EMPLOYEE

POST-TRAVEL DISCLOSURE FORM

This form is for disclosing the receipt of travel expenses from private sources for meetings, speaking engagements, fact-finding trips or similar events in connection with official duties. You need not disclose government-funded or political travel on this form, or travel that is unrelated to official duties. This form does not eliminate the need to report all privately-funded travel on the annual Financial Disclosure Statements of those persons required to file them. In accordance with clause 5 of House Rule 25, complete this form and file it with the Clerk of the House of Representatives, B-106 Cannon House Office Building, within 15 days after travel is completed. The Clerk is to make these forms publicly available as soon as possible after they are received. Obtain the dollar amounts from the sponsor; if exact dollar amounts are unavailable, provide a good faith estimate.

Name of Employee (print or type): Rachel Post

Name of Accompanying Family Member (if any): n/a

Relationship to Employee: □ Spouse □ Child □ Other (specify):

Date of Departure and Date of Return: 9/30/07 to 10/1/07

Dates at Personal Expense: n/a


Sponsor(s) (who paid for the trip): National Health Policy Forum - George Washington University

Describe meetings and events attended (attach additional pages if necessary): Met with representatives of state and local health and mental hygiene agencies and visited campuses of two mental health providers.

Attached to this form are EACH of the following (signify “yes” for each item by checking the corresponding box):

1. □ the Private Sponsor Travel Certification Form completed by trip sponsor, including all attachments;
2. □ the Privately-Sponsored Travel Approval Form completed by the employee; and
3. □ the Committee on Standards’ letter approving my participation on this trip.

I represent that I participated in each of the activities reflected in the sponsor’s agenda (signify “yes” by checking box): □

If not, explain: ________________________________
## TRAVEL EXPENSES:

<table>
<thead>
<tr>
<th></th>
<th>Total Transportation Expenses</th>
<th>Total Lodging Expenses</th>
<th>Total Meal Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>For employee:</td>
<td>$34.00</td>
<td>$218.00</td>
<td>$126.00</td>
</tr>
<tr>
<td>For accompanying family member:</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Other Expenses (dollar amount)</th>
<th>Specific Nature of Expenses (e.g., taxi, parking, registration fee, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>For employee:</td>
<td>$44.78</td>
<td>mileage reimbursement for round-trip travel from home to Baltimore</td>
</tr>
<tr>
<td>For accompanying family member:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I certify that the information contained in this form is true, complete, and correct to the best of my knowledge.

SIGNATURE OF EMPLOYEE: ___________________________  DATE: 10/9/07

I authorized this travel in advance. I have determined that all of the expenses listed above were necessary and that the travel was in connection with the employee’s official duties and would not create the appearance that the employee is using public office for private gain.

NAME OF SUPERVISING MEMBER: ______________________  DATE: 10-9-07

SIGNATURE OF SUPERVISING MEMBER: ______________________  DATE: 10-9-07

Version date 4/2007 by Committee on Standards of Official Conduct
Advance Authorization of Employee Travel

I hereby authorize Rachel Post, an employee of the U.S. House of Representatives who works under my direct supervision, to accept expenses from National Health Policy Forum/George Washington University private source that will make reimbursement for the following activity:

Dates of travel: 9/30/07 - 10/1/07

Place(s) of travel: Baltimore, MD

Purpose of travel: Study behavioral health; children

I have determined that the above-described travel is in connection with my employee's official duties and that acceptance of these expenses will not create the appearance that the employee is using public office for private gain.

Member of Congress

Date

This form must be personally signed by the employee's supervising Member and must be completed prior to the employee's departure.
Ms. Rachel Post  
Office of Congressman Vernon J. Ehlers  
2182 Rayburn House Office Building  
Washington, DC 20515

Dear Ms. Post:

Pursuant to House Rule XXV, clause 5(d)(2), the Committee on Standards of Official Conduct hereby approves your proposed trip to Baltimore, Maryland scheduled for September 30 to October 1, 2007 sponsored by the National Health Policy Forum, George Washington University.

You must complete an Employee Travel Disclosure Form (which your employing Member must also sign) and file it with the Clerk of the House within 15 days after your return from travel. As part of that filing, you are required to attach a copy of this letter and the Private Sponsor Travel Certification Form, including all attachments. You must also include a copy of the Privately-Sponsored Travel Approval Form completed by you and signed by your employing Member. If you are required to file an annual Financial Disclosure Statement, you must also report all travel expenses totaling more than $305 from a single source on Schedule VII of that statement.

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 57103.

