During Fiscal Year?</b>	<b>5. Current Charter</b>	<b>6. Expected Renewal Date</b>	<b>7. Expected Term Date</b>
No	06/27/2024	06/27/2026	

<b>8a. Was Terminated During Fiscal Year?</b>	<b>8b. Specific Termination Authority</b>	<b>8c. Actual Term Date</b>
No		

<b>9. Agency Recommendation for Next Fiscal Year</b>	<b>10a. Legislation Req to Terminate?</b>	<b>10b. Legislation Pending?</b>
Continue	Not Applicable	Not Applicable

**11. Establishment Authority** Statutory (Congress Created)

<b>12. Specific Establishment Authority</b>	<b>13. Effective Date</b>	<b>14. Committee Type</b>	<b>14c. Presidential?</b>
42 USC 300cc-40b	06/10/1993	Continuing	No

**15. Description of Committee** Scientific Technical Program Advisory Board

**16a. Total Number of Reports** No Reports for this Fiscal Year

**17a. Open** 3 **17b. Closed** 0 **17c. Partially Closed** 0 **Other Activities** 0 **17d. Total** 3

## Meetings and Dates

Purpose	Start	End
Program Advisory	10/24/2024	- 10/24/2024
Program Advisory	06/26/2025	- 06/26/2025
Program Advisory	09/18/2025	- 09/18/2025

**Number of Committee Meetings Listed: 3**

	<b>Current FY</b>	<b>Next FY</b>
<b>18a(1). Personnel Pmts to Non-Federal Members</b>	\$4,400.00	\$3,600.00
<b>18a(2). Personnel Pmts to Federal Members</b>	\$14,960.00	\$24,684.00
<b>18a(3). Personnel Pmts to Federal Staff</b>	\$163,220.00	\$249,550.00
<b>18a(4). Personnel Pmts to Non-Member Consultants</b>	\$0.00	\$0.00
<b>18b(1). Travel and Per Diem to Non-Federal Members</b>	\$0.00	\$0.00
<b>18b(2). Travel and Per Diem to Federal Members</b>	\$0.00	\$0.00
<b>18b(3). Travel and Per Diem to Federal Staff</b>	\$0.00	\$0.00
<b>18b(4). Travel and Per Diem to Non-member Consultants</b>	\$0.00	\$0.00
<b>18c. Administrative Costs (FRNs, contractor support, In-person/hybrid/virtual meetings)</b>	\$0.00	\$0.00
<b>18d. Other (all other funds not captured by any other cost category)</b>	\$187,770.00	\$189,647.00
<b>18e. Total Costs</b>	\$370,350.00	\$467,481.00
<b>19. Federal Staff Support Years (FTE)</b>	0.80	1.20

**20a. How does the Committee accomplish its purpose?**

The Office of AIDS Research Advisory Council (OARAC) is composed of highly qualified individuals who possess scientific expertise in HIV/AIDS research and a public commitment to advance the HIV/AIDS scientific agenda. The Council provides a breadth and balance of specialized knowledge necessary to advise the Director of the Office of AIDS Research (OAR) and the Director of the National Institutes of Health (NIH). The NIH Revitalization Act of 1993 called for the establishment of OARAC to provide advice on planning, coordination, and evaluating AIDS research supported by the NIH. The OAR depends heavily on the Council's advice in the extensive process of reviewing all NIH HIV/AIDS research and developing long-term research plans. To accomplish its purpose, meetings were held on emerging and relevant topics during FY 2025 to seek members' input and advise on the scientific strategic direction of the OAR.

Highlighted topical updates included HIV-relevant presentations with NIH Institutes, Centers, and Offices were shared. In addition, each of the three FY 2025 meetings included information from the five HIV clinical guidelines working groups under OARAC: Adult/Adolescent ARV, Adult/Adolescent Opportunistic Infection, Perinatal, Pediatric ARV and Pediatric Opportunistic infection, as well as the four NIH advisory councils that report to OARAC: the AIDS Research Advisory Committee (ARAC), the National Advisory Mental Health Council, the National Advisory Council on Drug Abuse, and the National Cancer Advisory Board.

