### 2025 Current Fiscal Year Report: Advisory Committee on Minority Health

Report Run Date: 07/12/2025 05:52:49 AM

1. Department or Agency 2. Fiscal Year

Department of Health and Human

Services

2025

3b. GSA Committee 3. Committee or Subcommittee

No.

Advisory Committee on Minority

Health

5301

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

No 09/17/2023 09/17/2025

8b. Specific 8a. Was Terminated During 8c. Actual Termination FiscalYear? Term Date Authority

No

9. Agency 10b.

10a. Legislation **Recommendation for Next** Legislation Reg to Terminate? **FiscalYear** Pending?

Continue Not Applicable Not Applicable

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

12. Specific 13. 14.

14c. Establishment Effective Commitee Presidential?

Authority Date **Type** 

P.L. 105-392; 42 U.S.C.

09/11/1999 Continuing No 300u-6

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

Board

16a. Total Number of

No Reports for this FiscalYear

Reports

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

**Meetings and Dates** 

No Meetings

	<b>Current Next</b>	
	FY	FY
18a(1). Personnel Pmts to	\$0.0	00\$0.00
Non-Federal Members	ψ0.0	λο ψο.σο
18a(2). Personnel Pmts to	\$0.0	00\$0.00
Federal Members	ψ0.0	λο ψο.σο
18a(3). Personnel Pmts to	\$0.0	00\$0.00
Federal Staff	ψ0.0	λο ψο.σο
18a(4). Personnel Pmts to	\$0.0	00\$0.00
Non-Member Consultants	ΨΟ.	λο ψο.σσ
18b(1). Travel and Per Diem to	\$0.0	00\$0.00
Non-Federal Members	ΨΟ.	λο ψο.σσ
18b(2). Travel and Per Diem to	\$0.0	00\$0.00
Federal Members	ΨΟ.	λο ψο.σσ
18b(3). Travel and Per Diem to	\$0.0	00\$0.00
Federal Staff	φοιν	<i>γ</i> ο φο.σο
18b(4). Travel and Per Diem to	\$0.0	00\$0.00
Non-member Consultants	ΨΟιν	, σ φσ.σσ
18c. Administrative Costs (FRNs,	İ	
contractor support,	\$0.0	00\$0.00
In-person/hybrid/virtual	•	, , , , , , , , , , , , , , , , , , , ,
meetings)		
18d. Other (all other funds not		
captured by any other cost	\$0.0	00\$0.00
category)		
18e. Total Costs	\$0.0	00\$0.00
19. Federal Staff Support Years	0.0	0.00
(FTE)	3.1	

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

The Committee identifies a specific subject or focus to be addressed. 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. From there, the Committee synthesizes a set of recommendations addressing the

identified issue and submits them to the Director of the Office of Minority Health.

# 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 up to four 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 morbidity and mortality 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

One open meeting was held during FY 2024. The Committee was composed of four existing members who were on an extension and awaiting IOS approval for re-appointment plus seven members (total # of ACMH members: 11) who were sworn-in at the February 13-14, 2024 ACMH meeting. Therefore, the 12th slate was vacant at the meeting as the nominee was awaiting IOS approval so at his time, the Committee did not have a balanced representation. Post-meeting, the 12th member was approved by the Secretary on June 14, 2024 and the reappointment of the four existing members was not approved. To fill the four vacant slates, four qualified nominees were submitted and received IOS approval on August 20, 2024. The five approved nominees will be sworn-in as ACMH members in FY 2025. November 14 2024, and the Committee shall equally represent the racial and ethnic minority groups.

