PURPOSE
The purpose of the Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR)\(^1\) Tribal Advisory Committee (TAC) is to provide a forum wherein Tribal representatives and CDC/ATSDR staff exchange information about public health issues in Indian country, identify urgent public health needs, and discuss collaborative approaches to address these issues and needs. The CDC/ATSDR TAC will support, and not supplant, any other government-to-government consultation activities that CDC/ATSDR undertakes. In addition to assisting CDC/ATSDR in the planning and coordination of tribal consultation sessions, the TAC will advise CDC/ATSDR regarding the government-to-government consultation process and will help ensure that CDC/ATSDR activities or policies that impact Indian country are brought to the attention of all Tribal leaders.

AUTHORITY
In recognition of the unique political and legal relationship that Indian Tribes have with the Federal Government, and pursuant to Presidential Executive Order No. 13175 (November 6, 2000) and the Presidential Memorandum of November 5, 2009, CDC/ATSDR has established a Tribal Consultation Policy for working with Federally-recognized Tribes on a government-to-government basis. The US Department of Health and Human Services (HHS) has adopted a Tribal Consultation Policy that applies to all HHS Operating Divisions, including CDC/ATSDR. The HHS Tribal Consultation Policy directs Operating Divisions to establish a process to ensure meaningful consultation and timely input from Indian Tribes before actions are taken that will significantly affect Indian Tribe(s).

The TAC Charter complies with the “Unfunded Mandates Reform Act Exemption” to the Federal Advisory Committee Act (FACA) found in Section 204 of the Unfunded Mandates Reform Act, P.L. 104-4,\(^2\), and is therefore exempt from FACA, 5 U.S.C. App. 2.

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\(^1\) Note: References to CDC also apply to the Agency for Toxic Substances and Disease Registry (ATSDR). The CDC Director also serves as the ATSDR Administrator.

\(^2\) 2 U.S.C. § 1534 (b) provides:

The Federal Advisory Committee Act (5 U.S.C. App.) shall not apply to actions in support of intergovernmental communications where—

- (1) meetings are held exclusively between Federal official and elected officers of State, local and Tribal governments (or their designated employees with authority to act on their behalf) acting in their official capacities; and
- (2) such meetings are solely for the purposes of exchanging views, information, or advice relating to the management or implementation of Federal programs established pursuant to public law that explicitly or inherently share intergovernmental responsibilities or administration.
FUNCTION
The purpose of the TAC is to identify priorities and exchange views, information, or advice regarding the management or implementation of CDC/ATSDR programs and initiatives that affect Tribe(s) and American Indian and Alaska Native (AI/AN) communities, including those that arise explicitly or implicitly under statute, regulation, or Executive Order. This purpose will be accomplished through forums, meetings, and conversations among Federal officials and elected Tribal leaders in their official capacity (or their authorized representative).

The purview of the TAC covers, but is not limited to, the following core functions:

- Identify evolving issues and barriers to access, coverage, and delivery of services to AI/AN related to CDC/ATSDR programs;
- Propose clarifications, recommendations, and solutions to address issues raised at Tribal, regional, and national levels;
- Serve as a forum for Tribes and CDC/ATSDR to discuss these issues and proposals for changes to CDC/ATSDR regulations, policies, and procedures;
- Identify priorities and provide advice on appropriate strategies for Tribal consultation on issues at the Tribal, regional, and/or national levels; and
- Communicate with Indian Tribes in the respective area and gather feedback on pertinent issues.

The CDC/ATSDR TAC will support, and not supplant, any other government-to-government consultation activities that CDC/ATSDR undertakes.

COMMITTEE COMPOSITION
In accordance with the "Unfunded Mandates Reform Act Exemption" to FACA found in Section 204 of the Unfunded Mandates Reform Act, P.L. 104-4, CDC/ATSDR has incorporated the Indian Health Services (IHS) Area and the Federally-recognized Tribes At-Large positions as members of the TAC to provide specific representation for the regional and national concerns of Tribal governments. The TAC will be comprised of 16 members to be filled by voluntary representatives: one delegate (and one authorized representative) from a Federally-recognized Tribe geographically located in each of the 12 Indian Health Service Areas, and one delegate (and one authorized representative) from four Federally-recognized Tribes At-Large.

Delegates
The delegates must be elected Tribal officials, acting in their official capacity as elected officials of their Tribe, with authority to act on behalf of the Tribe, and qualified to represent the views of the Indian Tribes in the respective area from which they are nominated.

