

2017 Current Fiscal Year Report: Advisory Group on Prevention, Health Promotion, and Integrative and Public Health

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| | | | |
|---|---|----------------------------------|------------------------------|
| 1. Department or Agency | | | 2. Fiscal Year |
| Department of Health and Human Services | | | 2017 |
| 3. Committee or Subcommittee | | | 3b. GSA Committee No. |
| Advisory Group on Prevention, Health Promotion, and Integrative and Public Health | | | 73649 |
| 4. Is this New Fiscal Year? | 5. Current Charter | 6. Expected Renewal Date | 7. Expected Term Date |
| No | 01/18/2017 | 01/18/2019 | 09/30/2017 |
| 8a. Was Terminated During Fiscal Year? | 8b. Specific Termination Authority | 8c. Actual Term Date | |
| Yes | EO 13708, dated 9/30/2015 | 09/30/2017 | |
| 9. Agency Recommendation for Next Fiscal Year | 10a. Legislation Req to Terminate? | 10b. Legislation Pending? | |
| Terminate | No | Not Applicable | |
| 11. Establishment Authority | Presidential | | |
| 12. Specific Establishment Authority | 13. Effective Date | 14. Committee Type | 14c. Presidential? |
| E.O. 13544 as statutorily mandated under Section 4001 of P.L. 111-148; re-established by EO 13631 | 12/07/2012 | Continuing | Yes |
| 15. Description of Committee | National Policy Issue Advisory Board | | |
| 16a. Total Number of Reports | No Reports for this Fiscal Year | | |

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

Meetings and Dates

No Meetings

| | Current FY | Next FY |
|---|-----------------------|--------------------|
| 18a(1). Personnel Pmts to Non-Federal Members | \$0.00 | \$0.00 |
| 18a(2). Personnel Pmts to Federal Members | \$0.00 | \$0.00 |
| 18a(3). Personnel Pmts to Federal Staff | \$12,000.00 | \$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.) | \$0.00 | \$0.00 |
| 18d. Total | \$12,000.00 | \$0.00 |
| 19. Federal Staff Support Years (FTE) | 0.10 | 0.00 |

20a. How does the Committee accomplish its purpose?

In carrying out its mission, the Advisory Group provided advice and assistance to the National Prevention, Health Promotion, and Public Health Council (the Council). The Advisory Group developed policy and program recommendations and advised the Council on lifestyle-based chronic disease prevention and management, integrative

health care practices, and health promotion.

20b. How does the Committee balance its membership?

The Advisory Group was authorized to have not more than 25 non-Federal members. The Advisory Group currently consists of 20 members. The Advisory Group has a diverse composition of licensed health professionals, including integrative health practitioners, who have expertise in worksite health promotion; community services, including community health centers; preventive medicine; health coaching; public health education; geriatrics; and rehabilitation medicine.

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

The Advisory Group met, at a minimum, two times a year; at least one face-to-face meeting is held, depending on the availability of funds. The Designated Federal Officer (DFO) schedules and approves all meetings of the Advisory Group. The DFO also prepares all meeting agendas in collaboration with leadership of the Advisory Group. However, the Advisory Group did not meet in 2017 since the new Presidential Administration did not seek guidance from this Committee.

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

Establishment of the Advisory Group was statutorily mandated under Section 4001 of the Patient Protection and Affordable Care Act, Public Law 111-148, dated March 23, 2010. The diverse group of professionals does not provide advice or recommendations to any single, specific agency/department; the Advisory Group provides valuable insight to the 20 Federal departments that comprise the Council.

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

The Advisory Group has held no closed meetings. Advisory Group meetings will only be closed or partially closed to the public when it is determined necessary by the Secretary or other official to whom authority has been delegated in accordance with stipulations of Government in the Sunshine Act, 5 U.S.C. 552b(c).

21. Remarks

The Advisory group posted their final legacy report to the incoming administration on the Surgeon General's website in 2017.

<https://www.surgeongeneral.gov/priorities/prevention/advisorygrp/2016-12-20-fulfilling-the-legacy>

The committee did not meet in FY-2017 even though a new member was brought on (Dave Choski) before the Administration change. The committee expended minimal funds and the charter expired on 9/30/2017.

Designated Federal Officer

Brigette Finkelstein Ulin Senior Advisor, Office of the Associate Director for Policy; Centers for Disease Control and Prevention

| Committee Members | Start | End | Occupation | Member Designation |
|-------------------|------------|------------|---|---|
| Bigby, JudyAnn | 01/27/2011 | 09/30/2017 | Mathematica Policy Research | Special Government Employee (SGE) Member Special |
| Binder, Richard | 05/24/2011 | 09/30/2017 | Virginia Commonwealth University | Government Employee (SGE) Member Special |
| Brown, Valerie | 01/27/2011 | 09/30/2017 | Former Supervisor, Sonoma County Government, CA (Retired) | Government Employee (SGE) Member |

