

# Understanding How the U.S. Preventive Services Task Force (USPSTF) Works

USPSTF 101

January 2025

# Goals

- Improve understanding of the U.S. Preventive Services Task Force (USPSTF or Task Force)
- Explain the connection between the USPSTF and the Agency for Healthcare Research and Quality (AHRQ)
- Describe how the Task Force develops recommendations
- Explain the role of Task Force partners
- Highlight opportunities for public input
- Highlight dissemination efforts

# Overview

## The U.S. Preventive Services Task Force...

- Is a scientifically independent panel of non-federal experts in prevention and evidence-based medicine
- Makes evidence-based recommendations about clinical preventive services, including screening, counseling, and preventive medications
  - Recommendations address only services offered in the primary care setting or services referred by a primary care clinician
  - Recommendations apply to adults and children with no signs or symptoms (or unrecognized signs or symptoms)

# Overview, cont'd.

## The U.S. Preventive Services Task Force...

- Makes recommendations based on rigorous review of existing peer-reviewed evidence
  - Does not conduct the research studies, but reviews and assesses the research
  - Evaluates benefits and harms of each service based on factors such as age, sex, and race/ethnicity

# USPSTF Members

- The 16 volunteer members represent disciplines of primary care including family medicine, internal medicine, nursing, obstetrics/gynecology, pediatrics, and behavioral medicine
- Led by a Chair and Vice Chairs
- Serve 4-year terms
- Appointed by the Secretary of HHS
- Undergo a rigorous review of potential conflicts of interest
- Current members include deans, medical directors, practicing clinicians, and professors
  - <https://www.uspreventiveservicestaskforce.org/uspstf/about-uspstf/current-members>

# AHRQ's Support of the Task Force

- AHRQ, an agency within the U.S. Department of Health and Human Services (HHS) provides administrative, scientific, technical, and dissemination support to the USPSTF
- AHRQ's Mission: to produce evidence to make health care safer, higher quality, more accessible, equitable, and affordable, and to work within HHS and with other partners to make sure that the evidence is understood and used
- While AHRQ provides support to the USPSTF, it is important to note that the USPSTF is a scientifically independent entity

# Recommendation Development Process

- Rigorous five stage recommendation development process:
  - Review Topic Nominations
  - Develop Draft Research Plan
  - Review Public Comments & Finalize Research Plan
  - Review Evidence & Develop Draft Recommendation
  - Review Public Comments & Finalize Recommendation
- 4-week public comment period on all draft materials
- The Task Force works with AHRQ Evidence-based Practice Centers (EPCs) to develop research plans and review evidence
- Subject matter experts are consulted throughout the recommendation development process
- Procedure Manual available under Methods and Processes at [www.uspreventiveservicestaskforce.org](http://www.uspreventiveservicestaskforce.org)



# Recommendation Development Process, cont'd.

1



## Review Topic Nominations

- Anyone can nominate a new topic for review at any time
- USPSTF reviews nominated topics for relevance to and impact on prevention, primary care, and public health
- USPSTF selects and prioritizes topics for review





# Recommendation Development Process, cont'd.

2

## Develop Draft Research Plan

- Once topic is prioritized for review, USPSTF and an Evidence-based Practice Center (EPC) develop a research plan and seek expert input
- USPSTF posts the draft research plan to website for public comment



# Recommendation Development Process, cont'd.

3

## Review Public Comments & Finalize Research Plan

- USPSTF and EPC review all comments carefully and revise the research plan
- USPSTF posts the final research plan to website



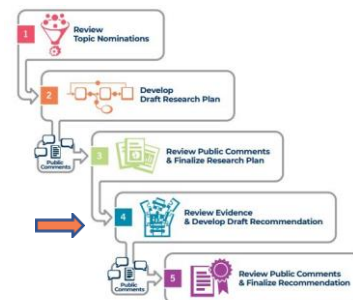
# Recommendation Development Process, cont'd.

## 4



### Review Evidence & Develop Draft Recommendation

- EPC analyzes peer-reviewed evidence; develops a draft evidence review
- USPSTF assesses EPC-gathered evidence, weighing effectiveness and benefits/harms and develops a draft recommendation statement
- USPSTF posts the draft recommendation statement and EPC evidence review to its website for public comment



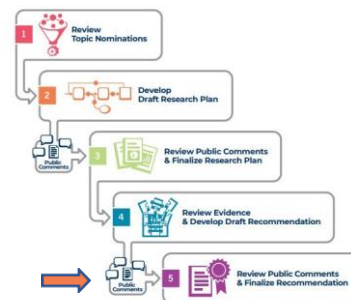
# Recommendation Development Process, cont'd.

