



**C H A R T E R**  
**of the**  
**BOARD OF SCIENTIFIC COUNSELORS**  
**NATIONAL CENTER FOR HEALTH STATISTICS**

**Authority**

The Board of Scientific Counselors (Board), National Center for Health Statistics (NCHS), was established under Section 222 of the Public Health Service Act, [42 U.S.C. §217a], as amended. The Board is governed by the provisions of the Federal Advisory Committee Act, as amended, (5 U.S.C. App.), which sets forth standards for the formation and use of advisory committees.

**Objective and Scope of Activities**

The Secretary is authorized under Section 306 of the Public Health Service Act, [42 U.S.C. §242(k)], as amended to: (1) conduct and support statistical and epidemiological activities for the purpose of improving the effectiveness, efficiency, and quality of health services in the United States (including collecting statistics: on the extent and nature of illness and disability of the population, as well as life expectancy, incidence of various acute and chronic illnesses, and infant and maternal morbidity and mortality; the impact of illness and disability of the population on the economy of the U.S. and on other aspects of the well-being of its population; environmental, social, and other health hazards; determinants of health; health resources, including physicians, dentists, nurses, and other health professionals, by specialty and type of practice and the supply of services by hospitals, extended care facilities, home health agencies, and other health institutions; utilization of health care, both ambulatory health services and services of hospitals, extended care facilities, home health agencies, and other institutions; health care costs and financing, including trends in health care prices and cost, sources of payments for health care services, and federal, state, and local governmental expenditures for health care services; family formation, growth, and dissolution); (2) undertake and support research, demonstrations, and evaluations respecting new or improved methods for obtaining current data on matters pertaining to the activities described in (1) above; (3) conduct epidemiological research, demonstrations, and evaluations on matters described in (1) above; (4) collect, furnish, tabulate, and analyze statistics and prepare studies on matters described in (1) above upon request of public and nonprofit private entities; (5) provide technical assistance to assist state and local jurisdictions in the development of model laws dealing with issues of confidentiality and comparability of data; (6) cooperate and consult with public and nonprofit entities to carry out its mandate; and (7) provide to public and nonprofit private entities technical assistance in the effective use of statistics collected or compiled by the Center.

### **Description of Duties**

The Board, NCHS shall provide advice and make recommendations to the Secretary, Department of Health and Human Services (HHS); the Director, Centers for Disease Control and Prevention (CDC); and the Director, NCHS, regarding the scientific and technical program goals and objectives, strategies, and priorities of NCHS. The Board shall provide advice and guidance on statistical and epidemiological research and activities that focus on issues such as: determinants of health; extent and nature of illness and disability, including life expectancy; incidence of various acute and chronic illnesses/impairments and accidental injuries; prevalence of chronic diseases and impairments; infant and maternal morbidity and mortality; nutrition status; environmental, social and other hazards affecting health status; health resources associated with physician and dental visits, hospitalizations, nursing, extended care facilities, home health agencies, and other health institutions; utilization of health care in a broad array of settings; trends in prices/costs and sources of payments; federal, state and local government expenditures for health care services; the relationship between demographic and socioeconomic characteristics and health characteristics; family formation, growth, and dissolution; new or improved methods for obtaining current data on the aforementioned factors; data security and confidentiality and comparability of data; and standardized means to collect information and statistics.

Additionally, the Board makes recommendations about opportunities for NCHS programs to examine and employ new approaches to monitoring and evaluating key public health, health policy, and welfare policy changes, with particular attention to means to automate the collection of data, apply new data processing and analytic tools, and store and disseminate data in a more timely and accessible manner.

The Board may perform second-level peer review of applications for grants-in-aid for research and research training activities, cooperative agreements, and research contract proposals relating to the broad areas within NCHS. Members will be responsible for surveying the state-of-the-art of their respective disciplines, and reporting, as appropriate, to the full Board and recommending convening of workshops or symposia to educate or update all Board members.