In the event that the delegate will not be attending a TAC meeting, the authorized representative will be notified to participate on behalf of the delegate prior to the meeting. If the authorized representative is not available, the delegate shall designate a second authorized representative, in writing, prior to the meeting.

Authorized Representatives
An authorized representative may be an elected Tribal official or designated Tribal official that is qualified to represent the views of, speak for, and bind the Tribe he or she is representing in the same manner as the delegate/Tribal official, and represent the views of Indian Tribes. Authorized representatives might include, but are not limited to, tribal health officers, tribal
health system executive directors, and leadership of regional and national non-profit corporations (501(c)(3)) such as the National Congress of American Indians, the National Indian Health Board, and the National Indian Child Welfare Association. Authorized representatives act on behalf of the delegate, and therefore on behalf of the delegate’s tribe, and may only represent one Tribe. A tribal leader may not serve as a representative of any entity other than his or her Tribe.

Subcommittees
The Executive Secretary has the authority to create FACA-exempt subcommittees, composed of TAC delegates (or their authorized representatives), as needed to accomplish the functions of the full TAC. Subcommittees must report back to the TAC, and must not provide advice or work products directly to the CDC/ATSDR.

SELECTION PROCESS
The process for selecting Tribal members of the TAC is designed to acknowledge the role of Tribal Governments and their elected or appointed officials with regard to consultation on policy issues. The CDC/ATSDR Associate Director for the Tribal Support Unit will serve as the Designated Federal Official/Executive Secretary for the TAC. As such, the Designated Federal Official/Executive Secretary will facilitate the solicitation and selection of Tribal representatives to the TAC. The names of each TAC delegate and authorized representative are to be submitted to the Designated Federal Official/Executive Secretary in an official letter from the Tribe. The Designated Federal Official/Executive Secretary is responsible for identifying and finalizing the body of members from those candidates nominated by Federally-recognized Tribes and ensuring that the delegates (and authorized representatives) meet the FACA exemption requirements. The seated TAC membership will be fully engaged in the recruitment process.

Nominations will be considered in the priority order listed below.

1. Tribal President/Chairperson/Governor
2. Tribal Vice-President/Vice-Chairperson/Lt. Governor
3. Elected or Appointed Tribal Official
4. Designated Tribal Official

In the event that there is more than one nomination for a delegate or authorized representative seat, submitted by more than one Federally-recognized Tribe, letters of support for individuals from regional Tribal organizations will be taken into consideration.

CDC/ATSDR SUPPORT
The CDC Office of the Director, through the Deputy Director for State, Tribal, Local and Territorial Support, will designate the Tribal Support Unit with the responsibility for implementation, coordination, and agency-wide adherence to CDC/ATSDR and HHS Tribal Consultation Policies. Unless otherwise designated by the Director, the Designated Federal Official/Executive Secretary will be the Associate Director for the Tribal Support Unit. The Designated Federal Official/Executive Secretary will support TAC functions and serve as a scientific and programmatic resource for the TAC.

Revised November 21, 2013
In addition, key CDC/ATSDR managers and staff, as determined by the Designated Federal Official/Executive Secretary, shall serve as resources to the TAC by providing leadership, technical assistance, and subject matter expertise to the TAC in carrying out its duties and responsibilities. As part of these responsibilities, the Designated Federal Official/Executive Secretary will ensure that Tribal access to CDC/ATSDR programs that affect Tribe(s) and AI/AN communities is monitored by tracking the total resources allocated annually to serve AI/ANs and prepare an inventory of new programs and policies affecting AI/AN communities. Because the TAC is a high-level agency advisory committee, the CDC Director/ATSDR Administrator and agency senior leadership will make attendance at TAC meetings a high priority whenever possible.

LEADERSHIP

Chair
A Chair will be elected by and from the TAC members for a one calendar-year term of service. The Chair will be an elected Tribal leader. The number of terms is not limited.

Co-Chair
The Co-Chair will be elected by and from the TAC members for a one calendar-year term of service. The Co-Chair will be an elected Tribal leader. The number of terms is not limited.

Executive Secretary
The Designated Federal Official/Executive Secretary will serve as the lead point of contact for the TAC. In addition, he or she will provide programmatic guidance, technical assistance, and administrative support. Unless otherwise designated by the CDC Director/ATSDR Administrator or Deputy Director for State, Tribal, Local and Territorial Support, the Designated Federal Official/Executive Secretary will be the Associate Director for the Tribal Support Unit.

