# **Employee Post-Travel Disclosure Form**

V	Original	Amendment
_	Original	 milliamilliam

This form is for disclosing the receipt of travel expenses from private sources for travel taken in connection with official duties. This form does not eliminate the need to report privately-funded travel on the annual *Financial Disclosure* Statements of those employees required to file them. In accordance with House Rule 25, clause 5, you must complete this form and file it with the Clerk of the House, B-81 Cannon House Office Building, within 15 days after travel is completed. Please do not file this form with the Committee on Ethics.

NO	TE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001
1.	Name of Traveler: Colleen Nguyen
2.	a. Name of Accompanying Relative: OR None 🗹
	b. Relationship to Traveler:   Spouse   Child   Other (specify):
3.	a. Dates: Departure: April 5, 2019 Return: April 7, 2019
	b. Dates at Personal Expense, if any:
4.	Departure City: Washington, DC Destination: Warrenton, VA Return City: Washington, DC
5.	Sponsor(s), Who Paid for the Trip: Alliance for Health Policy and The Commonwealth Fund
6.	Describe Meetings and Events Attended: Lattended a number of panels discussing health policy and what
	Congress can do.
8.	<ul> <li>a. ☑ a completed Sponsor Post-Travel Disclosure Form;</li> <li>b. ☑ the Primary Trip Sponsor Form completed by the trip sponsor prior to the trip, including all attachments and the Grantmaking or Non-Grantmaking Sponsor Forms;</li> <li>c. ☑ page 2 of the completed Traveler Form submitted by the employee; and</li> <li>d. ☑ the letter from the Committee on Ethics approving my participation on this trip.</li> <li>a. I represent that I participated in each of the activities reflected in the attached sponsor's agenda.</li> <li>Signify statement is true by checking the box: ☑</li> </ul>
	b. If not, explain:
Sig I au Dis cre	ertify that the information contained on this form is true, complete, and correct to the best of my knowledge.  Inature of Traveler:  Date: 4/12/19  Inthorized this travel in advance. I have determined that all of the expenses listed on the attached Sponsor Post-Travel sclosure Form were necessary and that the travel was in connection with the employee's official duties and would not atte the appearance that the employee is using public office for private gain.  Date: 4/12/19  Date: 4/12/19
	nature of Supervising Members Ani Re
* 1A	notiled of Ninophicing Mombos.

# **Sponsor Post-Travel Disclosure Form**

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This form must be completed by an officer of any organization that served as the primary trip sponsor in providing travel expenses or reimbursement for travel expenses to House Members, officers, or employees under House Rule 25, clause 5. A completed copy of the form must be provided to each House Member, officer, or employee who participated on the trip within ten days of their return. You must answer all questions, and check all boxes, on this form for your submission to comply with House rules and the Committee's travel regulations. Failure to comply with this requirement may result in the denial of future requests to sponsor trips and/or subject the current traveler to disciplinary action or a requirement to repay the trip expenses.

			tion or a requirement to rep		
			form may be subject to crin or Health Policy and The		ant to 18 U.S.C. § 1001.
1.	sponsor(s) who par	d for the trip.		e e e e e e e e e e e e e e e e e e e	
2.	Travel Destination(	(s): Airlie, 6809 Airlie Roa	ad, Warrenton VA		
	Date of Departure:		Date of Ret	urn: April 7th 2019	
		r(s): Collen Nguyen			
			n a form only if <i>all</i> inform		
5.	Actual amount of o		of, or reimbursed to, each		
		Total <b>Transportation</b> Expenses	Total Lodging Expenses	Total <b>Meal</b> Expenses	Total <b>Other</b> Expenses (dollar amount per item and description
	Traveler	\$58.30	\$188.00	\$165.00	\$109.00 - facilities use fee and cost of materials
	Accompanying Family Member	NA	NA	NA	NA
	All expenses conne statement is true by		actual costs incurred and	not a <i>per diem</i> or lum	p sum payment. Signify
I cei	rtify that the inform	nation contained in this	form is true, complete,	and correct to the bes	t of my knowledge.
Sign	nature:Savo	le Dash	Did Ace	Date: 4/10/20	019
Nan	ne: Sarah Dash / D	avid Blumenthal		Title: Preside	ent and CEO / President
Orga	anization: Alliance	for Health Policy / The C	Commonwealth Fund		
I an	n an officer of the al	bove-named organization	n. Signify statement is tri	ue by checking box: 🗹	]
Add	ress: 1444 I Street	NW, Suite 910, Washing	gton, DC, 20005 / 1 East	75th Street, NY,NY, 1	0021
Tele	phone: 202-789-23	00 / 212-606-3800		Email: sarahdash	@allhealthpolicy.org / db
	Committe	e staff may contact the al	bove-named individual i	f additional informati	ion is required.