5



## Review Public Comments & Finalize Recommendation

- EPC and USPSTF consider all comments on the draft evidence review, then EPC finalizes
- USPSTF considers all comments on the draft recommendation statement, then finalizes
- USPSTF posts the final recommendation and evidence summary to website and publishes in a peer-reviewed journal



# Recommendation Grades

Letter grades are assigned to each recommendation statement. These [grades](#) are based on the strength of the evidence and the balance of benefits and harms of a specific preventive service

Grade	Definition
A	The USPSTF recommends the service. There is high certainty that the net benefit is substantial.
B	The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.
C	The USPSTF recommends selectively offering or providing this service to individual patients based on professional judgment and patient preferences. There is at least moderate certainty that the net benefit is small.
D	The USPSTF recommends against the service. There is moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits.
I Statement	The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of the service. Evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined.

# USPSTF Partners

- USPSTF Partners provide input on recommendations and facilitate dissemination and implementation. Partners represent:
  - Primary care clinicians, consumers, and other stakeholders
  - Federal agencies
- Partners help the Task Force ensure that its recommendations are useful for clinicians and able to be put into practice
- Partners also support the Task Force as they work to keep America's primary care workforce up-to-date on USPSTF recommendations

# USPSTF Partners, cont'd.

## Partners Who Support Primary Care Delivery

- American Academy of Family Physicians (AAFP)
- American Association of Nurse Practitioners (AANP)
- American Academy of Pediatrics (AAP)
- American Academy of Physician Associates (AAPA)
- American College of Nurse-Midwives (ACNM)
- American College of Obstetricians and Gynecologists (ACOG)
- American College of Physicians (ACP)
- American College of Preventive Medicine (ACPM)
- American Geriatrics Society (AGS)
- American Medical Association (AMA)
- American Osteopathic Association (AOA)
- American Psychological Association (APA)
- Association of American Indian Physicians (AAIP)
- Health Professionals Advancing LGBTQ Equality (GLMA)
- National Association of Pediatric Nurse Practitioners (NAPNAP)
- National Council of Asian Pacific Islander Physicians (NCAPIIP)
- National Hispanic Medical Association (NHMA)
- National Medical Association (NMA)/Cobb Institute

## Partners Focused on Healthcare Utilization, Coverage, and Quality

- America's Health Insurance Plans (AHIP)
- AARP
- Business Group on Health (BGH)
- National Committee for Quality Assurance (NCQA)
- Patient-Centered Outcomes Research Institute (PCORI)

## Partners Who Develop Recommendations on Prevention

- Canadian Task Force on Preventive Health Care (CTFPHC)
- Community Preventive Services Task Force (CPSTF)

## Federal Partners

- Centers for Disease Control and Prevention (CDC)
- Centers for Medicare & Medicaid Services (CMS)
- Department of Defense (DOD) Military Health System
- Department of Health and Human Services, Office of Minority Health (OMH)
- Department of Veterans Affairs (VA) Center for Health Promotion & Disease Prevention
- Health Resources and Services Administration (HRSA)
- Indian Health Service (IHS)
- National Cancer Institute (NCI)
- National Institutes of Health (NIH)
- Office of the Assistant Secretary for Health, Office of Disease Prevention and Health Promotion (ODPHP)
- Substance Abuse and Mental Health Services Administration (SAMHSA)
- U.S. Food and Drug Administration (FDA)

# Public Engagement with the USPSTF

- The Task Force is committed to transparency and public engagement
- There are several opportunities for the public to provide input:
  - Task Force member nomination
  - Topic nomination
  - Public comment periods during draft stages
- USPSTF email list helps the public stay up-to-date on Task Force activities, including public comment periods
- Individuals and organizations can provide comments and sign up for the email list by visiting the Task Force website:  
<https://www.uspreventiveservicestaskforce.org>



# USPSTF Dissemination Efforts

- Some activities the Task Force conducts to disseminate its recommendations include:
  - **Prevention TaskForce** (<https://www.uspreventiveservicestaskforce.org/apps/>) a website and mobile app that allows health care providers to identify which preventive services are right for their patients
  - **MyHealthfinder website** (<https://health.gov/myhealthfinder>) a tool for patients to learn more about prevention and find the right preventives services for them
  - **Email list notifications** to alert subscribers to topic activity as well as general Task Force updates
  - **News bulletins** to summarize recommendations for the media
  - **Plain language summaries** of Task Force draft recommendations to help individuals understand recommendations before submitting comments

# USPSTF Dissemination Efforts, cont'd.

- The Task Force also has a **partnership with the *Journal of the American Medical Association (JAMA)*** to publish final recommendation statements and evidence summaries, reaching a wide network of clinicians and the public
  - *JAMA* develops materials including a patient page and audio podcast to help explain recommendations
- Beyond final recommendations, the Task Force:
  - Publishes a yearly **Report to Congress** to highlight evidence gaps and guide future research
  - Publishes **editorials** in peer-reviewed journals about different areas of interest in prevention and evidence-based medicine

**Thank you for your interest.**

**[www.USPreventiveServicesTaskForce.org](http://www.USPreventiveServicesTaskForce.org)**