

# 2022 Current Fiscal Year Report: Advisory Committee on Minority Health

Report Run Date: 02/07/2023 12:46:08 AM

**1. Department or Agency**

Department of Health and Human Services

**2. Fiscal Year**

2022

**3. Committee or Subcommittee**

Advisory Committee on Minority Health

**3b. GSA Committee No.**

5301

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

No 09/17/2021 09/17/2023

**8a. Was Terminated During Fiscal Year?** **8b. Specific Termination Authority** **8c. Actual Term Date**

No

**9. Agency Recommendation for Next Fiscal Year** **10a. Legislation Req to Terminate?** **10b. Legislation Pending?**

Continue Not Applicable Not Applicable

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

**12. Specific Establishment Authority** **13. Effective Date** **14. Committee Type** **14c. Presidential?**

P.L. 105-392 09/11/1999 Continuing No

**15. Description of Committee** National Policy Issue Advisory Board

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

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

**Meetings and Dates**

No Meetings

**Current FY** **Next FY**

<b>18a(1). Personnel Pmts to Non-Federal Members</b>	\$0.00	\$0.00
<b>18a(2). Personnel Pmts to Federal Members</b>	\$0.00	\$14,000.00
<b>18a(3). Personnel Pmts to Federal Staff</b>	\$10,100.00	\$22,000.00
<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	\$105,000.00
<b>18b(3). Travel and Per Diem to Federal Staff</b>	\$0.00	\$3,000.00
<b>18b(4). Travel and Per Diem to Non-member Consultants</b>	\$0.00	\$0.00
<b>18c. Other (rents, user charges, graphics, printing, mail, etc.)</b>	\$0.00	\$50,000.00
<b>18d. Total</b>	\$10,100.00	\$194,000.00
<b>19. Federal Staff Support Years (FTE)</b>	0.05	0.50

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

The Committee gathers and receives information from a variety of sources including expert and public testimony, reports, and other current literature and their own areas of expertise.

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

The Committee is composed of outstanding authorities in the field of minority health, public

health, administration, health professions, policy, financing, and research. The twelve members represent the health interests of the following racial and ethnic minority groups: Blacks/African Americans; Hispanic/Latino Americans; Asian Americans, Native Hawaiians, or other Pacific Islanders; and American Indians/Alaska Natives.

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

The Committee is authorized to meet two times each fiscal year, depending upon the availability of funds. The Committee members discuss issues relevant to improving minority health and health disparities as mandated by the authorizing legislation.

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

Establishment of the Advisory Committee on Minority is mandated under Section 201 of Public Law 105-392. The Advisory Committee on Minority Health was established by the Secretary on September 17, 1999, to advise and make recommendations on the development of goals and specific program activities designed to improve the health status of racial and ethnic minority populations. The disparities in the burden of death and illness experienced by Blacks/African Americans; Hispanic/Latino Americans; Asian Americans, Native Hawaiians, or Pacific Islanders; and American Indians/Alaska Natives, as compared to the U.S. population as a whole persist and in many areas continue to widen. The ACMH serves as an important advisory tool that is utilized by the Department. The advice and recommendations made by the Committee assist with development of departmental efforts to eliminate health disparities in racial and ethnic

minority populations.

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

The meetings are open to the public.

**21. Remarks**

No meetings were held during FY 2022 as the Committee was working on filling the vacancies and did not have a balanced representation. The vacancies should be filled in first second quarter of CY 2023.

**Designated Federal Officer**

Samuel Wu Designated Federal Officer

<b>Committee Members</b>	<b>Start</b>	<b>End</b>	<b>Occupation</b>	<b>Member Designation</b>
Daniels, Sheri-Ann	06/12/2019	06/11/2023	Executive Director, Papa Ola Lokahi	Special Government Employee (SGE) Member
Garcia, Raul	06/06/2019	06/05/2023	Professor and Chair, Boston U Henry M Goldman School of Dental Medicine	Special Government Employee (SGE) Member
Parker, Veronica	07/24/2018	07/23/2022	Professor, SON, College of Behavioral, Social and Health Sciences and Director, Center for Research on Health Disparities	Special Government Employee (SGE) Member
Vital, Veronica	06/13/2019	06/12/2023	Clinical Asst Professor, College of Nursing, University of Arizona	Special Government Employee (SGE) Member
Wisdom, Kimberlydawn	08/14/2019	08/13/2023	Sr. Vice President, Community Health & Equity, Chief Wellness & Diversity Officer, Henry Ford Health System	Special Government Employee (SGE) Member

			Vice Dean,	
			Diversity &	
			Inclusion,	
			Northwestern	Special
			University	Government
Yancy, Clyde	02/13/2019	02/12/2023	Feinberg School	Employee
			of Medicine and	(SGE)
			Associate	Member
			Director, Bluhm	
			Cardiovascular	
			Institute	

**Number of Committee Members Listed: 6**

**Narrative Description**

Despite modest improvements in minority health in recent years, several health conditions and health service areas continue to be stagnant or have a wider gap of disparity among the racial and ethnic (r/e) minorities. The Office of Minority Health strives to improve the health of r/e minority populations where disparities exist through the development of health policies, goals, and programs that will implement collaborative strategies and also promote the National CLAS Standards. ACMH's charge is to provide guidance to the Deputy Assistance Secretary for Minority Health on the development of policies, programs and practices that help to eliminate racial and ethnic health disparities in selected areas identified by the HHS Secretary, ASH and OMH and develop actionable recommendations for OASH and other HHS agencies striving for equitable health. ACMH's actionable recommendations often include culturally appropriate program activities, such as, but not limited to, supporting research, evaluation, and strengthening elements and reaching hard-to-reach populations with improved sub-population health data collection and analysis, for improving the health of r/e minority groups.

**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**

NA

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

98

**Number of Recommendations Comments**

There were six recommendations from the meeting in FY 2020 on preventive services utilization. These recommendations were approved in FY 2021 and are reflected in the total number of recommendations at 98.

**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**

Zero recommendations were fully implemented during FY 2021 due to resource limitations or need of coordinated actions by other HHS divisions. However, they will continued to be evaluated for implementation as resources become available.

**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**

A few of the recommendations from the ending HIV epidemic and preventive services utilization were used to develop projects and/or incorporated into other OMH initiatives.

**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 DFO communicates with the ACMH Chair. This information is provided to the other members and the public at full committee meetings. Information about Committee-related matters also can be obtained on the OMH/Advisory Committee website, which is managed by the OMH Division of Information and Education (DIE).

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

Checked if Applies

- Reorganized Priorities
- Reallocated resources
- Issued new regulation
- Proposed legislation
- Approved grants or other payments
- Other

**Action Comments**

NA

**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
- Online Agency Web Site
- Online Committee Web Site
- Online GSA FACA Web Site
- Publications
- Other

**Access Comments**

N/A