Re-election
The Chair and Co-Chair may be re-elected by the TAC for a one calendar-year term. Elections will be held annually, at which time the seated membership of the TAC may reconfirm the Chair/Co-Chair or vote on a new Chair/Co-Chair.

PERIOD OF SERVICE
TAC service periods are limited to two years. A delegate may serve successive, consecutive terms if nominated again when their term expires.

Vacancy
When a vacancy occurs, Federally-recognized Indian Tribes; Tribal, regional, or national organizations; Native-serving organizations; and CDC/ATSDR’s HHS partners (including the Secretary’s Tribal Advisory Committee and relevant HHS Operating Divisions and Staff Divisions) will be notified of the vacancy and solicited for nominations by the Designated Federal Official/Executive Secretary. In the event of a vacancy, the authorized representative will attend meetings until such a time as the vacancy is officially filled.

Removal
Committee delegates must make a good faith effort to attend all meetings either in person or via teleconference. If a delegate (or authorized representative) does not participate in a meeting or
teleconference on three successive occasions, the Chair or Designated Federal Official/Executive Secretary will notify the Indian Tribe(s) in the respective area and ask them to nominate a replacement.

MEETINGS
Depending on availability of funds, the TAC will convene two face-to-face meetings per fiscal year. These meetings may be held in conjunction with formal CDC/ATSDR tribal consultation sessions. These meetings may be funded in whole or in part by CDC/ATSDR. TAC conference calls will be held as needed and additional meetings may be scheduled depending on need and availability of funds. The Designated Federal Official/Executive Secretary will collaborate with the TAC Co-Chairs and TAC membership to develop TAC meeting agendas. The TAC Co-Chairs and the Designated Federal Official/Executive Secretary will confer, establish consensus, and finalize the agenda for each meeting. CDC/ATSDR will host one meeting in Atlanta and the other will be hosted by a Tribe, in accordance with HHS and CDC/ATSDR meeting policies. TAC meetings will complement, and not supplant, the Tribal consultation process between CDC/ATSDR and Federally-recognized Tribes.

QUORUM
A quorum is established with a simple majority of voting members seated. In the event that the TAC is not able to establish a quorum for its meeting, then the co-chairs, at their discretion, can arrange for polling of members via conference call or any other manner.

VOTING
The TAC will operate by consensus. Where a consensus cannot be reached, the TAC will vote to resolve any differences. Each TAC member (delegate or authorized representative) will be allowed one vote. If both the delegate and his or her authorized representative participate in the same meeting or call, only the delegate will be counted for a quorum and voting purposes.

BUDGET
The TAC budget, including travel, per diem, communication, and other related expenses will be proposed to CDC/ATSDR annually for each subsequent fiscal year.

REPORTS
The Designated Federal Official/Executive Secretary will ensure that all TAC meeting proceedings and recommendations are formally recorded and provided to the TAC through written minutes within 60 days following the TAC meeting. Once approved, the minutes will be posted online on the CDC Tribal Support Unit’s website to ensure that the information is accessible to the public. Recommended follow-up requiring federal actions and/or attention will be implemented and tracked within CDC/ATSDR and reported to the TAC at least 30 days before the next in-person TAC meeting.

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3 Pursuant to Section 204(b) of the Unfunded Mandates Reform Act (2 U.S.C. § 1534(b)), members of the public may be present at committee meetings, i.e., in the audience as observers, but, since members of the public are not allowed on the committee, they may not participate in any committee discussions, or any other committee business during the meeting.
**MEETING LOGISTICS**
The TAC membership, in collaboration with CDC/ATSDR, will determine the place and time of TAC meetings. Dates will be checked with HHS’s Office of Intergovernmental and External Affairs to avoid conflicts whenever possible. The CDC/ATSDR Tribal Support Unit will provide onsite meeting coordination for the annual TAC meeting and consultation meetings.

**TERMINATION DATE**
This TAC Charter shall be effective as long as the CDC Tribal Consultation Policy is in effect. The TAC Charter may be revised or amended upon approval by the TAC and final approval by the Designated Federal Official/Executive Secretary.

**ACRONYMS**

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<th>Acronym</th>
<th>Description</th>
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<tr>
<td>CDC</td>
<td>Center for Disease Control and Prevention</td>
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<td>ATSDR</td>
<td>Agency for Toxic Substance and Disease Registry</td>
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<td>TAC</td>
<td>Tribal Advisory Committee</td>
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<td>FACA</td>
<td>Federal Advisory Committee Act</td>
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<td>AI/AN</td>
<td>American Indian/Alaska Native</td>
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