



JUNE 15, 2018 BACKGROUND

Robert Redfield, Director of the Centers for Disease Control and Prevention (CDC) at the U.S. Department of Health and Human Services (HHS)

INTRODUCTION

Dr. Robert R. Redfield was appointed Director of the Centers for Disease Control and Prevention (CDC) and Administrator of the Agency for Toxic Substances and Disease Registry (ATSDR) by Secretary of Health and Human Services (HHS) Alex Azar on March 21, 2018. He replaces President Trump's first Director, Dr. Brenda Fitzgerald, who resigned in January 2018 over conflict of interest concerns related to her investments in tobacco and health care companies. The position does not require Senate confirmation. The CDC is one of HHS's 11 operating divisions and one of the eight divisions in the U.S. Public Health Service.

POSITION

Director, CDC

EDUCATION

Georgetown University, B.S., M.D.

AGE

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PROFESSIONAL HISTORY

University of Maryland School of Medicine,
1996-2018

- Cofounder & Associate Director, Institute of Human Virology, 1996
- Robert C. Gallo, M.D. Endowed Professor in Translational Medicine, 2016

Walter Reed Army Institute of Research/Walter Reed Army Medical Center, 1977-1996

- U.S. Army Medical Corps researcher and clinician specialized in HIV/AIDS
- Founding Director, Department of Retroviral Research, Military HIV Research Program
- Fellowships: Infectious Disease and Tropical Medicine
- Internship and Residency: Internal Medicine

Advisory Board Positions: President's Emergency Plan for AIDS Relief (PEPFAR) Scientific Advisory Board, Presidential Advisory Council on HIV/AIDS, Advisory Council for the Office of AIDS Research at the NIH, Advisory Board for the Fogarty International Center at the NIH, Advisory Anti-Infective Agent Committee of the FDA

FAMILY

Dr. Redfield is married to Joy, a nurse. They have five children and nine grandchildren. Two of their children are doctors. Both of Dr. Redfield's parents worked at the National Institutes of Health.

SUMMARY

Dr. Redfield is a pioneering HIV/AIDS researcher and physician ([Washington Post](#)). His appointment has been largely cheered. Critics of his appointment, most notably Senator Patty Murray (D-WA), ranking Member of the Senate Health, Education, Labor, and Pensions Committee, voiced concerns over his lack of experience managing a public health agency. Critics also pointed to controversial past positions regarding HIV/AIDS screening, in particular his advocacy of segregating HIV-positive soldiers from other soldiers and screening recruits for HIV and barring from service those who tested positive. "This pattern of ethically and morally questionable behavior leads me to seriously question whether Dr. Redfield is qualified to be the federal government's chief advocate and spokesperson for public health," Murray wrote in her letter. There were also some lingering concerns regarding his work on an AIDS vaccine in the 1990s, though an investigation cleared Redfield of wrongdoing. Many HIV/AIDS advocates have expressed optimism at Dr. Redfield's appointment.

RECORD / BACKGROUND

Prior to his appointment, Dr. Redfield's public statements on health policy issues outside of HIV/AIDS have been limited. The following items highlight significant details of his career history, as well as reported quotations from his first speech to CDC staff as Director and events since his installation.

HIV/AIDS

- As co-founder and associate director of the Institute for Human Virology (IHV), Dr. Redfield oversaw "clinical care and research at the virology institute, which provides HIV treatment to more than 6,000 patients in the Baltimore-Washington area and more than 1 million people in Africa and the Caribbean. The institute, with an annual budget of more than \$105 million, also studies other chronic viral illnesses and cancer." ([New York Times](#))
- "In 1988 he co-wrote a *Scientific American* feature article about early HIV research, which emphasized the importance of studying the progression of HIV into AIDS, and of diagnosing the viral disease as early as possible." ([Scientific American](#))
- In the 1980s, Dr. Redfield advocated for making HIV screening more routine and, in some cases, mandatory: "At a congressional hearing in August 1987, Dr. Redfield recommended regular testing, at doctor's appointments and hospitalizations, as well as for marriage license applicants, and incorporating the test into the practice of medicine, according to news reports." ([New York Times](#))
 - At the same hearing, regarding HIV status as a stigma, he said: "We have to tell people it's anti-American to discriminate against people who have the AIDS virus." ([New York Times](#))
 - "He also helped implement an HIV-screening program at the Department of Defense, requiring every recruit to be tested for the infectious disease and banning anyone who tested positive from entering military service." ([Scientific American](#))
- "In the early 1990s, Dr. Redfield was the subject of a military investigation after colleagues suspected that he overstated the therapeutic effects of an experimental AIDS vaccine at presentations and in a report. The investigation led to a correction in some published data, according to documents...Several high-level colleagues, however, felt the military should have been tougher on Dr. Redfield, who they felt raised false hopes about the efficacy of a treatment vaccine he was developing." ([New York Times](#))
 - "An investigation at the time by the U.S. Army determined there was no evidence to support scientific misconduct." ([Wall Street Journal](#))
- In his speech to CDC staff on March 29, 2018, he said: "Ending the AIDS epidemic in America? It's possible. I think it could be done in the next three to seven years, if we put our mind to it." ([Stat](#)) He also "voiced support for comprehensive prevention strategies. 'I've never been an abstinence-only person...I believe in every measure we have scientific evidence for, including condoms.'" ([Washington Post](#))

