Employee Post-Travel Disclosure Form

1	Original		Amendment
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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.

1. Name of Traveler: Melanie Anne Egorin 2. a. Name of Accompanying Relative: OR None b. Relationship to Traveler: Spouse Child Other (specify): 3. a. Dates: Departure: May 21, 2019 Return: May 23, 2019	NC	TE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 1	2112	C 6 1001
b. Relationship to Traveler: Spouse Child Other (specify): a. Dates: Departure: May 21, 2019 Return: May 23, 2019 b. Dates at Personal Expense, if any: 4. Departure City: Washington, DC Destination: Princeton, NJ Return City: Washington, DC 5. Sponsor(s), Who Paid for the Trip: Council on Health Care Economics and Policy, Brandeis University 6. Describe Meetings and Events Attended: Including Medicare and the ACA. 7. Attached to this form are each of the following, signify that each item is attached by checking the corresponding box: a. a completed Sponsor Post-Travel Disclosure Form; 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; c. page 2 of the completed Traveler Form submitted by the employee; and d. the Item of the Committee on Ethics approving my participation on this trip. 8. a. I represent that I participated in each of the activities reflected in the attached sponsor's agendated Signify statement is true by checking the box: Signify statement is true by checking the box: I certify that the informal on ontained on this form is true, complete, and correct to the best of my knowledge. Signature of Traveler: Date: Date: Date: Other in August 1992 Date: Date: Other in August 2019 Annual conference on federal and state health policy, Brandeis University Annual conference on federal and state health policy, Brandeis University Annual conference on federal and state health policy, Brandeis University Annual conference on federal and state health policy, Brandeis University Annual conference on federal and state health policy, Brandeis University Annual conference on federal and state health policy, Brandeis University Annual conference on federal and state health policy, Brandeis University Annual conference on federal and state health policy, Brandeis University Brandeis University Annual conference on federal and state health policy, Brandeis University Annual conf			0.0	.c. y 1001
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6. Describe Meetings and Events Attended: Annual conference on federal and state health policy, including Medicare and the ACA. 7. Attached to this form are each of the following, signify that each item is attached by checking the corresponding box: a. □ a completed Sponsor Post-Travel Disclosure Form; 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; c. □ page 2 of the completed Traveler Form submitted by the employee; and d. □ the letter from the Committee on Ethics approving my participation on this trip. 8. a. I represent that I participated in each of the activities reflected in the attached sponsor's agendates Signify statement is true by checking the box: □ b. If not, explain: I certify that the information contained on this form is true, complete, and correct to the best of my knowledge. Signature of Traveler: □ Date: □ Date: □ Signature of Supervising Member: □ Charact □ Date: □ Annual conference on federal and state health policy, including all attachments and the corresponding box: a. □ a completed Sponsor Post-Travel page 2 of the completed by the trip sponsor Prior to the trip, including all attachments and the Correct of the expenses and the trip, including all attachments and the Correct of the expenses and the trip, including all attachments and the Correct of the expenses and the trip, including all attachments and the correct of the expenses and the trip, including all attachments and the Correct of the expenses and the trip, including all attachments and the correct of the expenses and the trip, including all attachments and the correct of the expenses and the trip, including all attachments and the correct of the expenses and the trip, including all attachments and the correct of the trip, including all attachments and the correct of the trip, including all attachments and the Correct of the trip, including all attachments and the Correct of the trip, including all att	4.	Departure City: Washington, DC Destination: Princeton, NJ Return City: Washington	ngton	, DC
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I authorized this travel in advance. I have determined that all of the expenses listed on the attached Sponsor Post-Travel Disclosure Form 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:		 a. ☑ a completed Sponsor Post-Travel Disclosure Form; b. ☑ the Primary Trip Sponsor Form completed by the trip sponsor prior to the trip, including all attactive the Grantmaking or Non-Grantmaking Sponsor Forms; c. ☑ page 2 of the completed Traveler Form submitted by the employee; and d. ☑ the letter from the Committee on Ethics approving my participation on this trip. a. I represent that I participated in each of the activities reflected in the attached sponsor's agendated Signify statement is true by checking the box: ☑ 	201MbJUN -5 PM 5: 5	nts and
Disclosure Form 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: Date:		. 1. 1. (1. 11.	wledg	ge.
Signature of Supervising Member:	Dis cre	ate the appearance that the employee is using public office for private gain.	· <i>Post</i> l wou	-Travel ld not
	Sig	nature of Supervising Member:		

