

Endnotes

¹ Guidance by the Scientific Integrity Framework Interagency Working Group of the National Science and Technology Council “A Framework for Federal Scientific Integrity Policy and Practice.” January 12, 2023. Available at: <https://www.whitehouse.gov/wp-content/uploads/2023/01/01-2023-Framework-for-Federal-Scientific-Integrity-Policy-and-Practice.pdf>.

² Some HHS Operating and Staff Divisions have or may designate their own Scientific Integrity Officials. This document uses “HHS SIO” to refer to the official designated by HHS to coordinate department-wide implementation of this Policy and “SIO” to refer to all Scientific Integrity Officials, including those at Operating and Staff Divisions.

³ Presidential Memorandum on Restoring Trust in Government Through Scientific Integrity and Evidence-Based Policy Making, January 27, 2021. Available at: <https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/27/memorandum-on-restoring-trust-in-government-through-scientific-integrity-and-evidence-based-policy-making/>.

⁴ Presidential Memorandum for the Heads of Executive Departments and Agencies on Scientific Integrity, March 9, 2009. The White House. Available at: <https://obamawhitehouse.archives.gov/the-press-office/memorandum-heads-executive-departments-and-agencies-3-9-09>.

⁵ Presidential Memorandum for the Heads of Executive Departments and Agencies on Scientific Integrity, December 17, 2010. Office of Science and Technology Policy. Available at: <https://obamawhitehouse.archives.gov/sites/default/files/microsites/ostp/scientific-integrity-memo-12172010.pdf>.

⁶ A report by the Scientific Integrity Fast-Track Action Committee of the National Science and Technology Council. “Protecting the Integrity of Government Science.” January 11, 2022. Available at: https://www.whitehouse.gov/wp-content/uploads/2022/01/01-22-Protecting_the_Integrity_of_Government_Science.pdf.

⁷ Guidance by the Scientific Integrity Framework Interagency Working Group of the National Science and Technology Council “A Framework for Federal Scientific Integrity Policy and Practice.” January 12, 2023. Available at: <https://www.whitehouse.gov/wp-content/uploads/2023/01/01-2023-Framework-for-Federal-Scientific-Integrity-Policy-and-Practice.pdf>.

⁸ Examples may include (1) suppressing a decisionmaker’s ability to offer the best judgment based on scientific information; (2) preventing the use of best available science; (3) insisting on preclearance of a scientific product for purposes other than providing advance notification or opportunity to review for technical merit; (4) suppressing, altering or delaying the release of a scientific product for any reason other than technical merit or providing advance notification; (5) removing or reassigning scientific personnel for any reason other than performance, conduct or budgetary constraints; (6) using scientific products that are not representative of the current state of scientific knowledge and research (for example because of a lack of

appropriate peer review, poor methodology, or flawed analyses) to inform decision making and policy formulation; or (7) misrepresenting the underlying assumptions, uncertainties, or probabilities of scientific products. This is not intended to be an exhaustive list.

⁹ Differences of scientific opinion are not necessarily inappropriate influence.

¹⁰ See Federal Research Misconduct Policy, 65 FR 76260, 76262 (Dec. 6, 2000); see also <https://ori.hhs.gov/definition-research-misconduct>.

¹¹ Public Law 112–199 § 110.

¹² 5 U.S.C. 2302(b)(8).

¹³ See Health Extenders, Improving Access to Medicare, Medicaid, and CHIP, and Strengthening Public Health Act of 2022, Public Law 117–328, Division FF, Title II, Section 2321 (Jan 3, 2023) and Chips and Science Act, Public Law 117–167, Title VI, Subtitle D, Section 10631 (Aug 9, 2022). OSTP guidance and relevant HHS policies to implement this legislation are forthcoming at the time of publication of this policy.

¹⁴ HHS Grants Policy Statement, U.S. Department of Health and Human Services, Office of the Assistant Secretary for Resources and Technology, Office of Grants. January 1, 2007. Available at: <https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgrps107.pdf>.

¹⁵ HHS Grants Policy Administration Manual Version 1.02. November 13, 2023.

¹⁶ 45 CFR 75.372.

¹⁷ Presidential Memorandum for the Heads of Executive Departments and Agencies on Increasing Access to the Results of Federally Funded Scientific Research. Available at: https://obamawhitehouse.archives.gov/sites/default/files/microsites/ostp/ostp_public_access_memo_2013.pdf.

¹⁸ Presidential Memorandum for the Heads of Executive Departments and Agencies on Ensuring Free, Immediate, and Equitable Access to Federally Funded Research. Available at: <https://www.whitehouse.gov/wp-content/uploads/2022/08/08-2022-OSTP-Public-Access-Memo.pdf>.