If you have questions regarding your completion of this form, please contact the Committee on Ethics at 202-225-7103.

# TRAVELER FORM

1.	Name of Traveler: Colleen R. Nguyen
2.	Sponsor(s) who will be paying for the trip:  Alliance for Health Policy and The Commonwealth Fund
3.	Travel Destination(s): The Airlie Center, Warrenton, VA
	a. Date of Departure: April 5, 2019 Date of Return: April 7, 2019
	b. Will you be extending the trip at your personal expense?   Yes   No
	If yes, list dates at personal expense:
5.	a. Will you be accompanied by a family member at the sponsor's expense?   Yes  No If yes:
-	(1) Name of Accompanying Family Member:
	(2) Relationship to Traveler: Spouse Child Other (specify):
	(3) Accompanying Family Member is at least 18 years of age:  Yes No
6.	<ul> <li>a. Did the trip sponsor answer "Yes" to Question 8(c) on the Primary Trip Sponsor Form (i.e., travel is sponsored by an entity that employs a registered federal lobbyist or a foreign agent)?  Yes No</li> <li>b. If yes, and you are requesting lodging for two nights, explain why the second night is warranted:</li> </ul>
7.	Primary Trip Sponsor Form is attached, including agenda, invitee list, and any other attachments and contributing sponsor forms:   Yes No  NOTE: The agenda should show the traveler's individual schedule, including departure and arrival times and identify the specific events in which the traveler will be participating.
8.	Explain why participation in the trip is connected to the traveler's individual official or representational duties. Staff should include their job title and how the activities on the itinerary relate to their duties.
	As Rep. Bera's Senior Policy Advisor, I work on health policy issues for Rep. Bera and this conference will examine critical
	health policy issues.
9.	Is the traveler aware of any registered federal lobbyists or foreign agents involved planning, organizing, requesting, or arranging the trip?   Yes  No
10.	. For staff travelers, to be completed by your employing Member:
	ADVANCED AUTHORIZATION OF EMPLOYEE TRAVEL
dir tra	hereby authorize the individual named above, an employee of the U.S. House of Representatives who works under my rect supervision, to accept expenses for the trip described in this request. I have determined that the above-described evel is in connection with my employee's official duties and that acceptance of these expenses will not create the pearance that the employee is using public office for private gain.
Sig	gnature of Employing Member And Beauty Date 2/28/2019

## **Primary Trip Sponsor Form**

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 25, 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 together with a Traveler Form at least 30 days before the start date of the trip. The trip sponsor should NOT submit the form directly to the Committee. The Committee website (ethics. house.gov) provides detailed instructions for filling out the form.