Sponsor Post-Travel Disclosure Form

1	Original	Amendment

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

			s form may be subject to crit		unt to 18 U.S.C. & 1001
1.	NOTE: Willful or knowing misrepresentations on this form may be subject to criminal prosecution pursuant to 18 U.S.C. § 1001. Sponsor(s) who paid for the trip: Council on Health Care Economics and Policy, Brandeis University				
		•			
2.	Travel Destination((s): Princeton, NJ			5
		Tuesday, May 21, 2019	Date of Ret	urn: Thursday, May 2	3, 2019
			n a form only if <i>all</i> infor		_
5.	Actual amount of e	expenses paid on behalf or	of, or reimbursed to, each	n individual named in	Question 4:
	,	Total Transportation Expenses	Total Lodging Expenses	Total Meal Expenses	Total Other Expenses (dollar amount per item and description
	Traveler	\$141	\$479.14	\$330	N/A
	Accompanying Family Member	N/A	N/A	N/A	N/A
6. All expenses connected to the trip were for actual costs incurred and not a <i>per diem</i> or lump sum payment. <i>Signify statement is true by checking box:</i> ✓					
			form is true, complete,	and correct to the bes	t of my knowledge.
Sign	ature:	last Al Jon		Date: 5/30/19	9
Name: Michael Doonan, PhD Title: Director					
Orga	anization: Council	on Health Care Econom	ics and Policy	4	
I an	an officer of the al	bove-named organization	n. Signify statement is tr	ue by checking box:]
Add	ress: 415 South St	reet, Waltham, MA 0245	3		
Tele	phone: <u>781-736-39</u>	40		Email: doonan@b	orandeis.edu; ambrooks@
	Committee	a staff man soutant the	1	:C 11:C 1: C	

Committee staff may contact the above-named individual if additional information 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: Melanie Anne Egorin
2.	Sponsor(s) who will be paying for the trip: The Council on Health Care Economics and Policy, Brandeis University
3.	Travel Destination(s): Princeton, NJ
4.	a. Date of Departure: 21 May 2019 Date of Return: 23 May 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.	a. Did the trip sponsor answer "Yes" to Question 8(c) on the Primary Trip Sponsor Form (i.e., travel is sponsored by a entity that employs a registered federal lobbyist or a foreign agent)? Yes Yes Sponsor Form (i.e., travel is sponsored by a entity that employs a registered federal lobbyist or a foreign agent)? Yes Sponsor Form (i.e., travel is sponsored by a entity that employs a registered federal lobbyist or a foreign agent)? Yes Sponsor Form (i.e., travel is sponsored by a entity that employs a registered federal lobbyist or a foreign agent)?
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. I have been asked to present on a panel in my capacity as professional staff with the Committee on Ways and Means. My
	portfolio for the Committee is health policy, including Medicare and the ACA. These will be topics covered during the
	conference.
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:
r 1	ADVANCED AUTHORIZATION OF EMPLOYEE TRAVEL
tra	reby authorize the individual named above, an employee of the U.S. House of Representatives who works under my ct supervision, to accept expenses for the trip described in this request. I have determined that the above-described el is in connection with my employee's official duties and that acceptance of these expenses will not create the earance that the employee is using public office for private gain.
Sig	ature of Employing Member fall Elle Date 5 May 19