¹⁹ This provision is further outlined in the United States Office of Government Ethics Standards of Conduct and 18 U.S.C. 208 as Applied to Official Social Media Use. Available at: [https://oge.gov/web/oge.nsf/News_Releases/EAE37A7DA3C38BF38525894700775339/\\$FILE/LA-23-03%20The%20Standards%20of%20Conduct%20and%2018%20U.S.C.%20C2%A7%20208%20as%20Applied%20to%20Official%20Social%20Media%20Use.pdf](https://oge.gov/web/oge.nsf/News_Releases/EAE37A7DA3C38BF38525894700775339/$FILE/LA-23-03%20The%20Standards%20of%20Conduct%20and%2018%20U.S.C.%20C2%A7%20208%20as%20Applied%20to%20Official%20Social%20Media%20Use.pdf).

²⁰ Memorandum to Designated Agency Ethics Officials on The Standards of Conduct as Applied to Personal Social Media Use. Available at: [https://www.oge.gov/web/oge.nsf/0/195DAE83D38EF6A9852585BA005BEC69/\\$FILE/LA-15-03-2.pdf](https://www.oge.gov/web/oge.nsf/0/195DAE83D38EF6A9852585BA005BEC69/$FILE/LA-15-03-2.pdf).

²¹ Office of Management and Budget. “Final Information Quality Bulletin for Peer Review.” *Federal Register*. Doc. 05–769. Available at: <https://www.federalregister.gov/documents/2005/01/14/05-769/final-information-quality-bulletin-for-peer-review>.

²² 5 U.S.C. 7513, 4303.

²³ Commissioned Corps Directive 111.02.

²⁴ Subject to the limitations and requirements as to participation in foreign

talent programs outlined in I.12–13 of this policy.

²⁵ 2010 Memorandum from the White House Office of Science and Technology Policy on Scientific Integrity. Available at: <https://obamawhitehouse.archives.gov/sites/default/files/microsites/ostp/scientific-integrity-memo-12172010.pdf>.

²⁶ See <https://oig.hhs.gov/fraud/whistleblower/>. Employees can also contact their OpDiv/StaffDiv’s office of Equal Employment Opportunity (“EEO”) for information regarding retaliation based on protected EEO activity or discrimination, or the Office of Special Counsel for information regarding retaliation based on whistleblowing. Additionally, although encouraged to use the process detailed herein, employees may also disclose wrongdoing to their supervisor or another individual higher up in management, the HHS OIG, the Office of Special Counsel, or to Congress. PHSCC officers should also refer to CCD 121.06, “Protected Communications,” CCD 111.01, “Equal Opportunity,” and CCI 211.03, “Equal Opportunity.”

²⁷ <https://oig.hhs.gov/fraud/report-fraud/before-you-submit/>.

Dated: December 16, 2024.

Katherine N. Bent,

Associate Deputy Assistant Secretary, Office of Science and Data Policy, Office of the Assistant Secretary for Planning and Evaluation, Department of Health and Human Services.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Information Technology Advisory Committee Schedule of Meetings

AGENCY: Assistant Secretary for Technology Policy (ASTP), HHS.

ACTION: Notice of meetings.

SUMMARY: The Health Information Technology Advisory Committee (HITAC) was established in accordance with the 21st Century Cures Act and the Federal Advisory Committee Act. The HITAC, among other things, identifies priorities for standards adoption and makes recommendations to the Assistant Secretary for Technology Policy/National Coordinator for Health Information Technology. The HITAC will hold public meetings throughout 2025. See list of public meetings below.

FOR FURTHER INFORMATION CONTACT: Seth Pazinski, Designated Federal Officer, at Seth.Pazinski@hhs.gov, (202) 384–2246.

SUPPLEMENTAL INFORMATION: Section 4003(e) of the 21st Century Cures Act (Pub. L. 114–255) establishes the Health Information Technology Advisory

Committee (referred to as the “HITAC”). The HITAC will be governed by the provisions of the Federal Advisory Committee Act (FACA) (Pub. L. 92–463), as amended, (5 U.S.C. app.), which sets forth standards for the formation and use of federal advisory committees.

Composition: The HITAC is comprised of at least 25 members, of which:

- No fewer than 2 members are advocates for patients or consumers of health information technology;
- 3 members are appointed by the HHS Secretary
 - 1 of whom shall be appointed to represent the Department of Health and Human Services; and
 - 1 of whom shall be a public health official;
- 2 members are appointed by the majority leader of the Senate;
- 2 members are appointed by the minority leader of the Senate;
- 2 members are appointed by the Speaker of the House of Representatives;
- 2 members are appointed by the minority leader of the House of Representatives;
- Other members are appointed by the Comptroller General of the United States.