**20b. How does the Committee balance its membership?**

The Committee will consist of not more than 18 members appointed by the Secretary (appointed members) and at least 11 nonvoting ex officio

members. The nonvoting ex officio members will include the Secretary of Health and Human Services (Secretary); the Director, NIH; the Director, OAR; the Under Secretary for Health of the Department of Veterans Affairs; the Assistant Secretary of Defense for Health Affairs; the Director, Centers for Disease Control and Prevention; and the Director, Division of AIDS, NIAID; (or their designees). The ex officio members will also include one representative from the National Advisory Allergy and Infectious Diseases Council; one representative from the National Cancer Advisory Board; and a representative from each of the advisory councils of the two national research institutes (excluding NIAID and the National Cancer Institute) that receive the greatest funding for AIDS activities; and such additional officers or employees of the United States as the Secretary determines necessary for the Council to effectively carry out its functions. Two-thirds of the appointed members (including not less than 2 individuals who are leaders in the fields of public health and the behavioral or social sciences relevant to the activities of the OAR) will be appointed from the leading representatives of the health and scientific disciplines in the fields of molecular biology, immunology, virology, neurology, pediatrics, vaccine development, antiviral development, clinical care, animal model research, retrovirology, structural biology, infectious disease, epidemiology, mental health, and substance abuse/addictions sciences. One-third of the public members have expertise in public policy, health policy, economics, and management. Persons with HIV and their advocates will be represented on the Council, either from the general public or from the scientific community.

**20c. How frequent and relevant are the Committee Meetings?**

The OARAC meets three times a year to provide advice on the direction of the NIH HIV and AIDS research program; the development and annual review of a comprehensive plan for the conduct and support of all AIDS activities of the agencies of NIH; including direct involvement in budget projections for carrying out the plan which includes an estimate of the number and type of personnel needed for OAR. The Committee conducted three meetings on the following dates: 10/24/2024, 06/26/2025, and 09/18/2025.

**20d. Why can't the advice or information this committee provides be obtained elsewhere?**

The committee and membership requirements are specifically addressed in the statute. HIV/AIDS research is conducted throughout the NIH, which includes 22/27 Institutes and Centers, along with co-funding HIV/AIDS research with the OD programs. The OARAC is the only council with advisory responsibilities applicable to the entire agency-wide NIH HIV and AIDS research program. Therefore, it is essential to the coordination of the NIH HIV and AIDS scientific effort and research direction of the agency's HIV and AIDS programs.

**20e. Why is it necessary to close and/or partially closed committee meetings?**

N/A

**21. Remarks**

The Committee consists of not more than 18 members appointed by the Secretary and at least 11 nonvoting ex officio members. There are several non-federal ex-officio members also serving on OARAC. These members serve as

representatives from other advisory committees, including one representative from the National Advisory Allergy and Infectious Diseases Council; one representative from the National Cancer Advisory Board; and a representative from each of the advisory councils of the two national research institutes (excluding the National Institute of Allergy and Infectious Diseases and the National Cancer Institute) that receive the greatest funding for AIDS activities. In the membership section, these members are labeled as "Ex Officio Member" for "Member Designation" and "Agency" for appointment type because they are non-federal. Their pay plan is also designated as "Hourly or Daily Compensation Plus Travel and Per Diem," but the committees on which they are Special Government Employee (SGE) members pay for their participation on OARAC. They also have fixed terms on OARAC; federal Ex Officio members on OARAC do not have fixed terms. In FY25 the following member terms ended: Drs. Ivy Turnbull (1/7/25), Omar Galárraga (3/4/2025), Shruti H. Mehta (3/29/2025) , and Mojgan H. Naghavi (3/29/2025). Marguerita Lightfoot's term ended 6/27/2025 and Melanie Ott's term ended 5/13/2025. Dr. Luis Montaner was appointed as Chair 1/8/2025 and administrative extended to 3/29/2026. Anne Neilan was administratively extended to 3/29/2026. Carl Dieffenbach was reappointed to 9/30/2028. Due to the administration change several Ex Officios were replaced by new appointees or Ex Officio designees. Dr. Robyn Neblett Fainfair replaced Dr. Jonathan Mermin; Dr. Geri Donenberg replace Dr. Diana Finzi (10/24/2024), Dr. Heather Hauck replaced Dr. Laura Cheever (5/12/2025) and Dr. Nicole Kleinstreuer replaced Dr. Tara Schwetz as the representative Director of DPCPSI (1/20/2025). Robert F. Kennedy Jr., Drs. Jayanta

Bhattacharya, and Memoli (1/20/2025 - 3/31/2025) are new HHS/NIH Ex Officio members. The Charter states 18 potential voting members, but the ACR lists 6 members. With two members rotating off OARAC in FY25, there are gaps in expertise in pediatrics, infectious disease, immunology and cancer. Twelve nominees, who will fill the gaps in expertise, are pending. The Charter allows at least eleven nonvoting Ex Officos. There are currently six Ex-Officios Robert F. Kennedy Jr., Drs. Jayanta Bhattacharya, Geri R. Donenberg, Julie Ake, Robyn Neblett Fainfair, and Carl W. Dieffenbach; and one appointed Ex-Officio Representatives Dr. Christopher R. Friese. OARAC did produce a report this fiscal year.