Emergency Response

- In his speech to CDC staff on March 29, 2018, he said that “the CDC’s most critical public health mission is to protect Americans ‘from that which we don’t expect,’” adding, “I pray it doesn’t happen on our watch. But I want to make sure we’re all prepared, whether it’s flu — my biggest fear — or MERS or something else. I respect the mission we have, which is to be prepared for what we don’t expect.” ([Washington Post](#))

Opioid Abuse

- In his speech to CDC staff on March 29, 2018, Dr. Redfield called the opioid epidemic “‘the public health crisis of our time’ and agreed with [HHS Secretary] Azar that it is a medical, not a moral, problem on which the CDC will help lead the government’s response. He also likened the stigma around addiction to that during the early days of AIDS... ‘If any of you have tried to access care for addiction in this nation, I can guarantee you it’s complicated,’ he said. ‘It needs to not be complicated.’” ([Washington Post](#))
- Dr. Redfield has “much experience in treating addiction as a co-morbidity to HIV and incorporating addiction treatment into a patient’s overall primary care,” according to the Chairman of the Institute of Human Virology’s Board of Advisors. ([New York Times](#))

CDC and Science

- In his speech to CDC staff on March 29, 2018, he said: “We’re not an opinion organization. We’re a science-based, data-driven organization. That’s why CDC has the credibility around the world that it has.” ([Stat](#)) He also “spoke of the honor of leading the best ‘science-based, data-driven agency in the world. I’ve dreamed of doing this for a long time.” ([Washington Post](#))
- Following his speech to staff, “[s]everal staff members noted his strong embrace of science and said they were especially gratified to hear him say that if the CDC has evidence to support a public health intervention, the intervention should be applied.” ([Washington Post](#))

Vaccines

- In his speech to CDC staff on March 29, 2018, “[h]e also spoke of the importance of vaccines and recounted how as an Army doctor in the early 1980s, he helped persuade military leadership to vaccinate ‘every individual in the armed forces’ against hepatitis B after a young soldier for whom Redfield had cared infected his wife and newborn child. ‘That’s probably the most important thing I did in my life,’ he said.” ([Washington Post](#))
- He also emphasized the importance of vaccination in the context of the high number of pediatric deaths due to flu this season, saying that “[w]e have got to get the American public to understand that vaccination is important and needs to be fully utilized.” ([Washington Post](#))

Other – Salary Controversy

- Dr. Redfield was originally hired under Title 42, which allows governments to offer salaries competitive with the private sector in order to attract top scientific talent. Under this provision, his salary was to be \$375,000, which is significantly higher than those of previous CDC Directors and other top HHS officials. Following questions from Senator Patty Murray (D-WA) and the Campaign Legal Center, Redfield requested that his salary be cut and HHS subsequently announced that his salary would be \$209,700. ([New York Times](#))