Sincerely,

Stephanie Tubbs Jones  
Chairwoman

Doc Hastings  
Ranking Republican Member

STJ/DH:trs
U.S. House of Representatives
Committee on Standards of Official Conduct

PRIVATELY-SPONSORED TRAVEL APPROVAL FORM
For Members, Officers and Employees
(submit directly to the Committee)

This form should be completed by House Members, officers or employees seeking Committee approval of privately-sponsored travel or reimbursement for travel under House Rule XXV, clause 5. The completed form should be submitted directly to the Committee by each invited House Member, officer or employee, together with the completed and signed Private Sponsor Travel Certification Form.

Members, officers and employees seeking approval for travel are urged to submit all forms to the Committee at least 30 days before travel is scheduled to begin. The failure to provide the Committee with adequate time to review the form and attachments may result in the invitee not receiving approval for the trip. The submission of an incomplete form will delay the review process. A copy of this form will be made available for public inspection. Please type form. Form (and any attachments) may be faxed to the Committee at (202) 226-7172.

1. Name of Member, officer or employee (traveler): Rachel Post

2. Sponsor(s) (who will be paying for the trip): National Health Policy Forum, George Washington University

3. a. Dates of travel: September 30 - October 1, 2007

   b. Will you be extending the trip at your personal expense? ☐ Yes ☐ No
      If yes, dates at personal expense:

4. If travel is for participation a one-day event (per trip sponsor question 10), check one of the following:
   a. Approval for one-night’s lodging and meals is being requested: ☐ or
   b. Approval for two-nights’ lodging and meals is being requested: ☐
      If “b” is checked, explain why the second night is warranted:

5. Travel destination(s): Baltimore, MD

6. Explain why participation in the trip is connected to your official or representational duties:
   I assist Rep. Ehlers with health and education policy issues, and this study trip is directly connected since it would provide a review of a full continuum of services for children with behavioral health problems

7. Private Sponsor Travel Certification Form is attached, including agenda, invitee list, and any other attachments (signify “yes” by checking box): ☐
8. I certify that the information contained in this form is true, complete, and correct to the best of my knowledge.

Signature: 

Name of Signatory (if other than traveler): 

For staff, name of employing Member/Committee: Rep. Vernor J. Ehlers 

Office address: 2182 Rayburn HOB, Washington, DC 20515 

Phone number: 202-225-3831 

Email address: rachal.post@mail.house.gov 

Committee staff may contact you if additional information is required. 

FOR STAFF:
TO BE COMPLETED BY YOUR EMPLOYING MEMBER:

I hereby authorize the individual named above, an employee of the U.S. House of Representatives who works under my direct supervision, to accept expenses for the trip described in this request. I have determined that the above-described travel is in connection with my employee's official duties and that acceptance of these expenses will not create the appearance that the employee is using public office for private gain.

Signature of Employing Member 

Date: 9-11-07 

If there are any questions regarding this form please contact the Committee:

Committee on Standards of Official Conduct 
U.S. House of Representatives 
HT-2, The Capitol 
Washington, DC 20515 
(202) 225-7103 (phone) 
(202) 225-7392 (general fax) 
(202) 226-7172 (fax for travel approvals) 

Version date 4/2007 by Committee on Standards of Official Conduct
U.S. House of Representatives  
Committee on Standards of Official Conduct  

PRIVATE SPONSOR TRAVEL CERTIFICATION FORM  
(provide directly to each House invitee)  

This form should be completed by private entities offering to provide travel or reimbursement for travel to House Members, officers, or employees under House Rule XXV, clause 5. A completed copy of the form (and any attachments) should be provided to each invited House Member, officer, or employee, who will then forward it to the Committee. The trip sponsor should NOT submit the form directly to the Committee. 

Private sponsors are urged to submit this form to each House invitee at least 30 days before travel is scheduled to begin. The failure to provide the Committee with adequate time to review the form and attachments may result in the invitee not receiving approval for the trip. The submission of an incomplete form will delay the review process. Before completing this form, sponsors are urged to carefully review the Committee’s private travel guidelines and advisory memos and the rules and restrictions for private travel, as well as the instructions for completing this form. Sponsors should call the Committee with any questions prior to submitting the form. Please type form.  

1. Sponsor(s) (who will be paying for the trip): National Health Policy Forum, Washington University  

2. I represent that the trip will not be financed in whole or in part by a federally registered lobbyist or a registered foreign agent (signify “yes” by checking box): [ ]  

3. I represent that the trip sponsor(s) has not accepted from any other source funds earmarked directly or indirectly to finance any aspect of the trip (signify “yes” by checking box): [ ]  

4. Is travel being offered to an accompanying family member of the House invitee(s)? [ ] Yes [ ] No  

5. Provide the names and titles of all House invitees; for each invitee, provide explanation of why the individual was invited (include additional pages if necessary):  
We invited all House LAS + Cmte Staff who have come to or expressed interest in NHPF programs. *  


