PUBLIC LAW 111-148—MAR. 23, 2010

The Patient Protection and Affordable Care Act

Title III, Subtitle A, Part II

SEC. 3012. INTERAGENCY WORKING GROUP ON HEALTH CARE QUALITY.

- (a) IN GENERAL.—The President shall convene a working group to be known as the Interagency Working Group on Health Care Quality (referred to in this section as the "Working Group").
- (b) GOALS.—The goals of the Working Group shall be to achieve the following:
 - (1) Collaboration, cooperation, and consultation between Federal departments and agencies with respect to developing and disseminating strategies, goals, models, and timetables that are consistent with the national priorities identified under section 399HH(a)(2) of the Public Health Service Act (as added by section 3011).
 - (2) Avoidance of inefficient duplication of quality improvement efforts and resources, where practicable, and a streamlined process for quality reporting and compliance requirements.
 - (3) Assess alignment of quality efforts in the public sector with private sector initiatives.

(c) COMPOSITION.—

- (1) IN GENERAL.—The Working Group shall be composed of senior level representatives of—
 - (A) the Department of Health and Human Services;
 - (B) the Centers for Medicare & Medicaid Services;
 - (C) the National Institutes of Health;
 - (D) the Centers for Disease Control and Prevention;
 - (E) the Food and Drug Administration;
 - (F) the Health Resources and Services Administration;
 - (G) the Agency for Healthcare Research and Quality;
 - (H) the Office of the National Coordinator for Health Information Technology;
 - (I) the Substance Abuse and Mental Health Services Administration;
 - (J) the Administration for Children and Families;
 - (K) the Department of Commerce;
 - (L) the Office of Management and Budget;
 - (M) the United States Coast Guard:
 - (N) the Federal Bureau of Prisons;
 - (O) the National Highway Traffic Safety Administration;

- (P) the Federal Trade Commission;
- (Q) the Social Security Administration;
- (R) the Department of Labor;
- (S) the United States Office of Personnel Management;
- (T) the Department of Defense;
- (U) the Department of Education;
- (V) the Department of Veterans Affairs;
- (W) the Veterans Health Administration; and
- (X) any other Federal agencies and departments with activities relating to improving health care quality and safety, as determined by the President.

(2) CHAIR AND VICE-CHAIR.—

- (A) CHAIR.—The Working Group shall be chaired by the Secretary of Health and Human Services.
- (B) VICE CHAIR.—Members of the Working Group, other than the Secretary of Health and Human Services, shall serve as Vice Chair of the Group on a rotating basis, as determined by the Group.
- (d) REPORT TO CONGRESS.—Not later than December 31, 2010, and annually thereafter, the Working Group shall submit to the relevant Committees of Congress, and make public on an Internet website, a report describing the progress and recommendations of the Working Group in meeting the goals described in subsection (b).

Title IV, Subtitle A

SEC. 4001. NATIONAL PREVENTION, HEALTH PROMOTION AND PUBLIC HEALTH COUNCIL.

- (a) ESTABLISHMENT.—The President shall establish, within the Department of Health and Human Services, a council to be known as the "National Prevention, Health Promotion and Public Health Council" (referred to in this section as the "Council").
- (b) CHAIRPERSON.—The President shall appoint the Surgeon General to serve as the chairperson of the Council.
- (c) COMPOSITION.—The Council shall be composed of—
 - (1) the Secretary of Health and Human Services;
 - (2) the Secretary of Agriculture;
 - (3) the Secretary of Education;
 - (4) the Chairman of the Federal Trade Commission;
 - (5) the Secretary of Transportation;
 - (6) the Secretary of Labor;
 - (7) the Secretary of Homeland Security;

- (8) the Administrator of the Environmental Protection Agency;
- (9) the Director of the Office of National Drug Control Policy;
- (10) the Director of the Domestic Policy Council;
- (11) the Assistant Secretary for Indian Affairs;
- (12) the Chairman of the Corporation for National and Community Service; and
- (13) the head of any other Federal agency that the chairperson determines is appropriate.