RESPONSE TO APPOINTMENT

Congress/Administration

- **Alex Azar, Secretary, HHS:** “Dr. Redfield has dedicated his entire life to promoting public health and providing compassionate care to his patients and we are proud to welcome him as director of the world’s premier epidemiological agency. Dr. Redfield’s scientific and clinical background is peerless: As just one example, during his two-decade tenure at Walter Reed Army Institute of Research, he made pioneering contributions to advance our understanding of HIV/AIDS. His more recent work running a treatment network in Baltimore for HIV and Hepatitis C patients also prepares him to hit the ground running on one of HHS and CDC’s top priorities, combating the opioid epidemic.” ([Press Release](#))
- **Mark Green, Administrator, USAID:** “I congratulate Dr. Robert Redfield on his new position as Director of the U.S. Centers for Disease Control and Prevention (CDC) within the U.S. Department of Health and Human Services (HHS). From fighting tuberculosis and malaria to preventing the spread of HIV and advancing global health security, our two institutions work together around the world to save lives. We look forward to continuing this important collaboration with Dr. Redfield and our HHS/CDC colleagues.” ([Statement](#))
- **Senator Lamar Alexander (R-TN), Chairman, Senate Health, Education, Labor, and Pensions Committee:** “Dr. Redfield has a strong background to lead the Centers for Disease Control and Prevention— he has spent his career researching public health threats such as HIV/AIDS and drug addiction. I am looking forward to discussing the work we have ahead of us to help states and communities fight the opioid crisis.” ([Statement](#))
- **Senator Patty Murray (R-WA), Ranking Member, Senate Health, Education, Labor, and Pensions Committee:** “I write with concern about your Administration’s consideration of Dr. Robert Redfield to lead the Centers for Disease Control and Prevention (CDC), given his lack of public health credentials and his history of controversial positions regarding the prevention and treatment of HIV/AIDS. As I made clear through Dr. Fitzgerald’s tenure as CDC Director and since her resignation, I believe the CDC Director must first and foremost be a champion of public health and ensure this Administration embraces the science around public health in both its domestic and global work. I am concerned by Dr. Redfield’s lack of public health expertise and his failure to embrace the science underscoring critical public health work, and I urge you to reconsider him as a candidate for CDC Director.” ([Letter to President Trump](#))
- **Representative Greg Walden (R-OR-2), Chairman, House Energy and Commerce Committee and Representative Michael Burgess (R-TX-26), Chairman, Subcommittee on Health:** “There are no shortage of public health issues on the horizon, and we look forward to having a new partner in our efforts to deliver for the American people. In particular, we are at a critical juncture when it comes to combating the opioid crisis. Working with Dr. Redfield, we aim to advance meaningful reforms that can help stem the tide and provide the necessary resources to those struggling with addiction.” ([Statement](#))
- **Representative Elijah Cummings (D-MD-7):** “Although I seldom agree with the Trump administration, I am in complete agreement that Dr. Bob Redfield is the best choice to lead the CDC. Bob has devoted his life to improving the public health.” ([Politico](#)) “Both sides of the aisle should be pleased that this deeply experienced and compassionate public health physician is willing to take the helm of the CDC.” ([Wall Street Journal](#))

Advocacy Organizations And Leaders

- **Paul Auwaerter, MBA, M.D., President, Infectious Diseases Society of America:** “Dr. Redfield’s background should prove valuable in understanding the broad impact of opioid drugs on individual and public health. Sufficient and available medically-assisted therapy for heroin addiction through integrated treatment programs addressing both infectious diseases and opioid use will be essential. As a member of the Scientific Advisory Board for the President’s Emergency Plan for AIDS Relief and a leader of the Institute of Human Virology with its international programs, Dr. Redfield has demonstrated commitment to addressing the global security threats of emerging and re-emerging infectious diseases in our ever increasingly connected world.” ([Statement](#))

- **John Wiesman, President, Association of State and Territorial Health Officials (ASTHO):** “ASTHO looks forward to meeting and building a positive working relationship with Robert Redfield, M.D., the new director of the Centers for Disease Control and Prevention (CDC)..We are eager to share the priorities and perspectives of state health leaders and continue to ensure the use of sound scientific evidence when making policy decisions to protect, improve, and promote our nation’s public health. We are confident that Dr. Redfield will value and draw upon the expertise of state and local public health leaders as he begins his tenure as director of the agency.” ([Statement](#))
- **Georges Benjamin, M.D., Executive Director, American Public Health Association:** “I look forward to working with Robert Redfield, M.D., following his appointment as the new director of the Centers for Disease Control and Prevention as he leads our country’s disease, injury and disability prevention efforts. The American Public Health Association is eager to engage with him on pressing and emerging public health issues and continue our strong collaboration with the agency, improving the nation’s health and strengthening the public health workforce. CDC functions as the core of our nation’s investments in public health and prevention, and his leadership will be essential to the success of those investments.” ([Statement](#))
- **Scott Becker, Executive Director, Association of Public Health Laboratories:** “I think he’s a world-class researcher, and from my perspective he thoroughly understands the lab and lab system issues, so that’s a positive. I do think that there will be a steep learning curve, coming from an academic research organization into a very large public health practice organization.” ([Scientific American](#)) “He’s a strong scientist and has really sound science credentials. The only red flag is that he hasn’t led an institution like this. The ability to really be a strong leader and spend time on Capitol Hill educating Congress about the importance of public health investments is really important.” ([Politico](#))
- **Jeffrey Crowley, former Director, Office of National AIDS Policy under President Barack Obama:** “Questions raised by his past views are legitimate and I would love to know what he currently thinks. But what we need to recognize is the epidemic today looks very different than it did then and technology has changed our views dramatically. Redfield is a respected scientist and we could do far worse by some other appointment.” ([Politico](#))
- **Carlos del Rio, M.D., Chair, PEPFAR Scientific Advisory Board, on which Redfield also serves:** “He has been a leader on the opioid epidemic. Right now, our biggest public health problem is the opioid crisis, and we need someone who actually understands and wants to do something about it.” ([Politico](#))
- **Jesse Milan, Jr., President and Chief Executive, AIDS United:** “I heard him [in a recent phone call] commit to our entire HIV prevention toolbox and to supporting health equity for the entire spectrum of marginalized and stigmatized people. If he’s appointed, I can assure you we will hold him to it.” ([New York Times](#))
- **Gregg Gonsalves, Assistant Professor, Yale School of Public Health and AIDS activist:** “We don’t have to be defined by our pasts, but Dr. Redfield has to clarify where he stands now on key issues and place himself firmly in the mainstream of evidence-based public health.” ([New York Times](#))
- **Michael Ruppal, Executive Director, The AIDS Institute:** “The opportunity to have an experienced HIV physician to serve at the helm of the CDC provides us with great optimism.” ([Wall Street Journal](#))
- **Sarah Kate Ellis, President and CEO of GLAAD:** “HIV advocates have pointed to Redfield’s record of promoting stigma and fear around HIV and AIDS and that should give us pause about this appointment. This is more of the same from this administration who is known for appointing unqualified individuals to top posts and in less than two years has established a history of cutting funds and services for HIV and AIDS work.” ([Wall Street Journal](#))
- **Laura Hanen, NACCHO Interim Executive Director and Chief of Government Affairs:** “Dr. Redfield has devoted his career to addressing one of the most impactful infectious diseases of the 21st century – HIV/AIDS – with more than 70 million people infected and 35 million deaths worldwide. He has been actively engaged in clinical research and clinical care of chronic infectious diseases for more than 30 years. We look forward to collaborating with Dr. Redfield and CDC to create conditions where all people can be healthy and safe.” ([Statement](#))

