

2021 Current Fiscal Year Report: National Clinical Care Commission

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1. Department or Agency

Department of Health and Human
Services

2. Fiscal Year

2021

3. Committee or Subcommittee

National Clinical Care Commission

3b. GSA Committee No.

2635

4. Is this New During Fiscal Year? 5. Current Charter 6. Expected Renewal Date 7. Expected Term Date

No 04/03/2020 04/03/2022 09/30/2021

8a. Was Terminated During Fiscal Year?

Yes

8b. Specific Termination Authority

8c. Actual Term Date

09/30/2021

9. Agency Recommendation for Next Fiscal Year

Terminate

10a. Legislation Req to Terminate?

Yes

10b. Legislation Pending?

Enacted

11. Establishment Authority Statutory (Congress Created)

12. Specific Establishment Authority

Public Law 115-80

13. Effective Date

11/02/2017

14. Committee Type

Ad hoc

14c. Presidential?

No

15. Description of Committee National Policy Issue Advisory Board

16a. Total Number of Reports 1

16b. Report Date Report Title

09/30/2021 Report to Congress on Leveraging
Federal Programs to Prevent and
Control Diabetes and Its
Complications

Number of Committee Reports Listed: 1

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

Meetings and Dates

| Purpose | Start | End |
|----------------------------|------------|--------------|
| Discuss report writing | 02/17/2021 | - 02/17/2021 |
| Discuss report writing | 06/01/2021 | - 06/02/2021 |
| Discuss writing the report | 09/08/2021 | - 09/08/2021 |

Number of Committee Meetings Listed: 3

| | Current FY | Next FY |
|---|--------------|---------|
| 18a(1). Personnel Pmts to Non-Federal Members | \$0.00 | \$0.00 |
| 18a(2). Personnel Pmts to Federal Members | \$48,345.00 | \$0.00 |
| 18a(3). Personnel Pmts to Federal Staff | \$270,209.00 | \$0.00 |
| 18a(4). Personnel Pmts to Non-Member Consultants | \$0.00 | \$0.00 |
| 18b(1). Travel and Per Diem to Non-Federal Members | \$0.00 | \$0.00 |
| 18b(2). Travel and Per Diem to Federal Members | \$0.00 | \$0.00 |
| 18b(3). Travel and Per Diem to Federal Staff | \$0.00 | \$0.00 |
| 18b(4). Travel and Per Diem to Non-member Consultants | \$0.00 | \$0.00 |
| 18c. Other(rents,user charges, graphics, printing, mail, etc.) | \$413,140.00 | \$0.00 |
| 18d. Total | \$731,694.00 | \$0.00 |
| 19. Federal Staff Support Years (FTE) | 1.00 | 0.00 |

20a. How does the Committee accomplish its purpose?

The National Clinical Care Commission evaluates and makes recommendations regarding improvements to the coordination and leveraging of programs within the Department and other Federal agencies related to awareness and clinical care for diabetes and its complications. The NCCC accomplishes its purpose by meeting

at least twice, but not more than four times a year to discuss issues, develop recommendations, and prepare reports. Between these public meetings, the committee members work within three subcommittees: prevention in the general population, prevention in the targeted population, and treatment and complications. The work of the subcommittees is presented to the full Commission during the public meetings. In September 2021 the Commission submitted to the Secretary and Congress a final report containing all of the findings and recommendations.

20b. How does the Committee balance its membership?

The Commission consists of 23 voting members. The composition includes eleven ex-officio members and twelve non-federal public members. The ex-officio members consist of the heads of, or subordinate officials designated by the heads of, the following federal departments, agencies, or components: The Centers for Medicare and Medicaid Services, the Agency for Healthcare Research and Quality, the Centers for Disease Control and Prevention, the Indian Health Service, the Department of Veterans Affairs, the National Institutes of Health, the Food and Drug Administration, the Health Resources and Services Administration, the Department of Defense, the Department of Agriculture, and the Office of Minority Health. Of the non-federal members at least one individual is from each of the following categories: physician specialties, including clinical endocrinologists, that play a role in the prevention or treatment of diseases and complications; primary care physicians; non-physician health care professionals; patient advocates; national experts, including public health experts; and health care providers

furnishing services to a patient population that consists of a high percentage (as specified by the Secretary) of individuals who are enrolled in a State plan under title XIX of the Social Security Act or who are not covered under a health plan or health insurance coverage. The members were appointed by the Secretary of Health and Human Services and consideration was given to ensure that there is a broad representation of geographic areas, gender, race, ethnicity, and disability.