8. Attached is a detailed agenda of the activities taking place during the travel (i.e., an hourly description of planned activities) (signify “yes” by checking box): [ ]  

9. I represent that (check one of the following):  
a. The sponsor of the trip is an institution of higher education within the meaning of section 101 of the Higher Education Act of 1965: [ ] or  
b. The sponsor of the trip does not retain or employ a federally registered lobbyist or registered foreign agent: [ ] or  
c. The trip is for attendance at a one-day event and lobbyist involvement in planning, organizing, requesting, or arranging the trip was de minimis under the Committee’s travel regulations. [ ]  

10. If travel is for participation in a one-day event (i.e., if you checked Question 9(c)), check one of the following:  
a. One-night’s lodging and meals are being offered: [ ] or  
b. Two-nights’ lodging and meals are being offered: [ ]  
If “b” is checked, explain why the second night is warranted:  

* We expect only a small group—those responsible for children’s or mental health issues—to actually attend. A list of those who have expressed interest is attached.
11. If the trip is not sponsored by an institution of higher education, I represent that a federally-registered lobbyist or foreign agent will not accompany House Members or employees on any segment of the trip (signify "yes" by checking box): □

12. Private sponsors must have a direct and immediate relationship to the purpose of the trip or location being visited. Describe the role of each sponsor in organizing and conducting the trip: NHPF has identified all the speakers, developed the agenda, and will conduct the site visit.

13. Describe each sponsor’s organizational interest in the purpose of the trip: NHPF’s mission is to inform the policy making process by providing opportunities for health staff to observe the implementation of programs at state and local levels.

14. Describe the type and class of the transportation being provided. Indicate whether coach, business-class or first-class transportation will be provided. In addition, for travel via aircraft, please indicate if travel is being offered on a commercial flight, chartered flight or on an aircraft operated or paid for by a carrier not licensed by the Federal Aviation Administration to operate for compensation or hire (i.e., a private aircraft). If first-class fare is being provided, or if travel is via chartered or private aircraft, please provide an explanation describing why such travel is warranted: Participants will drive their own cars or take Amtrak to Baltimore. A standard commercial bus will transport site visitors between locations.

15. I represent that the expenditures related to local area travel during the trip will be unrelated to personal or recreational activities of the invitee(s). (signify "yes" by checking box): □

16. I represent that either (check one of the following):
   a. The trip involves an event that is arranged or organized without regard to congressional participation and that meals provided to congressional participants are similar to those provided to or purchased by other event attendees: □ or □
   b. The trip involves events that are arranged or organized specifically with regard to congressional participation: □
      If "b" is checked, detail the cost per day of meals (approximate cost may be provided):

17. Reason for selecting the location of the event or trip: Baltimore provides a full continuum of services for children w/behavioral health problems. It is accessible for a short trip.

18. Name of hotel or other lodging facility: Admiral Fell Inn.

19. Cost per night of hotel or other lodging facility (approximate cost may be provided): $170 - $230 depending on how early individuals sign up.

20. Reason(s) for selecting hotel or other lodging facility: The hotel is very near several of the site visit locations, minimizing travel time. NHPF has used this hotel before.
21. **TOTAL EXPENSES FOR EACH PARTICIPANT:**

<table>
<thead>
<tr>
<th>Actual amounts</th>
<th>Total Transportation Expenses per Participant</th>
<th>Total Lodging Expenses per Participant</th>
<th>Total Meal Expenses per Participant</th>
</tr>
</thead>
<tbody>
<tr>
<td>X good faith estimates</td>
<td>$100 - car/bus</td>
<td>$170 - 250</td>
<td>$150 - 175</td>
</tr>
<tr>
<td>For each Member, Officer, or employee</td>
<td>$130 - train/bus</td>
<td>$100 - cab</td>
<td></td>
</tr>
<tr>
<td>For each accompanying family member</td>
<td>$100 - train/bus</td>
<td>$100 - cab</td>
<td></td>
</tr>
</tbody>
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<thead>
<tr>
<th>Other Expenses (dollar amount)</th>
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<td></td>
</tr>
<tr>
<td>For each accompanying family member</td>
<td></td>
</tr>
</tbody>
</table>

22. I represent that reimbursement for miscellaneous travel expenses for the trip, such as travel to and from airports, security costs, interpreter fees, visa application fees, and similar expenses, will be for actual costs incurred and are necessary for the purpose of the trip (signify "yes" by checking box): [ ]

23. I certify that the information contained in this form is true, complete, and correct to the best of my knowledge.

Signature: [Signature]

Name and title: Sally Coberly, Deputy Director

Organization: National Health Policy Forum, GWU

Address: 2151 K St. NW, #500, WDC 20037

Telephone number: 202-872-4034

Fax number: 202-863-9837

Email Address: scoberly@gwu.edu

The Committee staff may contact the above individual above if additional information is required.

