



## CHARTER

### ADVISORY COMMITTEE ON TRAINING IN PRIMARY CARE MEDICINE AND DENTISTRY

1. Committee's Official Designation: The Committee shall be known as the Advisory Committee on Training in Primary Care Medicine and Dentistry (ACTPCMD or "Advisory Committee").
2. Authority: ACTPCMD is required by Title VII, Part C, section 749 (42 U.S.C. 293I) of the Public Health Service (PHS) Act. The Advisory Committee is governed by provisions of the Federal Advisory Committee Act (FACA) of 1972 (5 U.S.C. Appendix 2), as amended, which sets forth standards for the formation and use of advisory committees.
3. Objectives and Scope of Activities: The Advisory Committee provides advice and recommendations on policy and program development to the Secretary of the Department of Health and Human Services (Secretary) concerning the activities under Title VII, Part C, section 747 of the PHS Act, and is responsible for preparing and submitting an annual report to the Secretary and Congress describing the activities of the Committee, including findings and recommendations made by the Committee concerning activities under section 747. In addition, the Advisory Committee develops, publishes, and implements performance measures and longitudinal evaluations for programs under Part C of Title VII of the PHS Act, as well as recommends appropriation levels for programs under this part.
4. Description of Duties: The Advisory Committee shall:
  - (1) provide advice and recommendations to the Secretary concerning policy and program development and other matters of significance concerning medicine and dentistry activities under section 747 of the PHS Act, as it existed upon the enactment of Section 749 of the PHS Act in 1998;
  - (2) prepare and submit to the Secretary; the Committee on Health, Education, Labor and Pensions of the Senate; and the Committee on Energy and Commerce of the House of Representatives, an annual report describing the activities of the Advisory Committee, including findings and recommendations made by the Committee concerning medicine and dentistry activities under section 747 of the PHS Act, as it existed upon the enactment of Section 749 of the PHS Act in 1998;
  - (3) develop, publish, and implement performance measures for programs under Part C of Title VII of the PHS Act;

- (4) develop and publish guidelines for longitudinal evaluations (as described in section 761(d)(2) (42 U.S.C. 294n(d)(2)) for programs under Part C of Title VII of the PHS Act; and
- (5) recommend appropriation levels for programs under Part C of Title VII of the PHS Act.
5. Agency or Official to Whom the Committee Reports: The Advisory Committee provides advice and recommendations to the Secretary. The Advisory Committee prepares and submits annual reports to the Secretary; the Committee on Health, Education, Labor and Pensions of the Senate; and the Committee on Energy and Commerce of the House of Representatives.
6. Support: Management and support services are provided by the Bureau of Health Workforce of the Health Resources and Services Administration (HRSA).
7. Estimated Annual Operating Cost Estimates and Staff Years: The estimated annual cost for operating the Advisory Committee, including compensation and travel expenses for members but excluding staff support is \$65,860. Estimated staff support required is 1.32 FTE years at an estimated annual cost of \$210,551.
8. Designated Federal Officer: A full-time or permanent part-time federal employee, appointed in accordance with Agency procedure, will serve as the Designated Federal Official (DFO) (or designee) and ensure that all procedures are within applicable statutory, regulatory, and HHS General Administration Manual directives. The DFO (or designee) approves and prepares all meeting agendas, calls all Advisory Committee and subcommittee meetings, attends all committee and subcommittee meetings, adjourns any meeting when the DFO (or designee) determines adjournment to be in the public interest, and chairs meetings when directed to do so by the Secretary.
9. Estimated Number and Frequency of Meetings: The Advisory Committee shall meet not less than two times each calendar year. Each meeting must be called or approved by the DFO. Such meetings shall be held jointly with other related entities established under Title VII of the PHS Act where appropriate. Meetings shall be open to the public except as determined otherwise by the Secretary or designee in accordance with the Government in the Sunshine Act (5 U.S.C. 552b(c)) and the FACA of 1972 (5 U.S.C. Appendix 2). Notice of all meetings shall be given to the public. Meetings shall be conducted, and records of the proceedings kept, as required by applicable laws and departmental regulations.
10. Duration: Continuing.
11. Termination: Unless renewed by appropriate action prior to its expiration, the charter for the Advisory Committee will expire two years from the date the charter is filed.
12. Membership and Designation: The Advisory Committee consists of 17 members appointed by the Secretary for a term of three years. The Secretary shall appoint the

members from among individuals who are health professionals. In making such appointments, the Secretary shall ensure a fair balance between the health professions, making sure that at least 75 percent of the members of the Advisory Committee are health professionals, a broad geographic representation of members, and a balance between urban and rural members. The Secretary shall ensure the adequate representation of women and minorities. Members shall be appointed based on their competence, interest, and knowledge of the mission of the profession involved. Members on the advisory committee may include, but are not limited to, representatives from the disciplines of allopathic medicine; osteopathic medicine; family medicine; general internal medicine; general pediatrics; general dentistry; pediatric dentistry; public health dentistry; dental hygiene; physician assistant; advanced practice nursing; and students, residents, or fellows representing allopathic medicine, osteopathic medicine, physician assistant, or dentistry. Members are appointed as Special Government Employees. A quorum is a majority of the members who have been appointed to the Advisory Committee.

13. Subcommittees: Standing and ad hoc subcommittees, composed of members of the parent committee, may be established with approval of the Secretary or designee to perform specific functions within the Advisory Committee's jurisdiction. Subcommittees must report back to the parent Advisory Committee, and do not provide advice or work products directly to the Department or HRSA. The Department's Committee Management Officer will be notified upon the establishment of each subcommittee and will be provided information on the subcommittee's name, membership, function, and estimated frequency of meetings.
14. Recordkeeping: Records of the Advisory Committee, formally and informally established subcommittees, or other subgroups of the Advisory Committee, shall be handled in accordance with General Records Schedule 6.2, 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.

15. Filing Date  
**MAR 24 2019**

Approved:  
**MAR 20 2019**

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Date

/s/ George Sigounas  
George Sigounas, MS, Ph.D.  
Administrator, Health Resources and Services  
Administration