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

It is stipulated in the charter that the Commission will meet at least twice and not more than four times a year. The Commission discusses topics and issues that are critical for developing the report that must be submitted to the Secretary and Congress to comply with the authorizing statute. On November 17, 2020 the NCCC held its ninth meeting to summarize stakeholder calls, present revised draft recommendations from the September 2020 meeting, and discuss new recommendations. On February 10, 2021, the NCCC held its tenth meeting to summarize additional stakeholder calls, present revised draft recommendations from the November 2020 meeting, and discuss new recommendations. On June 1 and 11, 2021, the NCCC held its eleventh meeting. During the two-day meeting, subcommittees presented recommendations, discussed changes related to public comment, and highlighted new, revised, consolidated, and deleted recommendations. On September 8, 2021, the NCCC held its twelfth and final meeting to review and vote on the final report to Congress and the Secretary of Health.

20d. Why can't the advice or information this

committee provides be obtained elsewhere?

As of yet, this the only collective body with representation from relevant federal agencies and non-federal diabetes experts that can provide a comprehensive knowledge base to evaluate federal programs that relate to the prevention of diabetes, approaching high-risk populations, and addressing treatment and complications. The National Clinical Care Commission is the first collective effort that includes federal and non-federal members to evaluate federal programs related to diabetes within HHS and selected non-HHS agencies. The Commission is in the process of making recommendations regarding improvements to the coordination and leveraging of programs within the Department and other Federal agencies related to awareness and clinical care for diabetes.

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

Not applicable. There were no closed meetings in FY-21. All meetings of the Commission will be open to the public unless it is determined by the Secretary or designee that a meeting will be closed and/or partially closed because the topics to be discussed are confidential and/or sensitive in nature.

21. Remarks

As stated in the charter, the Commission sunsetted at the end of FY-21.

Designated Federal Officer

Kara Elam Designated Federal Officer

| Committee Members | Start | End | Occupation | Member Designation |
|----------------------|-------|-----|------------|-----------------------|
|----------------------|-------|-----|------------|-----------------------|

| | | | | |
|--------------------|------------|------------|--|--|
| Albright, Ann | 10/31/2018 | 12/18/2020 | Division Director, Division of Diabetes Translation, CDC | Regular Government Employee (RGE) Member |
| Bolen, Shari | 10/31/2018 | 09/30/2021 | Associate Division Director of Internal Medicine, The MetroHealth System | Special Government Employee (SGE) Member |
| Boltri, John | 10/31/2018 | 09/30/2021 | Chair and Professor, Department of Family and Community Medicine, Northeast Ohio Medical University College of Medicine | Special Government Employee (SGE) Member |
| Bullock, Ann | 10/31/2018 | 04/23/2021 | Director, Division of Diabetes Treatment and Prevention, Office of Clinical and Preventive Services, IHS | Regular Government Employee (RGE) Member |
| Chong, William | 10/31/2018 | 09/30/2021 | Acting Deputy Director, Division of Metabolism and Endocrinology Products, Office of New Drugs, Center for Drug Evaluation and Research, FDA | Regular Government Employee (RGE) Member |
| Conlin, Paul | 10/31/2018 | 09/30/2021 | Chief, Medical Service, Veterans Affairs Boston Healthcare System | Regular Government Employee (RGE) Member |
| Cook, William | 10/31/2018 | 09/30/2021 | Chair, Board of Directors, Ascension Medical Group | Special Government Employee (SGE) Member |
| Dokun, Ayotunde | 10/31/2018 | 09/30/2021 | Chief of Endocrine Service, Division of Endocrinology, Diabetes and Metabolism, Regional One Health System | Special Government Employee (SGE) Member |

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|-------------------|------------|------------|---|--|
| Fukagawa, Naomi | 10/31/2018 | 09/30/2021 | Director, Beltsville Human Nutrition Research Center, USDA | Regular Government Employee (RGE) Member |
| Gonzalvo, Jasmine | 10/31/2018 | 09/30/2021 | Clinical Associate Professor, Purdue University College of Pharmacy | Special Government Employee (SGE) Member |
| Greenlee, Carol | 10/31/2018 | 09/30/2021 | Faculty Co-Chair, Center for Medicare and Medicaid Innovation (CMMI) Transforming Clinical Practice Initiative (TCPI) | Special Government Employee (SGE) Member |
| Hawkins, Meredith | 10/31/2018 | 09/30/2021 | Director, Global Diabetes Institute, Albert Einstein College of Medicine | Special Government Employee (SGE) Member |
| Herman, William | 10/31/2018 | 09/30/2021 | Director, Michigan Center for Diabetes Translational Research, University of Michigan | Special Government Employee (SGE) Member |
| Idzik, Shannon | 10/31/2018 | 09/30/2021 | Associate Dean and Professor, Doctor of Nursing Practice Program, University of Baltimore School of Nursing | Special Government Employee (SGE) Member |
| Leake, Ellen | 10/31/2018 | 09/30/2021 | Chair, Juvenile Diabetes Research Foundation (JDRF) International Board of Directors | Special Government Employee (SGE) Member |
| Linder, Barbara | 10/31/2018 | 09/30/2021 | Senior Advisor, Childhood Diabetes Research, National Institute of Diabetes and Digestive and Kidney Diseases, NIH | Regular Government Employee (RGE) Member |
| Lopata, Aaron | 10/31/2018 | 09/30/2021 | Chief Medical Officer, Maternal and Child Health Bureau, Office of the Associate Administrator, HRSA | Regular Government Employee (RGE) Member |