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

	comply with the Committee's Travel Regulations may also lead to the denial of permission to sponsor future trips.
1.	Sponsor who will be paying for the trip: Council on Health Care Economics and Policy, Brandeis University
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:
3.	 Check only one. I represent that: 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 b. The trip is arranged without regard to congressional participation and the primary trip sponsor has accepted funds 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 all or 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, provide an explanation of why the individual was invited (include additional pages if necessary): Melanie Egorin invited as a last minute substitution to present on a panel at the 26th Princeton Conference.
5.	Is travel being offered to an accompanying family member of the House invitee(s)? Yes No
6.	Date of Departure: Tuesday, May 21, 2019 Date of Return: Thursday, May 23, 2019
7.	a. City of departure: Washington, D.C.
/.	b. Destination(s): Princeton, NJ
	c. City of return: Washington, D.C.
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 Higher 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 at a one-day event and lobbyist / foreign agent involvement in planning, organizing, requesting, or arranging the trip was de minimis under the Committee's travel regulations.
9.	Check only one 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 why the 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.	Check only one of the following: 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			
	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:			
	Council on Health Care Economis and Policy, Brandeis University invited Melanie Egorin as a last minute			
	substitution to present on a panel during the 26th Princeton Conference in her capacity as professional			
	staff on the Committee on Ways and Means.			
13.	Answer parts a and b. Answer part c if neccessary:			
	a. Mode of travel: Air Rail Bus Car Other (specify:			
	b. Class of travel: Coach ✓ Business ☐ First ☐ Charter ☐ Other ☐ (specify:			
	c. If travel will be first class, or by chartered or private aircraft, explain why such travel is warranted:			
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.	 Check only one. I represent that either: 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 specifically <i>with regard</i> to congressional participation: If "b" is checked:			
	Detail the cost per day of meals (approximate cost may be provided):			
	Provide the reason for selecting the location of the event or trip:			
	2) 1.01.00			
16	Name, nightly cost, and reasons for selecting each hotel or other lodging facility:			
10,	Hotel Name: Westin Princeton Forrestal Village City: Princeton, NJ Cost Per Night: \$209++			
	Reason(s) for Selecting: Located next to conference venue.			
	Hotel Name: City: Cost Per Night:			
	Reason(s) for Selecting:			
	Hotel Name: City: Cost Per Night:			
	Reason(s) for Selecting:			
17	I represent that all expenses connected to the trip will be for actual costs incurred and not a per diem or lump sum			
1/.	payment. Signify that the statement is true by checking box:			

8. Total Expenses for each Parti	cipant:		
Actual Amounts Good Faith Estimates	Total Transportation Expenses per Participant	Total Lodging Expenses per Participant	Total Meal Expenses per Participant
For each Member, Officer, or Employee	\$320	\$479	\$330
For each Accompanying Family Member	N/A	N/A	N/A
	Other Expenses (dollar amount per item)	Identify Specific Nature of (e.g., taxi, parking, registra	-
For each Member, Officer, or Employee	N/A	N/A	
For each Accompanying Family Member	N/A	N/A	
9. Check only one: a. I certify that I am an officer b. Not Applicable. Trip sponso co. I certify that I am not a registe I. I certify by my signature that best of my knowledge.	or is an individual or a U.S. in ered federal lobbyist or foreig the information contained in	nstitution of higher education gn agent for any sponsor of this form is true, complete	this trip. 🗸
Michael Doonan, PhD) / 9	Date:	
Name:			
Title:			
Organization: Council on Health	Care Economics and Policy	Brandeis University	
Address: 415 South Street, Walth			5
781-736-4831			

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.

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

doonan.mike@gmail.com

18.

Email:

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



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U.S. House of Representatives

COMMITTEE ON ETHICS

David W. Arrojo Counsel to the Chairn

Counsel to the Chairman
Christopher A. Donesa

Counsel to the Ranking Member

Thomas A. Rust

Staff Director and Chief Counsel

1015 Longworth House Office Building Washington, D.C. 20515–6328 Telephone: (202) 225–7103 Facsimile: (202) 225–7392

May 20, 2019

Ms. Melanie Egorin Committee on Ways and Means 1139 Longworth House Office Building Washington, DC 20515

Dear Ms. Egorin:

Pursuant to House Rule 25, clause 5(d)(2), the Committee on Ethics hereby approves your proposed trip to Princeton, New Jersey, scheduled for May 21 to 23, 2019, sponsored by the Council on Health Care Economics and Policy, Brandeis University.

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:re







PRINCETON CONFERENCE XXVI

WILL FEDERALISM IMPROVE THE U.S. HEALTH CARE SYSTEM?