| | | | | |
|------------------------|------------|------------|--|--|
| Chokshi, Dave | 01/09/2017 | 09/30/2017 | New York City Health and Hospitals Corporation | Special Government Employee (SGE) Member |
| Helms, Ned | 01/27/2011 | 09/30/2017 | New Hampshire Institute of Health Policy and Practice | Special Government Employee (SGE) Member |
| Johansson, Patrik | 04/08/2011 | 09/30/2017 | University of Nebraska | Special Government Employee (SGE) Member |
| Johnson, Jerry | 11/21/2011 | 09/30/2017 | Heffler-Radetick & Saitta, LLP | Special Government Employee (SGE) Member |
| Kahn, Janet | 10/28/2011 | 09/30/2017 | Principal Investigator, Mission Reconnection, Research Assistant Professor, Dept. of Psychiatry, University of Vermont College of Medicine | Special Government Employee (SGE) Member |
| Kerr, Charlotte | 01/27/2011 | 09/30/2017 | Maryland University of Integrative Health | Special Government Employee (SGE) Member |
| Levi, Jeffrey | 01/27/2011 | 09/30/2017 | The George Washington University | Special Government Employee (SGE) Member |
| Lozada, Jacob | 11/21/2011 | 09/30/2017 | AARP | Special Government Employee (SGE) Member |
| Mayer-Davis, Elizabeth | 01/27/2011 | 09/30/2017 | Gillings School of Global Public Health, University of North Carolina | Special Government Employee (SGE) Member |

| | | | | |
|-------------------------|------------|------------|---|--|
| Ornish, Dean | 11/21/2011 | 09/30/2017 | Prevention Medicine Research Institute, University of California | Special Government Employee (SGE) Member |
| Otto, Barbara | 01/27/2011 | 09/30/2017 | Health and Disability Advocates | Special Government Employee (SGE) Member |
| Palacio, Herminia | 11/21/2011 | 01/19/2017 | New York Deputy Mayor for Health and Human Services | Special Government Employee (SGE) Member |
| Rosenstock, Linda | 01/27/2011 | 09/30/2017 | UCLA School of Public Health | Special Government Employee (SGE) Member |
| Seffrin, John | 01/27/2011 | 09/30/2017 | Retired: American Cancer Society | Special Government Employee (SGE) Member |
| Semonoff, Ellen | 04/08/2011 | 09/30/2017 | Department of Human Service Programs | Special Government Employee (SGE) Member |
| Swider, Susan | 01/27/2011 | 09/30/2017 | College of Nursing, Rush University | Special Government Employee (SGE) Member |
| Van Horn, Sharon | 01/27/2011 | 09/30/2017 | Medicine Pediatrics | Special Government Employee (SGE) Member |
| Wisdom, Kimberlydawn | 02/10/2012 | 09/30/2017 | Henry Ford Health System | Special Government Employee (SGE) Member |

Number of Committee Members Listed: 21

Narrative Description

Establishment of the Advisory Group was statutorily mandated under the Patient Protection and Affordable Care Act, Public Law 111-148. The Advisory Group was established to provide

assistance to the National Prevention, Health Promotion, and Public Health Council (the Council) in carrying out its mission. The Advisory Group shall develop policy and program recommendations and advise the Council on lifestyle-based chronic disease prevention and management, integrative health care practices, and health promotion. In conjunction with its objectives and to support the mission of the Council, the Advisory Group may develop policy and program recommendations and provide advice to the Council on (1) prevention, wellness and health promotion practices, the public health system, and integrative health care in the United States; (2) implementation of the national prevention, health promotion, public health, and integrative health care strategy that incorporates the most effective and achievable means of improving the health status of Americans and reducing the incidence of preventable illness and disability in the United States; (3) the most pressing health issues confronting the United States and changes in federal policy to achieve national wellness, health promotion, and public health goals, including the reduction of tobacco use, sedentary behavior, and poor nutrition; and (4) proposed evidence-based models, policies, and innovative approaches for the promotion of transformative models of prevention, integrative health, and public health on individual and community levels across the United States.

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

Not Applicable

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

Not Applicable

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

44

Number of Recommendations Comments

The Advisory Group provided policy and program recommendations to the Council. Recommendations were provided in the form of a legacy report that was completed in late 2016 and posted on the web in January 2017. The report provides information about the successes and value of the Council, the Advisory Group, and the National Prevention Strategy. The Advisory Group submitted the report Surgeon General Murthy to share with the incoming Administration. The report is available at <https://www.surgeongeneral.gov/priorities/prevention/advisorygrp/2016-12-20-fulfilling-the-legacy>

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

58%

% of Recommendations Fully Implemented Comments

Approximately 60% of recommendations to the Council have been implemented including

establishing focused cross-departmental community health initiatives and health care transformation efforts. The legacy report (mentioned above) includes additional information about the recommendations and includes success stories.

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

33%

% of Recommendations Partially Implemented Comments

33% of the recommendations submitted to the Council (20 Federal Departments) have been partially implemented resulting in increased communication regarding the National Prevention Strategy in communities and a better dialogue between the National Prevention Council, the Surgeon General, and the Advisory Group. The legacy report (mentioned above) includes additional information about the recommendations and includes success stories.

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

Yes No Not Applicable

Agency Feedback Comments

Not Applicable

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

In keeping with its mission, the Advisory Group provided advice to the National Prevention Council on the National Prevention Strategy recommendations.

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

No

Grant Review Comments

The Advisory Group does not have any grant-making authority.

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 type="checkbox"/> |
| Online GSA FACA Web Site | <input checked="" type="checkbox"/> |
| Publications | <input type="checkbox"/> |
| Other | <input type="checkbox"/> |

Access Comments

Information on activities of the Advisory Group will be made available to the public through the designated points of contact and on the Surgeon generals website
<http://www.surgeongeneral.gov/priorities/prevention/advisorygrp/index.html>