Members serve for one-, two-, or three-year terms. All members may be reappointed for a subsequent three-year term. Each member is limited to two three-year terms, not to exceed six years of service. Members serve without pay but will be provided per-diem and travel costs for committee services, if warranted.

Recommendations: The HITAC recommendations to the Assistant Secretary for Technology Policy/National Coordinator for Health Information Technology are publicly available at <https://www.healthit.gov/topic/federal-advisory-committees/recommendations-national-coordinator-health-it>.

Public Meetings: All HITAC meetings will be virtual. Please note that some HITAC meetings may also have an in-person meeting option. For web conference instructions and the most up-to-date information, including in-person meeting location (if applicable), please visit the HITAC calendar on the ONC website, www.healthit.gov/topic/federal-advisory-committees/hitac-calendar.

The schedule of meetings to be held in 2025 is as follows:

- February 13, 2025, from approximately 10:00 a.m. to 3:00 p.m./Eastern Time
- March 20, 2025, from approximately 10:00 a.m. to 3:00 p.m./Eastern Time

- April 10, 2025, from approximately 10:00 a.m. to 3:00 p.m./Eastern Time
- May 8, 2025, from approximately 10:00 a.m. to 3:00 p.m./Eastern Time
- June 12, 2025, from approximately 10:00 a.m. to 3:00 p.m./Eastern Time
- July 17, 2025, from approximately 10:00 a.m. to 3:00 p.m./Eastern Time
- August 14, 2025, from approximately 10:00 a.m. to 3:00 p.m./Eastern Time
- September 18, 2025, from approximately 10:00 a.m. to 3:00 p.m./Eastern Time
- October 16, 2025, from approximately 10:00 a.m. to 3:00 p.m./Eastern Time
- November 13, 2025, from approximately 10:00 a.m. to 3:00 p.m./Eastern Time

All meetings are open to the public. Additional meetings may be scheduled as needed.

Contact Person for Meetings: Seth Pazinski, Seth.Pazinski@hhs.gov. A notice in the **Federal Register** about last minute modifications that impact a previously announced advisory committee meeting cannot always be published quickly enough to provide timely notice. Please email Seth Pazinski for the most current information about meetings.

Agenda: As outlined in the 21st Century Cures Act, the HITAC will develop and submit recommendations to the Assistant Secretary for Technology Policy/National Coordinator on the topics of interoperability, privacy and security, patient access to information, use of technologies that support public health, design and use of technologies that advance health equity, and use of artificial intelligence that improves health and health care. In addition, the committee will also address any administrative matters and hear periodic reports from ASTP. ASTP intends to make background material available to the public no later than 24 hours prior to the meeting start time. If ASTP is unable to post the background material on its website prior to the meeting, the material will be made publicly available on ASTP’s website after the meeting, at www.healthit.gov/hitac.

Procedure: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person prior to the meeting date. An oral public comment period will be scheduled at each meeting. Time allotted for each commenter will be limited to three minutes. If the number of speakers requesting to comment is

greater than can be reasonably accommodated during the scheduled public comment period, ASTP will take written comments after the meeting.

ASTP welcomes the attendance of the public at its HITAC meetings. If you require special accommodations due to a disability, please contact Seth Pazinski at least seven (7) days in advance of the meeting.

Notice of these meetings are given under the Federal Advisory Committee Act (Pub. L. No. 92–463, 5 U.S.C., App. 2).

Dated: November 22, 2024.

Stanley S. Pazinski,

Designated Federal Officer, Assistant Secretary for Technology Policy/Office of the National Coordinator for Health Information Technology.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Organization, Functions, and Delegations of Authority; Part G; Indian Health Service; Headquarters, Office of the Director, Office of Quality

AGENCY: Indian Health Service, Department of Health and Human Services.

ACTION: Final notice.

SUMMARY: Part G of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (HHS) is hereby amended to reflect a reorganization of the Indian Health Service (IHS). The purpose of this reorganization proposal is to update the current approved IHS, Office of the Director (GA), Congressional and Legislative Affairs Staff (GA1) and the Office of Quality (GAP) in their entirety and replace with the following:

SUPPLEMENTARY INFORMATION: The IHS is an Operating Division within the Department of Health and Human Services (HHS) and is under the leadership and direction of a Director who is directly responsible to the Secretary of Health and Human Services. The IHS Headquarters is proposing to reorganize the following major component: Office of Quality (OQ).

Part G of the Statement of Organization, Functions, and Delegations of Authority was most recently amended at 89 FR 61126, July 30, 2024.