### **Designated Federal Officer**

Mary Glenshaw Acting Deputy Director, Office of AIDS Research

<b>Committee Members</b>	<b>Start</b>	<b>End</b>	<b>Occupation</b>	<b>Member Designation</b>
AKE, JULIE	02/03/2021	01/31/2026	DIRECTOR, US MILITARY HIV RESEARCH PROGRAM, WALTER REED ARMY INSTITUTE OF RESEARCH	Ex Officio Member
BECERRA, XAVIER	03/19/2021	01/20/2025	SECRETARY, HEALTH & HUMAN SERVICES	Ex Officio Member
BERTAGNOLLI, MONICA	11/09/2023	01/20/2025	DIRECTOR, NATIONAL INSITUTES OF HEALTH	Ex Officio Member
BHATTACHARYA, JAYANTA	04/01/2025	01/20/2029	DIRECTOR, NATIONAL INSTITUTES OF HEALTH	Ex Officio Member

CHEEVER, LAURA	03/01/2023	05/12/2025	ASSOCIATE ADMINISTRATOR FOR HIV/AIDS BUREAU U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH RESOURCES AND SERVICES ADMINISTRATION DIRECTOR, DIVISION OF AIDS NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES, NIH NIH Associate Director for AIDS Research	Ex Officio Member
DIEFFENBACH, CARL	10/01/2024	09/30/2028	ACTING DIRECTOR, OFFICE OF AIDS RESEARCH, NIH	Ex Officio Member
Donenberg, Geri	10/07/2024	09/30/2028	PROFESSOR AND DEAN EMERITUS COLLEGE OF PHARMACY UNIVERSITY OF NEBRASKA PROFESSOR, DEPARTMENT MEDICINE AND MICROBIOLOGY	Ex Officio Member
FINZI, DIANA	12/17/2023	10/24/2024	UNIVERSITY OF COLORADO ANSHUTZ MEDICAL CAMPUS PROFESSOR, ROGEL CANCER CENTER UNIVERSITY OF MICHIGAN	Ex Officio Member
FLETCHER, COURTNEY	06/16/2024	09/26/2026	Department of Health and Human Services	Special Government Employee (SGE) Member
FLORES, SONIA	10/20/2024	09/26/2026	ASSOCIATE PROFESSOR, BROWN UNIVERSITY SCHOOL OF PUBLIC HEALTH	Special Government Employee (SGE) Member
FRIESE, CHRISTOPHER	08/14/2023	03/09/2026		Ex Officio Member
Fink, Dorothy	01/20/2025	02/12/2025		Ex Officio Member
GALARRAGA, OMAR	05/21/2023	03/04/2025		Special Government Employee (SGE) Member

HAUCK, HEATHER	05/13/2025	01/20/2029	DEPUTY ASSOCIATE ADMINISTRATOR, HIV/AIDS BUREAU, OFC. OF THE ASSOC. ADMINISTRATOR HEALTH RESOURCES & SERVICES ADMINISTRATION U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES CHIEF, MPIDB, DER, CHILD HEALTH & HUMAN DEVELOPMENT, NIH	Ex Officio Member
HAZRA, ROHAN	02/03/2021	01/31/2026	SECRETARY, HEALTH & HUMAN SERVICES	Ex Officio Member
KENNEDY, ROBERT	02/13/2025	01/20/2029	DEPUTY DIRECTOR FOR PROGRAM COORDINATION, PLANNING AND STRATEGIC INITIATIVES, NATIONAL INSTITUTES OF HEALTH	Ex Officio Member
KLEINSTREUER, NICOLE	04/09/2025	01/20/2029	PROFESSOR AND ASSOCIATE DEAN FOR RESEARCH, OHSU-PSU, SCHOOL OF PUBLIC HEALTH	Ex Officio Member
LIGHTFOOT, MARGUERITA	10/01/2024	06/27/2025	PROFESSOR AND VICE CHAIR, JOHNS HOPKINS UNIVERSITY	Special Government Employee (SGE) Member
MEMOLI, MATTHEW	01/20/2025	03/31/2025	DIRECTOR, NIH	Ex Officio Member
MONTANER, LUIS	05/21/2023	03/29/2026	VICE PRESIDENT FOR SCIENTIFIC OPERATIONS, THE WISTAR INSTITUTE	Special Government Employee (SGE) Member
NAGHAVI, MOJGAN	05/21/2023	03/29/2025	PROFESSOR, NORTHWESTERN UNIVERSITY	Special Government Employee (SGE) Member

