



THE SECRETARY OF HEALTH AND HUMAN SERVICES
WASHINGTON, D.C. 20201

CHARTER

Physician-Focused Payment Model Technical Advisory Committee

Official Designation

The committee shall be known as the Physician-Focused Payment Model Technical Advisory Committee (“the Committee”).

Authority

Required by the Medicare Access and CHIP Reauthorization Act of 2015, 42 U.S.C. 1395ee. This Committee 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 Committee shall, on a periodic basis, review physician-focused payment models, prepare comments and recommendations regarding whether such models meet certain criteria, and submit such comments and recommendations to the Secretary.

Description of Duties

The Physician-Focused Payment Model Technical Advisory Committee shall meet, on a periodic basis, to review proposals for physician-focused payment models submitted by individuals and stakeholder entities. The Committee shall prepare comments and recommendations on proposals that are received. The Committee shall explain whether such models meet criteria established by the Secretary for physician-focused payment models and the rationale for their comments and recommendations. The Committee’s rationale, comments, and recommendations shall be submitted to the Secretary.

Agency or Official to Whom the Committee Reports

The Committee shall provide comments and recommendations on physician-focused payment models to the Secretary of Health and Human Services (HHS).

Support

The Department of Health and Human Services, acting through the Office of the Assistant Secretary for Planning and Evaluation, shall provide technical and operational support for the Committee. The Office of the Actuary of the Centers for Medicare and Medicaid Services shall provide actuarial assistance to the Committee as needed.

Estimated Annual Operating Costs and Staff Years

Estimated annual cost for operating the Committee, including logistical and analytic contractual support as well as travel expenses for members, is \$4,000,000 per year. Estimated annual person-years of federal staff operational and technical support required are five full-time equivalent employees at an estimated annual cost of \$927,929.00.

Designated Federal Officer

The Office of the Assistant Secretary for Planning and Evaluation will select a full-time or permanent part-time Federal employee to serve as the Designated Federal Officer (DFO) to attend each Committee meeting and to ensure that all procedures are done within the applicable statutory, regulatory, and HHS General Administration Manual directives. The DFO will approve and prepare all meeting agendas, and as requested by the Committee, call the Committee meetings and adjourn any meeting when the Committee determines adjournment to be in the public interest. The DFO or his or her designee shall be present at all Committee meetings.

Estimated Number and Frequency of Meetings

The Committee shall meet periodically throughout each year to assess physician-focused payment model proposals. The frequency and duration of these meetings will be dictated by the number and complexity of the proposed models as determined by the DFO. Meetings shall be open to the public except as determined otherwise by the Secretary, HHS, or designee in accordance with the Government in Sunshine Act (5 U.S.C. 552b(c)) and Section 10(a) of the Federal Advisory Committee Act. Timely notice of each such meeting shall be provided to the public including by notice published in the Federal Register. Meetings shall be conducted, and records of the proceedings kept, as required by the applicable laws and departmental regulations.

Duration and Termination

Per 42 U.S.C. 1395ee, this advisory committee is exempt from Sec. 14 of FACA. The Committee's duration is indefinite and it has no termination date at this time.

Membership and Designation

By statute, the Committee shall be composed of eleven members appointed by the Comptroller General of the United States. The membership of the Committee shall include individuals with national recognition for their expertise in physician-focused payment models and related delivery of care under the Medicare program. No more than five members of the Committee shall be providers of services or suppliers, or representatives of providers of services or suppliers. The Secretary, or designee, shall appoint one of the members to serve as the Chairperson and another member to serve as the Vice Chairperson. A member of the Committee shall not be an employee of the Federal Government.

The appointment of members of the Committee shall be made by the Comptroller General. The terms of members of the Committee shall be for 3 years except that the Comptroller General shall designate staggered terms for the members first appointed.

Any member appointed to fill a vacancy occurring before the expiration of the term for which the member's predecessor was appointed shall be appointed only for the remainder of that term. A member

may serve after the expiration of that member's term until a successor has taken office. A vacancy in the Committee shall be filled in the manner in which the original appointment was made.

Subcommittees

Subcommittees and ad hoc subcommittees may be established with the approval of the Secretary of HHS or designee to address specific issues and proposals. Subcommittees members will be composed of the parent Committee members. The subcommittees shall make their recommendations to the parent Committee for deliberation.

Recordkeeping

The records of the Committee and subcommittees 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

JAN 5 2016

APPROVED

JAN 0 5 2016

Date

/signed/
Sylvia M. Burwell