U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30329-4027

AMENDMENT
to the
CHARTER
of the

ADVISORY COUNCIL FOR THE ELIMINATION OF TUBERCULOSIS

Authority

The Advisory Council for the Elimination of Tuberculosis was established under Section 317E(f) of the Public Health Service Act, [42 U.S.C. §247b-6(f)], as amended. The Council is governed by the provisions of Public Law 92-463, as amended, (5 U.S.C. App.), which sets forth standards for the formation and use of advisory committees.

Objective and Scope of Activities

The Secretary, Department of Health and Human Services (HHS), and by delegation, the Assistant Secretary for Health, HHS and the Director, Centers for Disease Control and Prevention (CDC), are authorized under Sections 301 and 311 of the Public Health Service Act, [42 U.S.C. Sections 241 and 243], as amended to: (1) conduct, encourage, cooperate with, and assist other appropriate public authorities, scientific institutions, and scientists in the conduct of research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases, and other impairments; and (2) assist States and their political subdivisions in preventing and suppressing communicable diseases and other preventable conditions and in promoting health and well-being.

Description of Duties

The Advisory Council for the Elimination of Tuberculosis shall provide advice and recommendations regarding the elimination of tuberculosis to the Secretary, HHS; the Assistant Secretary for Health, HHS; and the Director, CDC. The Council shall make recommendations regarding policies, strategies, objectives, and priorities; address the development and application of new technologies; provide guidance and review on CDC's Tuberculosis Prevention Research portfolio and program priorities; and review the extent to which progress has been made toward eliminating tuberculosis.

Agency or Official to Whom the Council Reports

The Advisory Council for the Elimination of Tuberculosis shall provide advice and recommendations regarding the elimination of tuberculosis to the Secretary, HHS; the Assistant Secretary for Health, HHS; and the Director, CDC.

Support

Management and support services shall be provided by the Office of the Director, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, CDC.

Estimated Annual Operating Costs and Staff Years

Estimated annual cost for operating the Council, including compensation and travel expenses for members, but excluding staff support, is $37,314. Estimate of annual person-years of staff support required is .74, at an estimated annual cost of $90,729.

Designated Federal Officer

CDC will select a fulltime or permanent part-time Federal employee to serve as the Designated Federal Officer (DFO) to attend each Council meeting and ensure that all procedures are within applicable statutory, regulatory, and HHS General Administration Manual directives. The DFO will approve and prepare all meeting agendas, call all of the Council and subcommittee meetings, adjourn any meeting when the DFO determines adjournment to be in the public interest, and chair meetings when directed to do so by the official to whom the Council reports. The DFO or his/her designee shall be present at all meetings of the full Council and subcommittees.

Estimated Number and Frequency of Meetings

Meetings shall be held approximately three times per year at the call of the DFO, in consultation with the Chair.

Meetings shall be open to the public except as determined otherwise by the Secretary, HHS, or other official to whom the authority has been delegated in accordance with the Government in the Sunshine Act (5 U.S.C. §552b(c)) and Section 10(d) of the Federal Advisory Committee Act; notice of all meetings shall be given to the public.

Duration

Continuing

Termination Date

Unless renewed by appropriate action prior to its expiration, the charter of the Advisory Council for the Elimination of Tuberculosis will expire on March 15, 2017, which is two years from the date the initial charter was filed.

Membership and Designation

The Council shall consist of ten voting members including the Chair. Members and the Chair shall be selected by the Secretary from authorities knowledgeable in the fields of public health, epidemiology, immunology, infectious diseases, pulmonary disease, pediatrics, tuberculosis, microbiology, and preventive health care delivery. The Council membership shall also include one member who has had tuberculosis disease or who is the parent of a child who has had tuberculosis disease. Members shall be deemed Special Government Employees.

The Council shall also consist of nonvoting agency representatives from: the Agency for Healthcare Research and Quality; the United States Agency for International Development; the Federal Bureau of Prisons; the Department of Defense; the Department of Homeland Security; the Department of Veterans Affairs; the Food and Drug Administration; the Health Resources and Services Administration; the Indian Health Service; the National Institutes of Health; the National Institute for Occupational Safety and Health; the Occupational Safety and Health Administration, Department of Labor; the Office of Minority Health, Office of the Secretary, Department of Health and Human Services; the Substance Abuse and Mental Health Services Administration; the United States Marshals Service; the United States–Mexico Border Health Commission – United States Section; and such additional officials of the U.S. Government as the Secretary deems necessary for the Council to effectively carry out its function.

The Council shall also include non-voting representatives from the American College of Chest Physicians; the American Lung Association; the American Medical Association; the American Thoracic Society; the Association for Professionals in Infection Control and Epidemiology; the Association of Public Health Laboratories; the Association of State and Territorial Health Officials; the Council of State and Territorial Epidemiologists; the United States – Mexico Border Health Commission – Mexico Section; the Infectious Disease Society of America; the National Association of County and City Health Officials; the National Coalition for the Homeless; the National Commission on Correctional Health Care; the National Medical Association; the National Tuberculosis Controllers Association; the North American Region of the International Union Against Tuberculosis and Lung Disease; Pacific Island Health Officers Association; RESULTS; the Society of Healthcare Epidemiology of America; the STOP TB USA; the Treatment Action Group; the Public Health Agency of Canada; and such other nonvoting representatives from organizations with interests in the prevention and control of tuberculosis as the Secretary deems necessary to effectively carry out the function of the Council. Liaisons shall be deemed representatives.

The ten voting members shall be invited to serve for overlapping terms of up to four years, except that any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of that term. Terms of more than two years are contingent upon the renewal of the Council by appropriate action prior to its termination. A member may serve up to 180 days after the expiration of that member's term if a successor has not taken office.

Subcommittees

Subcommittees composed of members and non-voting representatives of the parent committee may be established with the approval of the Secretary, HHS, or his/her designee. The subcommittees must report back to the parent committee and do not provide advice or work products directly to the agency. The Department Committee Management Officer will be notified upon establishment of each subcommittee and will be provided information on its name, membership, function, and estimated frequency of meetings.

Recordkeeping

The records of the Council, established subcommittees, or other subgroups of the Council, shall be managed in accordance with General Records Schedule 6.2, Federal Advisory Committee Records, or other approved agency records disposition schedule. These records shall be available for public inspection and copying, subject to the Freedom of Information Act, 5 U.S.C. §552.

Filing Date

March 15, 2015

Amendment Filing Date

NOV 0 9 2016

APPROVED:

11/2/16
Date

Director
Management Analysis and Services Office