### **Agency or Official to Whom the Board Reports**

The Board provides advice to the Secretary, HHS; the Director, CDC; and the Director, NCHS.

### **Support**

Management and support services shall be provided by the Office of the Director, NCHS, CDC.

### **Estimated Annual Operating Costs and Staff Years**

Estimated annual cost for operating the Board, including compensation and travel expenses, but excluding staff support, is \$243,815. Estimated annual person-years of staff support required is 0.65 at an estimated annual cost of \$122,558.

### **Designated Federal Officer**

CDC will select a full-time or permanent part-time Federal employee to serve as the Designated Federal Officer (DFO) to attend each Board meeting and ensure that all procedures are within applicable statutory, regulatory, and HHS General Administration Manual directives. The DFO will approve and prepare all meeting agendas, call all of the Board and subcommittee meetings, adjourn any meeting when the DFO deems adjournment to be in the public interest, and chair meetings when directed to do so by the official to whom the Board reports. The DFO or his/her designee shall be present at all meetings of the full Board and subcommittees.

### **Estimated Number and Frequency of Meetings**

Meetings shall be held approximately three times per year at the call of the DFO, in consultation with the Chair.

Meetings shall be open to the public except as determined otherwise by the Secretary, HHS, or other official, to whom the authority has been delegated, in accordance with the Government in the Sunshine Act [5 U.S.C. Section 552b(c)] and Section 10(d) of the Federal Advisory Committee Act. Notice of all meetings shall be given to the public.

### **Duration**

Continuing

### **Termination**

Unless renewed by appropriate action, the Board, NCHS will terminate two years from the date this charter is filed.

### **Membership and Designation**

The Board shall consist of 15 members, including the Chair. Members and the Chair shall be selected by the Secretary, HHS, from authorities knowledgeable in statistical, demographic and epidemiological research (such as biostatistics/biometry, survey methodology and polling, sociology, reproductive health, minority health, nutrition, social and behavioral health sciences, population-based public and environmental health); public health practice (e.g., state and local health data systems); operations research, health policy and health services research (including health economics and econometrics); provision of health services (medicine, nursing,

rehabilitation, other allied health care, preventive medicine); health quality measurement and health indicators; health promotion; medical informatics; and data and health information security, storage, confidentiality, and dissemination (including print, computerized, and other digital media). Members shall be deemed Special Government Employees.

The Board shall also consist of a nonvoting liaison representative from the National Committee on Vital and Health Statistics, and such other nonvoting liaison representatives as the Secretary deems necessary to the effectively carry out the functions of the Board. Liaisons shall be deemed representatives.

Members shall be invited to serve for overlapping terms of up to four years, except that any member appointed to fill a vacancy for an unexpired term shall be appointed for the remainder of the term. Terms of more than two years are contingent upon the renewal of the Board by appropriate action prior to its termination. A member may serve up to 180 days after the expiration of that member's term if a successor has not taken office.

#### **Subcommittees**

Subcommittees composed of members and nonmembers of the parent committee may be established with the approval of the Secretary, HHS, or his/her designee. The subcommittees must report back to the parent committee and do not provide advice or work products directly to the agency. The Department Committee Management Officer will be notified upon establishment of each subcommittee and will be provided information on its name, membership, function, and estimated frequency of meetings.

#### **Recordkeeping**

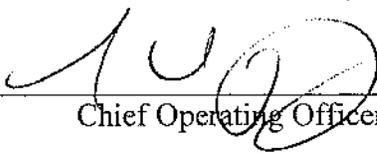
The records of the Board, established subcommittees, or other subgroups of the Board, shall be managed in accordance with General Records Schedule 6.2, Federal Advisory Committee Records, or other approved agency records disposition schedule. These records shall be available for public inspection and copying, subject to the Freedom of Information Act, 5 U.S.C. §552.

**Filing Date**

January 19, 2019

**APPROVED:**

1/19/19  
Date

  
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Chief Operating Officer