About the District Policy Group

The bipartisan District Policy Group at Drinker Biddle is comprised of 15 lobbyists, public policy specialists, grassroots coordinators and other experienced government relations professionals—including former Congressman Dr. Phil Gingrey (R-GA).

Our team's extensive experience comes from working on Capitol Hill, within trade associations and advocacy organizations, and in the private sector. We have a long record of success in delivering insightful political and policy analyses, developing meaningful policymaker relationships, and advancing and achieving our clients' federal public policy goals.

For each representation we undertake, we carefully assemble a team of professionals with the specific experience, knowledge and relationships needed to meet the client's unique needs. We are nationally recognized for our lobbying work in health care, and also represent clients in other industries, such as agriculture, trade, environment, transportation and manufacturing.

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Ilisa Halpern Paul leads the District Policy Group and has more than 25 years of experience in government relations, advocacy, and policymaking in non-profit, academic, federally-funded, and government settings. Ilisa's practice centers on advising clients with respect to advancing their federal legislative, regulatory and programmatic policy agendas. Her work has earned her the recognition as one of *The Hill's* Top Lobbyists of 2015 and 2016, as well as a feature story in *The Hill* regarding her rise to success.



The Honorable J. Phillip Gingrey, M.D., Senior Advisor

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Phil Gingrey is a senior advisor in the District Policy Group at Drinker Biddle. Dr. Gingrey is a former U.S. Congressman who served Georgia's 11th congressional district from 2003 to 2015. Throughout his 12 years in Congress, Dr. Gingrey served on numerous influential committees, including the House Committee on Energy & Commerce, which focused on issues such as energy, health care, telecommunications, environment and interstate commerce. As such, he is uniquely positioned to provide public policy and government relations counsel to clients on issues related to health care, energy and environment, education, communications, and life sciences. Also during his Congressional tenure, Dr. Gingrey served on the Committee on Education and the Workforce and the Committee on Armed Services.



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Jodie Curtis focuses on federal policy, appropriations, and regulatory issues. She has more than 20 years of experience in government, Congressional affairs and representing the legislative and regulatory interests of for-profit, non-profit, and global organizations. Prior to joining the firm, Jodie served as an assistant director with a large national non-profit health care advocacy organization, deputy chief of staff for U.S. Representative Thomas M. Barrett (D-WI), executive assistant for U.S. Representatives Lynn Rivers (D-MI) and Peter Barca (D-WI), and district director/legislative assistant for Wisconsin State Senator Barbara Ulichny.



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Laura H. Phillips has been a leader in the telecommunications market for more than 25 years. She counsels wireless and wired technology entrepreneurs on issues related to the development of new technologies, including the development of spectrum auctions, network interconnection, access, universal service and Voice over Internet Protocol (VoIP). She also represents clients in regulatory matters stemming from communications service convergence, the growth of wireless services and the Internet. Laura is chair of the firm's Government and Regulatory Affairs Practice Group.