### **Designated Federal Officer**

Violet Ryo-Hwa Woo Designated Federal Officer

Committee Start End Occupation Member Designation

Aitaoto, Nia	11/14/2024	11/13/2028	Interim Executive Director National Association of Pasifika Organizations; Senior Lead Association of Asian Pacific Health Organizations Center of Primary Care Excellence; Adjunct Associate Professor Department of Native Hawaiian Health University Fred Eshelman Distinguished	Special Government Employee (SGE) Member
Bell, Ronny	02/13/2024	02/12/2028	Professor and Chair, Division of Pharmaceutical Outcomes & Policy, Eshelman School of Pharmacy, UNC, Center for Health Promotion & Disease Prevention	
Bharmal, Nazleen	02/13/2024	02/12/2028	Associate Professor of Medicine, Health Equity & Evaluation, Value Strategy, Cleveland Clinic	Government
Davis, Michellene	02/13/2024	02/12/2028	President & CEO, National Medical Fellowships	Special Government Employee (SGE) Member
Emmett, Susan	02/13/2024	02/12/2028	Director, Center for Hearing Health Equity, Associate Professor of Otolaryngology & Epidemiology, Dept. of Otolaryngology - Head & Neck Surgery, College of Medicine, Dept. of Epidemiology, College of PH, University of Arkansas for Medical Sciences	Government Employee

Jih, Jane	02/13/2024	02/12/2028	Associate Professor of Medicine Division of General Internal Medicine, Co-Director of Multiethnic Health Equity Research Center, Co-Director of Asian American Research on Health, University of CA, San Francisco	Special Government Employee (SGE) Member
Newell-Harris, Glenda	02/13/2024	02/12/2028	Regional Medical Director, Corizon Health, Inc.	Special Government Employee (SGE) Member
Perez, G.	11/14/2024	11/13/2028	Anthony Buividas Term Chair in Gerontology Associate Professor of Nursing, Senior Fellow Leonard Davis Institute of Health Economics, University of Pennsylvania, School of Nursing	Special Government Employee (SGE) Member
Salinas, Jonathan	11/14/2024	11/13/2028	Otolaryngology Consultant Ears, Nose and Throat Consultants of Nevada	Special Government Employee (SGE) Member
Sanchez, Katherine	11/14/2024	11/13/2028	Director, Patient and Community Engaged Research (PACER), Center Baylor Scott and White Research Institute	Special Government Employee (SGE) Member
Scott, Michele	02/13/2024	02/12/2028	Tribal Councilor, Mashantucket Pequot Tribal Nation	Special Government Employee (SGE) Member
Watson, Karol	11/14/2024	11/13/2028	Professor of Medicine/Cardiology and John C. Mazziotta Endowed Chair in Medicine, Geffen School of Medicine, UCLA	Government

**Number of Committee Members Listed: 12** 

### **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**

### 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 <u>Number</u> of recommendations produced by this committee for the life of the committee?

98

#### **Number of Recommendations Comments**

There is no increase in the number of recommendations thus fisal year. The FY 2024 Recommendations Report was not posted during FY 2024 but is planned to be posted during the first quarter in FY 2025.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Fully</u> implemented by the agency?

### % of Recommendations Fully Implemented Comments

Zero recommendations were fully implemented during FY 2024 due to resource limitations or need of coordinated actions by other HHS divisions. However, they will continue to be evaluated for implementation as resources become available.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Partially</u> implemented by the agency?

### % of Recommendations Partially Implemented Comments

A few of the recommendations from preventive services utilization to reduce racial and ethnic helath disparites, included thoses related to social determinents of health, were partially included when developing projects and/or other OMH initiatives.

	• , .	nendations or advic	ee with reedback regarding actions taken to
Yes 🗹		Not Applicable	o oncrea:
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Agency F	eedback	Comments	
The DFO	communic	cates issues affecting	the Committee's framework and operations with
the ACMH	l Chair. Th	ne leadership guides	the Committee members and and registerd public
		<del>-</del>	n about Committee-related matters also can be
			ee website, which is managed by the OMH
Division o	f Informat	on and Education (D	IE).
What oth	er actions	s has the agency tal	ken as a result of the committee's advice or
recomme	endation?		
			Checked if Applies
Reorganiz			
Reallocate			
Issued ne	•		
Proposed	J		
	grants or	other payments	
Other			
Action Co	omments		
NA			
le the Co			over of applications for grouts?
No No	mmilee e	ingaged in the revie	ew of applications for grants?
Grant Rev	view Com	nments	
How is ac	cess pro	vided to the informa	ation for the Committee's documentation?
			Checked if Applies
Contact D	FO		
Online Ag	jency Web	Site	

Online Committee Web Site	
Online GSA FACA Web Site	✓
Publications	
Other	

## **Access Comments**

N/A