NEBLETT FANFAIR, ROBYN	05/29/2025	01/20/2029	DIRECTOR, DIVISION OF HIV PREVENTION, NCHHSTP CENTERS FOR DISEASE CONTROL AND PREVENTION	Ex Officio Member
NEILAN, ANNE	05/07/2023	03/29/2026	ASSISTANT PROFESSOR, MASSACHUSETTS GENERAL HOSPITAL	Special Government Employee (SGE) Member
OTT, MELANIE	12/01/2024	06/27/2025	PROFESSOR, GLADSTONE INSTITUTE, UNIVERSITY OF CALIFORNIA, SAN FRANCISCO	Ex Officio Member
SANTA MARIA, DIANE	10/20/2024	09/26/2026	ASSISTANT PROFESSOR AND DEAN DEPARTMENT OF RESEARCH CIZIK SCHOOL OF NURSING UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT HOUSTON	Special Government Employee (SGE) Member
SAWYER, SARA	10/20/2024	09/26/2026	PROFESSOR, DEPARTMENT OF MOLECULAR, CELLULAR, AND DEVELOPMENTAL BIOLOGY UNIVERSITY OF COLORADO BOULDER	Special Government Employee (SGE) Member
SCHWETZ, TARA	11/10/2023	01/20/2025	DEPUTY DIRECTOR FOR PROGRAM COORDINATION, PLANNING AND STRATEGIC INITIATIVES, NIH	Ex Officio Member
TURNBULL, IVY	10/01/2024	01/07/2025	DEPUTY DIRECTOR, THE AIDS INSTITUTE	Special Government Employee (SGE) Member

**Number of Committee Members Listed: 29**

**Narrative Description**

NIH's mission is to seek fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to enhance health, lengthen life, and reduce illness and disability. NIH works toward that mission by supporting the research of non-Federal scientists in universities, medical schools, hospitals, and research institutions throughout the country and abroad. Section 492 of the PHS Act states that The Secretary ...shall by regulation require appropriate technical and scientific peer review of (A) applications...; and (B) biomedical and behavioral research and development contracts...

**What are the most significant program outcomes associated with this committee?**

Checked if  
Applies

- Improvements to health or safety
- Trust in government
- Major policy changes
- Advance in scientific research
- Effective grant making
- Improved service delivery
- Increased customer satisfaction
- Implementation of laws or regulatory requirements
- Other

**Outcome Comments**

NA

**What are the cost savings associated with this committee?**

Checked if Applies

- None
- Unable to Determine
- Under \$100,000
- \$100,000 - \$500,000
- \$500,001 - \$1,000,000
- \$1,000,001 - \$5,000,000
- \$5,000,001 - \$10,000,000

Over \$10,000,000  
Cost Savings Other



### **Cost Savings Comments**

NIH supported basic and clinical research accomplishments which often take many years to unfold into new diagnostic tests and new ways to treat and prevent diseases.