If there are any questions regarding this form please contact the Committee at the following address:

Committee on Standards of Official Conduct
U.S. House of Representatives
HT-2, The Capitol
Washington, DC 20515
(202) 225-7103 (phone)
(202) 225-7392 (general fax)
(202) 226-7172 (fax for travel approvals)
Children’s Behavioral Health Services in Baltimore: Walking the Continuum

September 30 – October 1, 2007

Sunday, September 30, 2007
[Admiral Fell Inn, Captain’s Room, 888 South Broadway, Baltimore, MD]

3:30 pm Check-in and Registration

4:00 pm Welcome and Site Visit Overview
Jennifer Ryan, Principal Policy Analyst, National Health Policy Forum
Christopher Loftis, PhD, Policy Analyst, National Health Policy Forum

4:15 pm CHILDREN’S MEDICAID AND MENTAL HEALTH SERVICES IN MARYLAND
Susan Tucker, Executive Director, Office of Health Services, Maryland Department of Health and Mental Hygiene
Al Zachik, MD, Director, Child & Adolescent Services, Mental Hygiene Administration, Maryland Department of Health and Mental Hygiene

5:15 pm MENTAL HEALTH TRANSFORMATION: BRAIDING LOCAL, STATE, AND FEDERAL FUNDING
Daryl Plevy, Director, Maryland Mental Health Transformation Office, Maryland Department of Health and Mental Hygiene
Joshua Sharfstein, MD, Commissioner, Baltimore City Department of Health
Steve Baron, LCSW-C, Director, District of Columbia Department of Mental Health

6:15 pm Break

6:30 pm Dinner [Captain’s Room, Admiral Fell Inn]

8:30 pm Adjourn for the evening

Monday, October 1, 2007

8:00 am Breakfast available [Captain’s Room]

8:30 am SCHOOL DAYS: EXPLORING BEHAVIORAL HEALTH SERVICES IN SCHOOL-BASED SETTINGS
Mark D. Weist, PhD, Director, Center for School Mental Health Assistance, University of Maryland School of Medicine
Jacquelyn Duval-Harvey, PhD, Director, Community Based Services, Division of Child and Adolescent Psychiatry, Johns Hopkins University.

Gerry Grimm, Fiscal Strategies Specialist, Family League of Baltimore City

9:45 am  
Break

10:00 am  
Depart for Kennedy Krieger Institute, Fairmount Campus
[1750 E. Fairmount Ave., Baltimore, MD]

10:30 am  
ALTERNATIVE PLACEMENTS: HIGH INTENSITY SPECIAL EDUCATION SERVICES
Robin Church, Vice President for Educational Programs, Kennedy Krieger Institute
David Stone, Director of Operations, Kennedy Krieger Institute

Additional panelists will include staff from special education, mental health, and the KKI Autism program.

12:00 pm  
Depart for Sheppard Pratt Health System
[6501 North Charles Street Baltimore, Maryland]

12:30 pm  
Lunch and Introduction to Sheppard Pratt
Bonnie B. Katz, Vice President, Corporate Business Development
Sheppard Pratt Health System

1:00 pm  
CARING FOR CHILDREN IN CRISIS: INPATIENT AND DAY HOSPITAL SETTINGS
Michael A. Bogrov, MD, Services Chief, Child Unit, Child and Adolescent Services, Sheppard Pratt Health System
Meena Vimalananda, MD, Medical Director, Child and Adolescent Services, Sheppard Pratt Health System

2:00 pm  
Tours of Inpatient Hospital and Day Hospital wings

3:00 pm  
Depart for Admiral Fell Inn [888 South Broadway, Baltimore, MD]

3:30 pm  
OPERATION SAFE KIDS: HOPE FOR THE FUTURE [Captain’s Room]
Catherine Fine, Director, Operation Safe Kids, Baltimore City Department of Health
Additional panelists will include representatives from the Departments of Social Services, Child Welfare, Juvenile Justice and Mental Health

4:30 pm  
LOOKING TO THE FUTURE: KEY PRIORITIES
John Colmers (invited), Secretary, Maryland Department of Health and Mental Hygiene

5:00 pm  
Adjournment
Baltimore, MD Site Visit
Federal Participants List
9-30 to 10-1-07
(MH)

Irma Arias, PhD
Associate Director for Life Sciences
Office of Science and Technology Policy
The White House
New Executive Office Building
Washington, DC 20502
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202/456-6127 (fax)
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Charlotte Mulligan, MPH
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Andrea Richardson
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Mona Shah, JD, MPH
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amy.thornton@mail.house.gov