| | | | | |
|----------------------|------------|------------|--|--|
| Marx, Barry | 10/31/2018 | 09/30/2021 | Director, Office of Clinician Engagement, Center for Clinical Standards and Quality, CMS | Regular Government Employee (RGE) Member |
| Schillinger, Dean | 10/31/2018 | 09/30/2021 | Chief, UCSF Division of General Internal Medicine, San Francisco General Hospital | Special Government Employee (SGE) Member |
| Schumacher, Patricia | 12/18/2020 | 09/30/2021 | Chief, Program Implementation Branch, Division of Diabetes Translation, National Center for Chronic Disease Prevention and Health Promotion, CDC | Regular Government Employee (RGE) Member |
| Shell, Donald | 10/31/2018 | 09/30/2021 | Director, Disease Prevention Disease Management and Population Health Policy & Oversight, Office of the Assistant Secretary of Defense for Health Affairs, DoD | Regular Government Employee (RGE) Member |
| Strogatz, David | 10/31/2018 | 09/30/2021 | Director, Center for Rural Community Health, Basset Research Institute | Special Government Employee (SGE) Member |
| Towne, Jana | 04/23/2021 | 09/30/2021 | Nurse Consultant, IHS | Regular Government Employee (RGE) Member |
| Tracer, Howard | 10/31/2018 | 09/30/2021 | Medical Officer, U.S. Preventive Services Task Force Program, Center for Evidence and Practice Improvement, AHRQ | Regular Government Employee (RGE) Member |
| Wu, Samuel | 06/08/2020 | 09/30/2021 | Office of Minority Health | Regular Government Employee (RGE) Member |

Number of Committee Members Listed: 25

Narrative Description

The National Clinical Care Commission Act (NCCA) was passed into law by Congress in November 2017 to establish within the Department of Health and Human Services (HHS) a National Clinical Care Commission Advisory Committee (NCCC or Commission). The Commission will be responsible for evaluating HHS programs that focus on prevention, current activities and gaps in federal efforts to support clinicians in providing integrated care, improvement in federal education and awareness activities related to prevention and treatment, methods for outreach and dissemination of education and awareness materials, and opportunities for consolidation of overlapping federal programs.

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

Checked if
Applies

| | |
|---|-------------------------------------|
| Improvements to health or safety | <input checked="" type="checkbox"/> |
| Trust in government | <input type="checkbox"/> |
| Major policy changes | <input checked="" type="checkbox"/> |
| Advance in scientific research | <input checked="" type="checkbox"/> |
| Effective grant making | <input type="checkbox"/> |
| Improved service delivery | <input checked="" type="checkbox"/> |
| Increased customer satisfaction | <input type="checkbox"/> |
| Implementation of laws or regulatory requirements | <input type="checkbox"/> |
| Other | <input type="checkbox"/> |

Outcome Comments

Not Applicable

What are the cost savings associated with this committee?

Checked if Applies

| | |
|-----------------------|-------------------------------------|
| None | <input type="checkbox"/> |
| Unable to Determine | <input checked="" type="checkbox"/> |
| Under \$100,000 | <input type="checkbox"/> |
| \$100,000 - \$500,000 | <input type="checkbox"/> |

\$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

The duty of NCCC is to gather information about federal programs related to the charge, analyze and evaluate those programs, and provide recommendations to the Secretary and Congress for the coordination and leveraging of programs within HHS and other federal agencies related to awareness and clinical care for diabetes. Cost savings is not among the description of duties of the Commission, and therefore cannot be determined.

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

39

Number of Recommendations Comments

Findings and recommendations were reported in the final report to the Secretary and Congress. The charter stipulates that all findings and recommendations be contained in the final report, which was submitted September 2021.

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

Not Applicable

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

Not Applicable

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

Yes ☒ No ☐ Not Applicable ☐

Agency Feedback Comments

The Commission voted on the final report and recommendations. The final report was released for courtesy clearance to all federal agencies mentioned in the report prior to submission.

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 type="checkbox"/> |

Action Comments

Not Applicable

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

No

Grant Review Comments

Not Applicable

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

Access to information and reports regarding NCCC can be obtained from the DFO or from the ODPHP website (<https://health.gov/hcq/national-clinical-care-commission.asp>).