### **What is the approximate Number of recommendations produced by this committee for the life of the committee?**

217

### **Number of Recommendations Comments**

Sessions on specific topics that are timely and of relevance were presented during FY25 to update the OARAC with recommendations. October 2024: Recommendation to (1) enhance public-private partnerships to ensure that pharmaceutical discoveries and new drugs are implemented rapidly; (2) emphasize the importance of industry-academic engagement for scientific innovation and new discoveries; (3) consider recommendations for 4 funding priorities: (3A) Enhance discovery and advance HIV science through fundamental research, (3B) Advance the development and assessment of novel interventions for HIV prevention, treatment, comorbidities, and cure through preclinical, translational, and applied research pipelines; (3C) Optimize public health impact of HIV discoveries through implementation science and dissemination of research findings; (3D) Build research workforce and infrastructure capacity to enhance sustainability of HIV scientific discovery; (4) utilize OAR portfolio analysis to identify how funding has mapped to previous strategic plans; (5) review input from each strategic plan task force regarding capacity community-engaged research and capacity building goals, and consider these especially in global and resource limited settings; (6) optimize pediatric antiretroviral therapy development and work with partners to implement discoveries at scale and across the lifespan, importantly including people with perinatally acquired HIV; (7) consider addition of sections on metabolic and cardiovascular complications in people with HIV in the Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents With HIV. December 2024: Unanimous notational vote to endorse HIV Strategic Plan Task Force recommendations for the FY 2026-FY2030 NIH Plan for HIV and HIV-Related Research. OARAC members reviewed and endorsed goals, objectives, strategies, and Task Force recommendations for priorities, presented at the October 2024 OARAC meeting by the HIV Strategic Plan Task Forces Chairs and documented in an OARAC report to the OAR Director in December 2024. June 2025: Recommendation to (1) consider the HIV clinical guidelines as central to the OAR mission to coordinate the NIH HIV research program and the broader NIH mission to foster fundamental discoveries and their applications; (2)

solicit feedback from the larger community regarding potential transition of the HIV clinical guidelines; conduct small-group discussions with each of the guideline panels to explore ways to improve and gather input about areas to maintain, change, or initiate within the guidelines to ensure relevance across settings; (3) consider the benefit of OAR support to the guidelines in terms of rigor, timeliness, accessibility, trust, and reputation; recommendation to examine cost of supporting the HIV clinical guidelines relative to their effectiveness and impact; (4) encourage transparency regarding costs to produce and maintain HIV clinical guidelines when discussing efficiency enhancements; (5) expand outreach to encourage early career and future scientists and physician-scientists early in their training, including medical schools, professional organizations such as the HIV Medicine Association, the Infectious Diseases Society of America, the Association of Nurses in HIV Care, university research offices, and biomedical libraries; expand dissemination opportunities with conference presenters and attendees; (6) to help quantify high risk, high reward research investment impact, consider alternate metrics (e.g. use of award applications or membership in honor societies) to measure output as interim indicators.

**What is the approximate Percentage of these recommendations that have been or will be Fully implemented by the agency?**

0%

**% of Recommendations Fully Implemented Comments**

Due to the complexity of the recommendations made by this committee, staff is unable to determine which recommendations have been fully or partially implemented solely in response to this committee's activities.

**What is the approximate Percentage of these recommendations that have been or will be Partially implemented by the agency?**

0%

**% of Recommendations Partially Implemented Comments**

Due to the complexity of the recommendations made by this committee, staff is unable to determine which recommendations have been fully or partially implemented solely in response to this committee's activities.

**Does the agency provide the committee with feedback regarding actions taken to implement recommendations or advice offered?**

Yes  No  Not Applicable

### Agency Feedback Comments

Information is provided to the public at each meeting. The public can view information related to the Committee through the committee's official website.

### What other actions has the agency taken as a result of the committee's advice or recommendation?

	Checked if Applies
Reorganized Priorities	<input type="checkbox"/>
Reallocated resources	<input type="checkbox"/>
Issued new regulation	<input type="checkbox"/>
Proposed legislation	<input type="checkbox"/>
Approved grants or other payments	<input type="checkbox"/>
Other	<input checked="" type="checkbox"/>

### Action Comments

The Committee makes recommendations to the federal staff on the planning, coordination, and evaluation of research and other activities in respect to AIDS conducted or supported by the NIH. OARAC also advises the Secretary of Health and Human Services, the Assistant Secretary for Health, the Director of NIH, and the Director of OAR, on AIDS research programs, the development and annual review of the comprehensive plan for the conduct and support of all AIDS activities of the agencies of NIH, including research policies and priorities, and the coordination of domestic and international NIH AIDS efforts.

### Is the Committee engaged in the review of applications for grants?

No

### Grant Review Comments

NA

### How is access provided to the information for the Committee's documentation?

	Checked if Applies
Contact DFO	<input checked="" type="checkbox"/>
Online Agency Web Site	<input checked="" type="checkbox"/>
Online Committee Web Site	<input checked="" type="checkbox"/>
Online GSA FACA Web Site	<input checked="" type="checkbox"/>
Publications	<input type="checkbox"/>
Other	<input type="checkbox"/>

**Access Comments**

N/A