MAY 21-23, 2019

TUESDAY, MAY 21, 2019

THE WESTIN PRINCETON AT FORRESTAL VILLAGE

201 Village Boulevard, Princeton, NJ 08540

6:00 P.M. COCKTAILS AND HORS D'OEUVRES

7:00 P.M. WELCOME

Stuart Altman
Sol C. Chaikin Professor of National Health Policy
The Heller School for Social Policy and Management, Brandeis University

CONFERENCE OPENING: FEDERALISM IN THE U.S. HEALTH CARE SYSTEM

MODERATOR

Michael Doonan

Associate Professor, The Heller School for Social Policy and Management, Brandeis University Executive Director, The Massachusetts Health Policy Forum

SPEAKERS

Stuart M. Butler Senior Fellow, Economic Studies The Brookings Institution

Cindy Mann Partner Manatt, Phelps & Phillips

DINNER

WEDNESDAY, MAY 22, 2019

ROBERT WOOD JOHNSON FOUNDATION, AUDITORIUM

Route 1 and College Road East, Princeton, NJ 08543

Shuttle service between the Westin Princeton at Forrestal Village and the Robert Wood Johnson Foundation is provided.

8:00 A.M. CONTINENTAL BREAKFAST AND REGISTRATION

8:30 A.M. WELCOME

Stuart Altman

Sol C. Chaikin Professor of National Health Policy

The Heller School for Social Policy and Management, Brandeis University

Pamela S. Dickson

Associate Executive Vice President Robert Wood Johnson Foundation

8:45 A.M. SESSION I: WASHINGTON UPDATE

MODERATOR

Stuart Altman

Sol C. Chaikin Professor of National Health Policy

The Heller School for Social Policy and Management, Brandeis University

PANEL

Melanie Anne Egorin Deputy Health Staff Director Committee on Ways and Means

Thomas Barker Partner

Foley Hoag, LLP

Jennifer Bell

Founding Partner

Chamber Hill Strategies

DISCUSSION

10:00 A.M. SESSION II: CURRENT ISSUES IN THE MEDICARE PROGRAM

MODERATOR

Paul Ginsburg

Director, USC-Brookings Schaeffer Initiative for Health Policy Leonard D. Schaeffer Chair in Health Policy Studies, The Brookings Institution Professor of Health Policy/Director of Public Policy, USC Schaeffer Center

PANEL

Stacie B. Dusetzina

Associate Professor of Health Policy and Ingram Associate Professor of Cancer Research Vanderbilt University School of Medicine

Dan Mendelson Founder Avalere Health

Stuart Altman
Sol C. Chaikin Professor of National Health Policy
The Heller School for Social Policy and Management, Brandeis University

DISCUSSION

11:15 A.M. BREAK

11:30 A.M. SESSION III: TWENTY YEARS AFTER 'TO ERR IS HUMAN': WHERE NEXT?

MODERATOR

Karen Wolk Feinstein President and Chief Executive Officer Jewish Healthcare Foundation

PANEL

Michael Millenson President Health Quality Advisors LLC

Carolyn M. Clancy, MD
Deputy Under Secretary for Health for Discovery, Education and Affiliate Networks
Department of Veterans Affairs

Ken Segel Managing Director Value Capture / Value Capture Policy Institute

DISCUSSION

12:45 P.M. LUNCH

2:00 P.M. SESSION IV: MEDICAID AND FEDERALISM

MODERATOR

Matt Salo

Executive Director

National Association of Medicaid Directors

PANEL

Kristi Putnam
Deputy Secretary

Cabinet for Health and Family Services, State of Kentucky

Marie Zimmerman

Assistant Commissioner for Health Care and State Medicaid Director

Minnesota Department of Human Services

Diane Rowland Executive Vice President Kaiser Family Foundation

DISCUSSION

3:15 P.M. BREAK

3:30 P.M. SESSION V: STATE ACTIVITIES AND INNOVATION

MODERATOR

Trish Riley Executive Director

National Academy for State Health Policy

PANEL

Richard M. Scheffler

Professor In The Graduate Schools of Public Health and The Goldman School of Public Policy Director of the Petris Center for Healthcare Markets and Consumer Welfare UC Berkeley

Hemi D. Tewarson
Director, Health Division
Center for Best Practices
National Governors Association

Steven Costantino
Director of Health Care Reform and Financing
Delaware Health and Social Services

