



Charter

National Advisory Council for Health Care Policy, Research and Evaluation

Purpose

The Council shall provide advice to the Secretary and the Administrator, Agency for Health Care Policy and Research, on matters related to the actions of the Agency to enhance the quality, appropriateness, and effectiveness of health care services and access to such services through scientific research and the promotion of improvements in clinical practice and the organization, financing, and delivery of health care services.

Authority

42 U.S.C. 299c; Section 921 of the Public Health Service Act, as amended. The Council is governed by provisions of Public Law 92-463 (5 U.S.C. Appendix 2), which sets forth standards for the formation and use of advisory committees.

Functions

The Council shall advise the Secretary and Administrator through recommendations regarding priorities for a national agenda and strategy for:

- o conduct of research, demonstration projects, and evaluations with respect to health care, including clinical practice and primary care;
- o development and application of appropriate health care technology assessments;
- o development and periodic review and updating of guidelines for clinical practice, standards of quality, performance measures, and medical review criteria with respect to health care;
- o conduct of research on outcomes of health care services and procedures.

The Council shall, in addition, provide second level review of grant applications in excess of \$250,000 total direct costs.

Structure

The Council shall consist of 17 appropriately qualified members of the public appointed by the Secretary. Among these 17 voting members, 8 shall be individuals distinguished in the conduct of research, demonstration projects, and evaluations with respect to health care; 3 shall be individuals distinguished in the practice of medicine; 2 shall be individuals distinguished in the health professions; 2 shall be individuals distinguished in the fields of business, law, ethics, economics, and public policy; and 2 shall be individuals representing the interests of consumers of health care.

The Council also shall include Federal officials as ex officio members. The voting Federal members shall be the Administrator, Alcohol, Drug Abuse and Mental Health Administration, the Director, National Institutes of Health, the Director, Centers for Disease Control, the Administrator, Health Care Financing Administration, the Commissioner of Food and Drugs, the Assistant Secretary of Defense (Health Affairs), and the Chief Medical Officer of the Department of Veterans Affairs. Such other Federal officials as the Secretary may consider appropriate may be appointed as non-voting members.

The Administrator, Agency for Health Care Policy and Research, shall select one of the 17 public members as Chair. A quorum of the Council shall consist of a majority of the voting members or their representatives.

Members shall be appointed for a term of 3 years, except that of the 17 members first appointed, 6 shall serve for 3 years, 6 shall serve for 2 years, and 5 shall serve for 1 year.

Any member appointed to fill a vacancy for an unexpired term shall serve for the remainder of such term. Members may serve after the expiration of their terms until their successors have taken office.

Management and support services shall be provided by the Agency for Health Care Policy and Research.

Subcouncil on Outcomes and Guidelines

From the membership of the Council, the Secretary shall establish a Subcouncil on Outcomes and Guidelines. The Secretary shall designate eight of the public members of the Council to serve on the Subcouncil. Six members of the Subcouncil shall be

individuals who are distinguished in the following areas: conduct of research, demonstration projects, and evaluations with respect to health care; the practice of medicine; and health professions. Two members of the Subcouncil shall be individuals who represent consumer interests in health care or who are distinguished in the fields of business, law, ethics, economics, and public policy. In addition to the 8 public members, the membership of the Subcouncil shall include the ex officio Federal representatives required by statute to serve on the Council.

The Subcouncil shall select the Chair from among its members.

Meetings

The Council shall meet not less than once during each discrete four-month period, or more frequently as determined by the Administrator or the Chair. The Chair shall approve the agendas. Meetings shall be open to the public except as determined by the Secretary and notice of meetings shall be given to the public. Meetings shall be conducted and records of the proceedings kept, as required by applicable laws and Departmental regulations.

Compensation

Members who are not full-time Federal employees shall be compensated at a daily rate commensurate with the maximum rate of basic pay for GS-18 of the General Schedule, plus per diem and travel expenses in accordance with standard Government Travel Regulations.

Annual Cost Estimate

Estimated annual cost for operating the Council, including compensation and travel expenses for members but excluding staff support, is \$127,434. The estimate of staff years of support required is 1.5, at an estimated annual cost of \$73,569.

Reports

An annual report shall be submitted to the Secretary no later than January 31 of each year, which shall contain as a minimum a list of members and their business addresses, the committee's

functions, dates and places of meetings, and a summary of committee activities and recommendations made during the fiscal year. A copy of the report shall be provided to the Department Committee Management Officer.

Termination Date

Notwithstanding Section 14(a) of the Federal Advisory Committee Act, the Council shall continue in existence until otherwise provided by law.

APPROVED:

3/22/90
Date

Louis W. Sullivan, M.D.
Louis W. Sullivan, M.D.
Secretary