NOTE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001. Failure

Signify that the statement is true by checking box:   Check only one. I represent that:  a. The primary trip sponsor has not accepted from any other source, funds intended directly or indirectly to any aspect of the trip: □ OR  b. The trip is arranged without regard to congressional participation and the primary trip sponsor has accept only from entities that will receive a tangible benefit in exchange for those funds: □ OR  c. The primary trip sponsor has accepted funds from other source(s) intended directly or indirectly to finance part of this trip and has enclosed disclosure forms from each of those entities. □  If "c" is checked, list the names of the additional sponsors:  4. Provide names and titles of ALL House Members and employees you are inviting. For each House invitee, prexplanation of why the individual was invited (include additional pages if necessary): (answer attached)  5. Is travel being offered to an accompanying family member of the House invite(s)? □ Yes □ No  Date of Departure: Friday, April 5th 2019 □ Date of Return: Sunday, April 7th 2019  a. City of departure: Washington, DC or dependent on location of attendee and congressional schedule  b. Destination(s): The Airlie Center, Warrenton, Va  c. City of return: Washington, DC or dependent on location of attendee and congressional schedule  Check only one. I represent that:  a. The sponsor of the trip is an institution of higher education within the meaning of section 101 of the High Education Act of 1965: □ OR  b. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent: □ OR  c. The sponsor employs or retains a registered federal lobbyist or foreign agent, but the trip is for attendance	to	comply with the Committee's Travel Regulations may also lead to the denial of permission to sponsor future trips.
Signify that the statement is true by checking box:     Check only one. I represent that:     a. The primary trip sponsor has not accepted from any other source, funds intended directly or indirectly to any aspect of the trip: □ OR     DR   DR   OR     DR   DR   DR   DR   DR     DR   DR	1.	
a. The primary trip sponsor has not accepted from any other source, funds intended directly or indirectly to any aspect of the trip: ☐ OR  b. The trip is arranged without regard to congressional participation and the primary trip sponsor has accept only from entities that will receive a tangible benefit in exchange for those funds: ☐ OR  c. The primary trip sponsor has accepted funds from other source(s) intended directly or indirectly to finance part of this trip and has enclosed disclosure forms from each of those entities. ☐  If "c" is checked, list the names of the additional sponsors:  4. Provide names and titles of ALL House Members and employees you are inviting. For each House invitee, pexplanation of why the individual was invited (include additional pages if necessary): (answer attached)  5. Is travel being offered to an accompanying family member of the House invitee(s)? ☐ Yes ☐ No  6. Date of Departure: Friday, April 5th 2019 ☐ Date of Return: Sunday, April 7th 2019  7. a. City of departure: Washington, DC or dependent on location of attendee and congressional schedule  b. Destination(s): The Airlie Center, Warrenton, Va  c. City of return: Washington, DC or dependent on location of attendee and congressional schedule  8. Check only one. I represent that:  a. The sponsor of the trip is an institution of higher education within the meaning of section 101 of the High Education Act of 1965: ☐ OR  b. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent: ☐ OR  c. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent, but the trip is for attendance one-day event and lobbyist / foreign agent involvement in planning, organizing, requesting, or arranging to was de minimis under the Committee's travel regulations. ☐  9. Check only one of the following:  a. I checked 8(c) above and am not offering any lodging: ☐  c. I checked 8(c) above and am offering lodging and meals for one night: ☐ OR  d. I checked 8(c) above and am of	2.	I represent that the trip will not be financed, in whole or in part, by a registered federal lobbyist or foreign agent. Signify that the statement is true by checking box:
only from entities that will receive a tangible benefit in exchange for those funds: ☐ OR  c. The primary trip sponsor has accepted funds from other source(s) intended directly or indirectly to finance part of this trip and has enclosed disclosure forms from each of those entities. ☐  If "c" is checked, list the names of the additional sponsors:  4. Provide names and titles of ALL House Members and employees you are inviting. For each House invitee, prexplanation of why the individual was invited (include additional pages if necessary): (answer attached)  5. Is travel being offered to an accompanying family member of the House invitee(s)? ☐ Yes ☐ No  6. Date of Departure: Friday, April 5th 2019 ☐ Date of Return: Sunday, April 7th 2019  7. a. City of departure: Washington, DC or dependent on location of attendee and congressional schedule  b. Destination(s): The Airlie Center, Warrenton, Va  c. City of return: Washington, DC or dependent on location of attendee and congressional schedule  8. Check only one. I represent that:  a. The sponsor of the trip is an institution of higher education within the meaning of section 101 of the High Education Act of 1965: ☐ OR  b. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent: ☐ OR  c. The sponsor employs or retains a registered federal lobbyist or foreign agent. ☐ OR  c. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent: ☐ OR  c. The sponsor of the following:  a. I checked 8(a) or (b) above: ☐  b. I checked 8(c) above but am not offering any lodging: ☐  c. I checked 8(c) above and am offering lodging and meals for one night: ☐ OR  d. I checked 8(c) above and am offering lodging and meals for two nights: ☐ If you checked this box, explain	3.	a. The primary trip sponsor has not accepted from any other source, funds intended directly or indirectly to finance any aspect of the trip: OR
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b. Destination(s): The Airlie Center, Warrenton, Va  c. City of return: Washington, DC or dependent on location of attendee and congressional schedule  8. Check only one. I represent that:  a. The sponsor of the trip is an institution of higher education within the meaning of section 101 of the High Education Act of 1965: OR  b. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent: OR  c. The sponsor employs or retains a registered federal lobbyist or foreign agent, but the trip is for attendance one-day event and lobbyist / foreign agent involvement in planning, organizing, requesting, or arranging twas de minimis under the Committee's travel regulations.  9. Check only one of the following:  a. I checked 8(a) or (b) above: D  b. I checked 8(c) above but am not offering any lodging: C  c. I checked 8(c) above and am offering lodging and meals for one night: OR  d. I checked 8(c) above and am offering lodging and meals for two nights: If you checked this box, explain	6.	
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<ul> <li>a. The sponsor of the trip is an institution of higher education within the meaning of section 101 of the High Education Act of 1965:  OR</li> <li>b. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent:  OR</li> <li>c. The sponsor employs or retains a registered federal lobbyist or foreign agent, but the trip is for attendance one-day event and lobbyist / foreign agent involvement in planning, organizing, requesting, or arranging t was de minimis under the Committee's travel regulations.  </li> <li>9. Check only one of the following: <ul> <li>a. I checked 8(a) or (b) above:  </li> <li>b. I checked 8(c) above but am not offering any lodging:  </li> <li>c. I checked 8(c) above and am offering lodging and meals for one night:  OR</li> <li>d. I checked 8(c) above and am offering lodging and meals for two nights:  If you checked this box, explain</li> </ul> </li> </ul>		c. City of return: Washington, DC or dependent on location of attendee and congressional schedule
<ul> <li>Education Act of 1965: ☐ OR</li> <li>b. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent: ☑ OR</li> <li>c. The sponsor employs or retains a registered federal lobbyist or foreign agent, but the trip is for attendance one-day event and lobbyist / foreign agent involvement in planning, organizing, requesting, or arranging t was de minimis under the Committee's travel regulations. ☐</li> <li>9. Check only one of the following: <ul> <li>a. I checked 8(a) or (b) above: ☑</li> <li>b. I checked 8(c) above but am not offering any lodging: ☐</li> <li>c. I checked 8(c) above and am offering lodging and meals for one night: ☐ OR</li> <li>d. I checked 8(c) above and am offering lodging and meals for two nights: ☐ If you checked this box, explain</li> </ul> </li> </ul>	8.	
<ul> <li>c. The sponsor employs or retains a registered federal lobbyist or foreign agent, but the trip is for attendance one-day event and lobbyist / foreign agent involvement in planning, organizing, requesting, or arranging t was de minimis under the Committee's travel regulations. □</li> <li>9. Check only one of the following: <ul> <li>a. I checked 8(a) or (b) above: □</li> <li>b. I checked 8(c) above but am not offering any lodging: □</li> <li>c. I checked 8(c) above and am offering lodging and meals for one night: □ OR</li> <li>d. I checked 8(c) above and am offering lodging and meals for two nights: □ If you checked this box, explain</li> </ul> </li> </ul>		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
one-day event <i>and</i> lobbyist / foreign agent involvement in planning, organizing, requesting, or arranging to was <i>de minimis</i> under the Committee's travel regulations. ☐  9. <i>Check only one of the following</i> :  a. I checked 8(a) or (b) above: ☑  b. I checked 8(c) above but am not offering any lodging: ☐  c. I checked 8(c) above and am offering lodging and meals for one night: ☐ OR  d. I checked 8(c) above and am offering lodging and meals for two nights: ☐ If you checked this box, explain		b. The sponsor of the trip does not retain or employ a registered federal lobbyist or foreign agent: OR
<ul> <li>a. I checked 8(a) or (b) above: </li> <li>b. I checked 8(c) above but am not offering any lodging: </li> <li>c. I checked 8(c) above and am offering lodging and meals for one night: </li> <li>d. I checked 8(c) above and am offering lodging and meals for two nights: </li> <li>□ If you checked this box, explain</li> </ul>		c. The sponsor employs or retains a registered federal lobbyist or foreign agent, but the trip is for attendance at a one-day event <i>and</i> lobbyist / foreign agent involvement in planning, organizing, requesting, or arranging the trip was <i>de minimis</i> under the Committee's travel regulations.
b. I checked 8(c) above but am not offering any lodging:   c. I checked 8(c) above and am offering lodging and meals for one night:   OR  d. I checked 8(c) above and am offering lodging and meals for two nights:   If you checked this box, explain	9.	
c. I checked 8(c) above and am offering lodging and meals for one night:  OR  d. I checked 8(c) above and am offering lodging and meals for two nights:  If you checked this box, explain		
d. I checked 8(c) above and am offering lodging and meals for two nights: 🔲 If you checked this box, explain		
second night of lodging is warranted:		
		second night of lodging is warranted:

10.	Attached is a detailed agenda of the activities House invitees will be participating in during the travel (i.e., an hourly description of planned activities for trip invitees). <i>Indicate agenda is attached by checking box:</i>
11.	<ul> <li>Check only one of the following:</li> <li>a. I represent that a registered federal lobbyist or foreign agent will not accompany House Members or employees on any segment of the trip. Signify that the statement is true by checking box: ☑ OR</li> </ul>
	b. <i>Not Applicable</i> . Trip sponsor is a U.S. institution of higher education:
12.	For <i>each</i> sponsor required to submit a sponsor form, describe the sponsor's interest in the subject matter of the trip <i>and</i> its role in organizing and/or conducting the trip:  (answer attached)
13.	Answer parts a and b. Answer part c if neccessary:  a. Mode of travel: Air \( \Backslash \) Rail \( \Backslash \) Bus \( \vec{\sqrt{2}} \) Car \( \vec{\sqrt{2}} \) Other \( \Backslash \) (specify: Members/staff may drive a personal)
	b. Class of travel: Coach ☐ Business ☐ First ☐ Charter ☑ Other ☐ (specify:
14.	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 that the statement is true by checking box:
15.	<ul> <li>Check only one. I represent that either:</li> <li>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:</li> <li>OR</li> </ul>
	b. The trip involves events that are arranged specifically <i>with regard</i> to congressional participation: If "b" is checked:
	1) Detail the cost per day of meals (approximate cost may be provided): We estimate that costs will be;
	Friday, April 5th, \$55.00 - Saturday, April 6th, \$55.00 and Sunday, April 7th \$55.00
	2) Provide the reason for selecting the location of the event or trip: (answer attached)
	Name, nightly cost, and reasons for selecting each hotel or other lodging facility:  Hotel Name: Airlie City: Warrenton, VA Cost Per Night: \$94.00
	Reason(s) for Selecting: (See attached reasons from Q15, part B, number 2)
	Hotel Name: City: Cost Per Night:
	Reason(s) for Selecting:
	Hotel Name: City: Cost Per Night:
	Reason(s) for Selecting:
	I represent that all expenses connected to the trip will be for actual costs incurred and not a per diem or lump sum payment. Signify that the statement is true by checking box:

## 18. Total Expenses for each Participant:

☐ Actual Amounts ☐ Good Faith Estimates		Total Lodging Expenses per Participant	Total Meal Expenses per Participant
For each Member, Officer, or Employee	\$26.00	\$188.00	\$165.00
For each Accompanying Family Member	\$26.00	\$0	\$165.00

		Identify Specific Nature of "Other" Expenses (e.g., taxi, parking, registration fee, etc.)
For each Member, Officer, or Employee	\$109.00	(see attached)
For each Accompanying Family Member	\$109.00	(see attached)

NOTE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001.

19.	Check	koni	ly one:

- a. I certify that I am an officer of the organization listed below: OR
- b. *Not Applicable*. Trip sponsor is an individual or a U.S. institution of higher education.  $\square$
- 20. I certify that I am not a registered federal lobbyist or foreign agent for any sponsor of this trip.

21. I certify by my signature that the information contained in this form is true, complete, and correct to the best of my knowledge.	
Signature: Sarah Dad Acade: 2/22/2019	
Name: Sarah J. Dash / David Blumenthal, M.D.	
Title: President and CEO / President	
Organization: Alliance for Health Policy / The Commonwealth Fund	
1444 I Street, NW, Suite 910, Washington, DC 20005 / 1 East 75th Street, NY,NY,10021	
202-789-2300 / 212-606-3800 Telephone:	

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

### Committee on Ethics

U.S. House of Representatives

1015 Longworth House Office Building, Washington, D.C. 2053

Phone: 202-225-7103 General Fax: 202-225-7392

sarahdash@allhealthpolicy.org / db@cmwf.org

## **Grantmaking Trip Sponsor Form**

This form should be completed by a public charity or private foundation (both as defined under section 501(c)(3) of the Internal Revenue Code) that provides a grant of funds to another entity to underwrite, in whole or in part, a trip or an event, meal, or activity that will occur during a trip, or a necessary expense that will be incurred during a trip, with express or implicit knowledge or understanding that one or more House Members or employees may participate in or attend that trip or event, or otherwise may be beneficiaries of the gift or donation. **Provide a copy of your completed form to the primary sponsor of the trip.** 

NOTE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001. Failure to comply with the Committee's Travel Regulations may also lead to the denial of permission to sponsor future trips.

1.	I certify that (name of your organization):
	has been designated a § 501(c)(3) nonprofit charitable organization by the Internal Revenue Service.   Yes No
2.	Name of Primary Trip Sponsor: Alliance for Health Policy
3.	I certify that my organization (check and complete a or b):
	a. Has provided a grant, gift, or donation to the above-named Primary Trip Sponsor and conducts an audit or review of its grant, gift, or donation to ensure that the funds are spent in accordance with the terms of its grant, gift, or donation. OR
	b. 🔽 Has had a direct role in the organizing, planning, or conducting of a trip to
	Destination: Warrenton, VA on Date: April 5-7,2019
	that is being organized or arranged by the above-named Primary Trip Sponsor.
4.	Check only one:
	<ul> <li>a.  My organization does not employ or retain a registered federal lobbyist or foreign agent OR</li> <li>b.  My organization employs a registered federal lobbyist or foreign agent, but their involvement in planning, organizing, or arranging the trip was <i>de minimis</i> under the travel regulations.</li> </ul>
5.	I certify that I am not a registered federal lobbyist or foreign agent for any sponsor of this trip. 🗸
6.	I certify by my signature that the information contained in this form is true, complete, and correct to the best of my knowledge.
Się	gnature: Date:
Na	me: David Blumenthal, M.D. Title:
Or	ganization:The Commonwealth Fund
Ad	Idress: 1 East 75th St, New York, NY 10021
Te]	lephone:Email:Email:
	If there are any questions regarding this form, please contact the Committee at the following address:

Committee on Ethics

U.S. House of Representatives

1015 Longworth House Office Building, Washington, D.C. 20515

Phone: 202-225-7103 General Fax: 202-225-7392

Theodore E. Deutch, Florida Chairman Kenny Marchant, Texas Ranking Member

Grace Meng, New York Susan Wild, Pennsylvania Dean Phillips, Minnesota Anthony Brown, Maryland

John Ratcliffe, Texas George Holding, North Carolina Jackie Walorski, Indiana Michael Guest, Mississippi



Thomas A Rust

Staff Director and Chief Counsel

David W. Arrojo

Counsel to the Chairman

Christopher A. Donesa

Counsel to the Ranking Member

1015 Longworth House Office Building

Washington, D.C. 20515-6328

Telephone: (202) 225-7103

Facsimile: (202) 225-7392

# U.S. House of Representatives

**COMMITTEE ON ETHICS** 

March 29, 2019

Ms. Colleen Nguyen Office of the Honorable Ami Bera 1727 Longworth House Office Building Washington, DC 20515

Dear Ms. Nguyen:

Pursuant to House Rule 25, clause 5(d)(2), the Committee on Ethics hereby approves your proposed trip to Warrenton, Virginia, scheduled for April 5 to 7, 2019, sponsored by Alliance for Health Policy and Commonwealth Fund.

You must complete an Employee Post-Travel Disclosure Form (which your employing Member must also sign) and file it, together with a Sponsor Post-Travel Disclosure Form completed by the trip sponsor, with the Clerk of the House within 15 days after your return from travel. As part of that filing, you are also required to attach a copy of this letter and both the Traveler and Primary Trip Sponsor Forms (including attachments) you previously submitted to the Committee in seeking pre-approval for this trip. If you are required to file an annual Financial Disclosure Statement, you must also report all travel expenses totaling more than \$390 from a single source on the "Travel" schedule of your annual Financial Disclosure Statement covering this calendar year. Finally, Travel Regulation § 404(d) also requires you to keep a copy of all request forms and supporting information provided to the Committee for three subsequent Congresses from the date of travel.

If you have any further questions, please contact the Committee's Office of Advice and Education at extension 5-7103.

Sincerely,

Theodore E. Deutch Chairman

Kenny Marchant Ranking Member

TED/KM:adw

#### U.S. House of Representatives Committee on Ethics

# PRIMARY TRIP SPONSOR FORM CONTINUED ANSWERS Provided by Alliance for Health Policy

4. PROVIDE NAMES AND TITLES OF ALL HOUSE MEMBERS AND EMPLOYEES YOU ARE INVITING. FOR EACH HOUSE INVITEE, PROVIDE AN EXPLANATION OF WHY THE INDIVIDUAL WAS INVITED (INCLUDE ADDITIONAL PAGES IF NECESSARY):

This is the 21st Annual Bipartisan Congressional Health Policy Conference to which members of the House of Representatives and the Senate have been invited and have participated. Staff may accompany their boss if he or she attends. Staff members are not permitted without their member's confirmed attendance. We have attached a list of members and staff invited. For members we have listed their jurisdiction, degree, or interest in learning more about healthcare. Staff are encouraged to join their boss at the conference for the educational opportunity of attending the panel discussions and the access to the speakers throughout the weekend to answer their questions and use as a resource for their legislative work.

12. FOR EACH SPONSOR REQUIRED TO SUBMIT A SPONSOR FORM, DESCRIBE THE SPONSOR'S INTEREST IN THE SUBJECT MATTER OF THE TRIP AND ITS ROLE IN ORGANIZING AND/OR CONDUCTING THE TRIP:

The Alliance is a non-partisan, 501(c)(3) public charity dedicated to providing governmental leaders with expert analysis and information on current health care-related issues, solutions, legislative proposals and industry conditions. The Alliance has been a resource providing objective, fact-based, unbiased information to members of the Senate/House on both sides of the aisle since its inception in 1991. Through a grant provided by The Commonwealth Fund, a private foundation that supports independent research on health and social issues and makes grants to improve health care practice and policy, the conference provides an opportunity for Representatives and Senators, and their senior health staff, to learn more about timely health policy topics in informal, off-the-record sessions with a select group of health policy experts from a wider variety of perspectives. There is also ample opportunity for interchange among the members of Congress in attendance. The event aims to educate, not to advance any political or ideological position. The Alliance for Health Policy and The Commonwealth Fund jointly formulate the agenda, recruit appropriate speakers, and develop and compile resource materials for conference curriculum. Alliance staff also handles the lodging, travel, and event management for the conference, with input and oversight from The Commonwealth Fund. (www.allhealthpolicy.org)

## 15. b) 2) PROVIDE REASON FOR SELECTING THE LOCATION OF THE EVENT OR TRIP:

The location was selected because of a need to balance proximity to Capitol Hill in order to accommodate the schedules of Members and staff and achieve our goal of reduced travel costs by allowing for bus or carpooling as the mode of transportation and yet be located outside of the Senate duty station. The Airlie is located in Fauquier County, Virginia. After relocating the annual conference to Virginia in 2016, the Alliance has been searching for a good location in Virginia. In 2017 an extensive venue search that determined that Airlie was a prime location for the conference.

The Alliance for Health Policy, in close collaboration with the Commonwealth Fund, undertook an extensive search in 2017of properties that met several key criteria:

**Location:** Located a reasonable driving distance from Washington, D.C. and major airports and convenience of Members of Congress and participating speakers, yet outside of the Washington, D.C. "duty station" for Members of Congress and their staff. The Airlie is located at 6809 Airlie Road in Warrenton, Virginia, approximately 40-60 minutes from <u>Dulles Airport</u> (depending on traffic), and a 1-2 hour drive from the <u>Capitol</u>, depending on traffic. It is located in Fauquier County, Virginia. Other facilities we considered were either a significant driving distance from the Capitol or not well accessed by affordable or convenient transportation.

Facilities and logistics: Conference facilities and rooming arrangements that can accommodate the conference; criteria include as space that can ensure safety and privacy for the Members, and any other high profile speakers that attend; meeting space and overnight accommodations that are located on the same property so as not to add additional travel time and distract from substantive programming; suitability of conference facilities and AV capacity; and conference support staff that's suitable for hosting a conference as large and logistically complex as ours.

**Cost:** Reasonable costs that can meet the conference budget. The Alliance has negotiated the lowest possible food costs at Airlie, selecting the most reasonable food costs on the available menu. These are the market rates for conference facilities that meet all of our criteria.

Timing: preferred date availability to coincide with anticipated congressional availability.

After this extensive search in 2017 and a site visit by Alliance and Fund staff, we chose the Airlie center for the site of our 2017 conference. Upon a successful and educational conference for Members in March of 2017, we have decided to use this venue again in 2018 seeing that it fit our criteria of proximity, facilities available, and the ethics committee's rules and recommendations for acceptable accommodations and travel for our Congressional guests.

#### 18. TOTAL EXPENSES OF EACH PARTICIPANT

Other Expenses:

The \$109.00 fee includes the facilities use fee and the cost of the printed materials and packets that all conference attendees receive.





# Bipartisan Congressional Health Policy Conference Airlie Center, Warrenton, Virginia April 5-7, 2019

## The State of Health Care in America

## Friday, April 5

6:00 p.m. - 7:00 p.m.

Opening Reception (Pavilion)

7:00 p.m. – 9:00 p.m.

Dinner (Pavilion)

### 1a. Welcome and Introductions

- Reed Tuckson, M.D., Chair, Alliance for Health Policy;
   President, Tuckson Health Connections
- Benjamin Chu, Chair, The Commonwealth Fund; Managing Director, Manatt Health

## 1b. Dinner Keynote

The State of Discovery: The Development of CAR T-cell therapy and what it means in the fight against cancer.

Carl H. June, M.D., Richard W. Vague Professor in Immunotherapy, Department of Pathology and Laboratory Medicine, University of Pennsylvania

## Saturday, April 6

7:30 a.m. - 8:30 a.m.

Continental Breakfast (Jefferson Room)

8:30 a.m. - 10:00 a.m.

2. Sick in America (Federal Room)

Moderator: Maureen Bisognano, President Emerita and Senior Fellow, Institute for Healthcare Improvement; Board Member, The Commonwealth Fund

## Keynote Speaker:

Steven Pantilat, Professor of Medicine, University of California, San Francisco, Kates-Burnard and Hellman Distinguished Professor in Palliative Care, founding Director of the UCSF Palliative Care Program

#### Panelists:

- · David White, MBA, Principal, Pinnacle Healthcare Consulting
- Melinda Karp, MBA, Vice President of Consumer Centered Quality, Commonwealth Care Alliance

10:00 a.m. - 11:15 a.m.