(d) PURPOSES AND DUTIES.—The Council shall—

- (1) provide coordination and leadership at the Federal level, and among all Federal departments and agencies, with respect to prevention, wellness and health promotion practices, the public health system, and integrative health care in the United States;
- (2) after obtaining input from relevant stakeholders, develop a national prevention, health promotion, public health, and integrative health care strategy that incorporates the most effective and achievable means of improving the health status of Americans and reducing the incidence of preventable illness and disability in the United States;
- (3) provide recommendations to the President and Congress concerning the most pressing health issues confronting the United States and changes in Federal policy to achieve national wellness, health promotion, and public health goals, including the reduction of tobacco use, sedentary behavior, and poor nutrition;
- (4) consider and propose evidence-based models, policies, and innovative approaches for the promotion of transformative models of prevention, integrative health, and public health on individual and community levels across the United States;
- (5) establish processes for continual public input, including input from State, regional, and local leadership communities and other relevant stakeholders, including Indian tribes and tribal organizations;
- (6) submit the reports required under subsection (g); and
- (7) carry out other activities determined appropriate by the President.
- (e) MEETINGS.—The Council shall meet at the call of the Chairperson.

(f) ADVISORY GROUP.—

(1) IN GENERAL.—The President shall establish an Advisory Group to the Council to be known as the "Advisory Group on Prevention, Health Promotion,

and Integrative and Public Health' (hereafter referred to in this section as the "Advisory Group"). The Advisory Group shall be within the Department of Health and Human Services and report to the Surgeon General.

(2) COMPOSITION.—

- (A) IN GENERAL.—The Advisory Group shall be composed of not more than 25 non-Federal members to be appointed by the President.
- (B) REPRESENTATION.—In appointing members under subparagraph (A), the President shall ensure that the Advisory Group includes a diverse group of licensed health professionals, including integrative health practitioners who have expertise in—
 - (i) worksite health promotion;
 - (ii) community services, including community health centers;
 - (iii) preventive medicine;
 - (iv) health coaching;
 - (v) public health education;
 - (vi) geriatrics; and
 - (vii) rehabilitation medicine.
- (3) PURPOSES AND DUTIES.—The Advisory Group shall develop policy and program recommendations and advise the Council on lifestyle-based chronic disease prevention and management, integrative health care practices, and health promotion.
- (g) NATIONAL PREVENTION AND HEALTH PROMOTION STRATEGY.—Not later than 1 year after the date of enactment of this Act, the Chairperson, in consultation with the Council, shall develop and make public a national prevention, health promotion and public health strategy, and shall review and revise such strategy periodically. Such strategy shall—
 - (1) set specific goals and objectives for improving the health of the United States through federally-supported prevention, health promotion, and public health programs, consistent with ongoing goal setting efforts conducted by specific agencies;
 - (2) establish specific and measurable actions and timelines to carry out the strategy, and determine accountability for meeting those timelines, within and across Federal departments and agencies; and
 - (3) make recommendations to improve Federal efforts relating to prevention, health promotion, public health, and integrative health care practices to ensure Federal efforts are consistent with available standards and evidence.

- (h) REPORT.—Not later than July 1, 2010, and annually thereafter through January 1, 2015, the Council shall submit to the President and the relevant committees of Congress, a report that—
 - (1) describes the activities and efforts on prevention, health promotion, and public health and activities to develop a national strategy conducted by the Council during the period for whichthe report is prepared;
 - (2) describes the national progress in meeting specific prevention, health promotion, and public health goals defined in the strategy and further describes corrective actions recommended by the Council and taken by relevant agencies and organizations to meet these goals;
 - (3) contains a list of national priorities on health promotion and disease prevention to address lifestyle behavior modification (smoking cessation, proper nutrition, appropriate exercise, mental health, behavioral health, substance use disorder, and domestic violence screenings) and the prevention measures for the 5 leading disease killers in the United States;
 - (4) contains specific science-based initiatives to achieve the measurable goals of Healthy People 2010 regarding nutrition, exercise, and smoking cessation, and targeting the 5 leading disease killers in the United States;
 - (5) contains specific plans for consolidating Federal health programs and Centers that exist to promote healthy behavior and reduce disease risk (including eliminating programs and offices determined to be ineffective in meeting the priority goals of Healthy People 2010);
 - (6) contains specific plans to ensure that all Federal health care programs are fully coordinated with science-based prevention recommendations by the Director of the Centers for Disease Control and Prevention; and
 - (7) contains specific plans to ensure that all non-Department of Health and Human Services prevention programs are based on the science-based guidelines developed by the Centers for Disease Control and Prevention under paragraph (4).
- (i) PERIODIC REVIEWS.—The Secretary and the Comptroller General of the United States shall jointly conduct periodic reviews, not less than every 5 years, and evaluations of every Federal disease prevention and health promotion initiative, program, and agency. Such reviews shall be evaluated based on effectiveness in meeting metrics-based goals with an analysis posted on such agencies' public Internet websites.