



Billing Code 4160-90-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

NATIONAL ADVISORY COUNCIL FOR HEALTHCARE RESEARCH AND QUALITY: REQUEST FOR NOMINATIONS FOR PUBLIC MEMBERS

AGENCY: Agency for Healthcare Research and Quality (AHRQ), HHS.

ACTION: Notice of request for nominations for public members

SUMMARY: The Council advises the Secretary of HHS (Secretary) and the Director of the Agency for Healthcare Research and Quality (AHRQ) on matters related to activities of the Agency to carry out its mission. AHRQ's mission is to produce evidence to make health care safer, higher quality, more accessible, equitable, and affordable, and to work within the U.S. Department of Health and Human Services and with other partners to make sure that the evidence is understood and used. Seven current members' terms will expire in November 2017

DATES: Nominations should be received on or before 60 days after date of publication.

ADDRESSES: Nominations should be sent to Jaime Zimmerman AHRQ, 5600 Fishers Lane, 06E37A, Rockville, Maryland 20857. Nominations may also be e-mailed to NationalAdvisoryCouncil@ahrq.hhs.gov.

FOR FUTURE INFORMATION CONTACT: Jaime Zimmerman, AHRQ, at (301) 427-1456.

SUPPLEMENTARY INFORMATION: 42 U.S.C. 299c establishes a National Advisory Council for Healthcare Research and Quality (the Council) and provides that the Secretary shall appoint to the National Advisory Council for Healthcare Research and Quality twenty one appropriately qualified individuals. At least seventeen members shall be representatives of the

public and at least one member shall be a specialist in the rural aspects of one or more of the professions or fields listed in the above summary. In addition, the Secretary designates, as ex officio members, representatives from other Federal agencies, principally agencies that conduct or support health care research, as well as Federal officials the Secretary may consider appropriate. 42 U.S.C. 299c(c)(3). Consistent with revised guidance regarding the ban on lobbyists serving as members of advisory boards and commissions, AHRQ will accept nominations for Federally registered lobbyists to serve on the Council in a representative capacity.

The Council meets in the Washington, D.C., metropolitan area, generally in Rockville, Maryland, approximately three times a year to provide broad guidance to the Secretary and AHRQ's Director on the direction of and programs undertaken by AHRQ.

Seven individuals will be selected by the Secretary to serve on the Council beginning with the meeting in the spring of 2018. Members generally serve 3-year terms. Appointments are staggered to permit an orderly rotation of membership. To fill these positions, we are seeking individuals with experience and success in (1) the conduct of research, demonstration projects, and evaluations with respect to health care; (2) the fields of health care quality research or health care improvement; (3) the practice of medicine; (4) other health professions; (5) representing the private health care sector (including health plans, providers, and purchasers) or administrators of health care delivery systems; (6) the fields of health care economics, information systems, law, ethics, business, or public policy; and, (7) representing the interests of patients and consumers of health care.

Interested persons may nominate one or more qualified persons for membership on the Council. Self-nominations are accepted. Nominations shall include: (1) a copy of the nominee's resume or curriculum vitae; and (2) a statement that the nominee is willing to serve as a member of the Council. Selected candidates will be asked to provide detailed information concerning their financial interests, consultant positions and research grants and contracts, to permit evaluation of possible sources of conflict of interest. Please note that once a candidate is nominated, AHRQ may consider that nomination for future positions on the Council.

The Department seeks a broad geographic representation. In addition, AHRQ conducts and supports research concerning priority populations, which include: low-income groups; minority groups; women; children; the elderly; and individuals with special health care needs, including individuals with disabilities and individuals who need chronic care or end-of-life health care. See 42 U.S.C. 299(c). Nominations of persons with expertise in health care for these priority populations are encouraged.

Sharon B. Arnold
Deputy Director

[FR Doc. 2017-13396 Filed: 6/26/2017 8:45 am; Publication Date: 6/27/2017]