3. Medicare Benefits (Federal Room)

Moderator: Sheila P. Burke, R.N., M.P.A., FAAN, Adjunct Lecturer, The John F. Kennedy School of Government, Harvard University; Board Member, The Commonwealth Fund

#### Panelists:

- Karen Davis, Ph.D., Professor Emeritus, Johns Hopkins Bloomberg School of Public Health
- Ann Hwang, M.D., Director, Center for Consumer Engagement in Health Innovation, Community Catalyst
- Ashish Jha, M.D., MPH, Director, Harvard Global Health Institute
- Tom Valdivia, Chief Health Officer, Bright Health (invited)

11:15 a.m. – 12:30 p.m.

## 4. Closing the Coverage Gaps (Federal Room)

Moderator: TBD

#### Panelists:

- Sara Collins, Ph.D., Vice President for Health Care Coverage and Access, The Commonwealth Fund
- Mike Kreidler, O.D., MPH, Washington State Insurance Commissioner, Washington State
- Robert Morrow, J.D., Associate Commissioner, Life and Health, Maryland Insurance Administration (Invited)
- Vince Ventimiglia, J.D., Chairman, Leavitt Partners Board of Managers; Vice Chairman, Leavitt Partners Board of Directors

12:45 p.m. – 2:00 p.m.

## 5. American Life Expectancy - Lunch Session (Pavilion)

Moderator: Vivian S. Lee, M.D., Ph.D., MBA, President, Health Platforms, Verily Life Sciences; Board Member, The Commonwealth Fund

#### Panelists:

- Patrice Harris, Immediate Past Chair, American Medical Association
- Elizabeth Howell, M.D., MPP, Director, Blavatnik Family Women's Health Research Institute, Icahn School of Medicine, Mount Sinai
- Ben Miller, Psy.D., Chief Strategy Officer, Well Being Trust

2:00 p.m. - 3:15 p.m.

### 6. Medicaid (Federal Room)

Moderator: Alan Weil, J.D., MPP, Editor-in-Chief, Health Affairs

#### Panelists:

- Cindy Beane, MSW, LCSW, Commissioner, West Virginia Bureau for Medical Services
- Karen Dale, R.N., MSN, Market President, AmeriHealth Caritas DC
- Marvin Figueroa, Ed.M., Deputy Secretary, Office of the Secretary of Health and Human Resources, Commonwealth of Virginia
- Calder Lynch, MSHA, Senior Counselor to the Administrator, Centers for Medicare and Medicaid Services (Invited)
- Hemi Tewarson, J.D., MPH, Director, Health Division, National Governors Association

6:00 p.m. – 7:15 p.m.

Reception (Pavilion)

7:15 p.m. – 9:15 p.m.

7. Dinner Keynote (Pavilion)

Moderator: David Blumenthal, M.D., MPP, President, The Commonwealth Fund

Keynote Speaker:

Admiral Brett Giroir, M.D., Assistant Secretary for Health, U.S.

Department of Health and Human Services (invited)

## Sunday, April 7

8:15 a.m. - 9:00 a.m.

Breakfast Buffet (Jefferson Room)

9:00 a.m. – 10:30 a.m.

8. Competition and Consolidation (Federal Room)

Moderator: Mitchell J. Blutt, M.D., MBA, Chief Executive Officer, Consonance Capital Partners

#### Panelists:

- Katherine Baicker, Ph.D., Dean and Emmett Dedmon Professor, University of Chicago Harris School of Public Policy
- Sherry Glied, M.A., Ph.D., Dean and Professor of Public Service, New York University Wagner School of Public Service
- Sheila Hogan, Director, Office of the Montana Department of Public Health and Human Services
- Jamie King, J.D., Ph.D., Associate Dean and Professor of Law, UC Hastings Consortium on Science, Law and Health Policy

10:30 a.m. – 12:00 p.m.

9. Prescription Drugs (Federal Room)

Moderator: Tom Scully, Vice Chair, Alliance for Health Policy; General Partner, Welsh, Carson, Anderson & Stowe

#### Panelists:

- Rena Conti, Ph.D., Associate Professor of Health Policy, University of Chicago
- Bill Corr, J.D., Senior Advisor, Waxman Strategies
- Sandra Wilkniss, Program Director, Health Division, National Governors Association
- Richard Evans, Co-founder, SSR Health, LLC

12:00 p.m. – 12:15 p.m.

Closing Remarks (Federal Room)

12:15 p.m.

Departure (Boxed Lunch Available in Mezzanine Break Area)