The Honorable Orrin Hatch  
United States Senate  
Washington, DC 20510  

Dear Senator Hatch:

Thank you for your letter seeking clarification and sharing your concerns regarding the process and methods of the United States Preventive Services Task Force (USPSTF). As you know, the USPSTF is an independent panel of national experts in prevention that makes evidence-based recommendations about clinical preventive services. The Agency for Healthcare Research and Quality (AHRQ) provides ongoing administrative, research, technical and dissemination support to the USPSTF. We are working on a detailed response to each of your questions and will submit it to you as soon as possible. In the meantime, we wanted to respond with some information that answers many of your questions.

The USPSTF is made up of 16 volunteer members who are nationally recognized experts in prevention, evidence-based medicine and primary care. Their fields of practice and expertise include behavioral health, family medicine, geriatrics, internal medicine, pediatrics, obstetrics and gynecology and nursing. Because their recommendations focus on preventive services offered in primary care to people without obvious signs or symptoms, it is appropriate that USPSTF members are from the field of primary care. The panel is led by a chair and two vice chairs. USPSTF members are appointed by the Director of AHRQ to serve 4-year terms. AHRQ solicits nominations for USPSTF membership in two ways: via an annual notice in the Federal Register and an ongoing request for nominations on its website. AHRQ accepts nominations on a rolling basis.

The USPSTF also works with partner organizations that contribute expertise and help disseminate its work. The partners include experts from federal agencies, such as the National Institutes of Health and the Centers for Disease Control and Prevention, as well as organizations representing primary care clinicians, consumers, and other stakeholders involved in the delivery of primary care, such as the American Academy of Family Physicians, AARP, and America’s Health Insurance Plans.

The USPSTF recognizes that sub-specialists play a crucial role in the treatment of specific diseases or conditions. For every recommendation, the USPSTF consults a variety of sub-specialists at every step in the process—from the development of the analytic framework, to the review of the evidence, to the draft recommendations. Specialist input comes from independent experts in the Evidence-based Practice Centers.
and their consultants, which develop the evidence reviews that inform the USPSTF’s deliberations, as well as peer reviewers.

Input from the public is an integral part of the USPSTF’s recommendation development process. The USPSTF posts all draft research plans, evidence reviews and recommendations on its website for public comment. It receives comments from clinicians, including sub-specialists; patient and health care consumers; the medical products manufacturing community; federal agencies; professional organizations; and others. The Task Force also targets outreach to these groups to ensure that they are aware of the opportunities to comment. Once public comment closes on a draft research plan, draft evidence review, or draft recommendation statement, the USPSTF begins reviewing and considering all comments as it works to finalize the document. The final version of each of these documents contains a section titled “Response to Public Comment,” in which the USPSTF summarizes the changes made based on feedback received during the public comment period.

The USPSTF makes recommendations based on a rigorous review of existing peer-reviewed evidence. It does not conduct the research studies; it reviews and assesses the existing peer-reviewed research. The Task Force assigns each recommendation a letter grade (an A, B, C, or D grade or an I statement) based on the strength of the evidence and on the balance of benefits and harms of the preventive service. The Task Force publishes a comprehensive and detailed procedure manual on its website to ensure that everyone has access to all of their methods (see below for a link to the Task Force procedure manual).

The Task Force also recognizes that the public must have confidence in the integrity of the process by which it makes its recommendations. The reputations of the USPSTF members as highly regarded researchers, clinicians and academic scholars contribute to this objective and must be protected if the USPSTF recommendation statements are to be accepted and implemented. Therefore, the USPSTF has adopted a rigorous conflict of interest and disclosure process. Anyone being considered for appointment to the USPSTF must provide written disclosure of all interests and activities that may be considered a conflict with USPSTF activities. For each individual topic, USPSTF members are expected to disclose all current and planned involvement in commercial (including services from which a clinician derives a substantial proportion of income), noncommercial, intellectual, institutional and patient/public activities related to the potential scope of the recommendation.
Please refer to the following links for further information:

| Conflict of Interest and Disclosure Policy | http://www.uspreventivestaskforce.org/Page/Name/conflict-of-interest-disclosures |
| Members | http://www.uspreventivestaskforce.org/Page/Name/our-members |
| Methods and the Procedure Manual | http://www.uspreventivestaskforce.org/Page/Name/methods-and-processes |
| Partners | http://www.uspreventivestaskforce.org/Page/Name/our-partners |
| Public Comment Process | http://www.uspreventivestaskforce.org/Page/Name/public-comments-and-nominations |
| Recommendations Development Process | http://www.uspreventivestaskforce.org/Page/Name/steps-the-uspstf-takes-to-make-a-recommendation |

Again, thank you for your letter and interest in the work of the USPSTF. I appreciate your input and leadership to ensure the health and well-being of Americans. I hope that this information helps to answer some of your questions. I will follow up with more detailed information in response to each of your questions. If you have any questions or concerns in the meantime, please do not hesitate to contact Jim Esquea, Assistant Secretary for Legislation at (202) 690-7627. I will also provide this response to the co-signers of your letter.

Sincerely,

Sylvia M. Burwell