Kacey Wulff Deputy Chief of Staff and Senior Policy Advisor Colorado Lieutenant Governor Dianne Primavera

DISCUSSION

4.40 P.M. AFTERNOON SESSION ENDS	4:45 P.M.	AFTERNOON SESSION ENDS
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- 5:30 P.M. 1st BUS LEAVES WESTIN PRINCETON AT FORRESTAL VILLAGE FOR PROSPECT HOUSE, PRINCETON UNIVERSITY
- 5:45 P.M. 2nd BUS LEAVES WESTIN PRINCETON AT FORRESTAL VILLAGE FOR PROSPECT HOUSE, PRINCETON UNIVERSITY

WEDNESDAY, MAY 22, 2019 - DINNER PROGRAM

PROSPECT HOUSE, PRINCETON UNIVERSITY

6:00 P.M. COCKTAILS AND HORS D'OEUVRES

7:00 P.M. UWE REINHARDT MEMORIAL LECTURE: LEARNING FROM ANALOGIES AND EMBRACING CONSTRAINTS IN HEALTH CARE

OPENING SPEAKER

Tsung-Mei Cheng Health Policy Research Analyst Woodrow Wilson School of Public and International Affairs Princeton University

DINNER

SPEAKER

David A. Asch, MD John Morgan Professor University of Pennsylvania

TEAM WORK AND DISCUSSION

9:15 P.M. 1st BUS LEAVES PROSPECT HOUSE FOR WESTIN PRINCETON AT FORRESTAL VILLAGE

9:30 P.M. 2nd BUS LEAVES PROSPECT HOUSE FOR WESTIN PRINCETON AT FORRESTAL VILLAGE

THURSDAY, MAY 23, 2019

ROBERT WOOD JOHNSON FOUNDATION, AUDITORIUM

Shuttle service between the Westin Princeton at Forrestal Village and the Robert Wood Johnson Foundation is provided.

8:00 A.M. CONTINENTAL BREAKFAST AND REGISTRATION

8:30 A.M. SESSION VI: ALTERNATIVE PAYMENT AND DELIVERY SYSTEM INNOVATION

MODERATOR

Robert E. Mechanic Senior Fellow The Heller School for Social Policy and Management, Brandeis University

PANEL

Bruce E. Landon, MD Professor, Health Care Policy Harvard Medical School

Katherine A. Schneider, MD
President and Chief Executive Officer
Delaware Valley Accountable Care Organization

JP Sharp Director, Healthcare Strategy and Transformation Blue Cross and Blue Shield of North Carolina

Glenn D. Steele, MD Vice Chair Health Transformation Alliance

DISCUSSION

9:45 A.M. SESSION VII: DRUG PRICING POLICY: PROSPECTS AND TIMING

MODERATOR

Elizabeth J. Fowler Vice President, Global Health Policy Johnson & Johnson

PANEL

John M. O'Brien Senior Advisor to the Secretary for Drug Pricing Reform U.S. Department of Health and Human Services

Adam J. Fein Chief Executive Officer Drug Channels Institute Avik Roy

President, Foundation for Research on Equal Opportunity

Policy Editor, Forbes

Mark E. Miller

Executive Vice President of Health Care

Arnold Ventures

DISCUSSION

11:00 A.M. BREAK

11:15 A.M. SESSION VIII: WHAT ARE STATES DOING AROUND THE OPIOID CRISIS?

MODERATOR

Michael Botticelli

Executive Director

Grayken Center for Addiction at Boston Medical Center

PANEL

Patrice A. Harris, MD

President-Elect

American Medical Association

Van Ingram

Executive Director

Kentucky Office of Drug Control Policy

Nan Whaley

Mayor

Dayton, Ohio

DISCUSSION

12:30 P.M. CLOSING REMARKS

Stuart Altman

Sol C. Chaikin Professor of National Health Policy

The Heller School for Social Policy and Management, Brandeis University

12:45 P.M. LUNCH

1:30 P.M. BUSES LEAVE FOR PHILADELPHIA AIRPORT, NEWARK AIRPORT, TRENTON TRAIN

STATION, AND PRINCETON JUNCTION TRAIN STATION