

# COMMITTEE ON ETHICS

## EMPLOYEE POST-TRAVEL DISCLOSURE FORM Original Amendment

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 by email at [gifttravelreports@mail.house.gov](mailto:gifttravelreports@mail.house.gov), within 15 days after travel is completed.** Please **do not** file this form with the Committee on Ethics.

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

1. Name of Traveler: Stephen Nicholas Wooldridge
2. a. Name of Accompanying Relative: \_\_\_\_\_ **OR**  None  
b. Relationship to Traveler:  Spouse  Child  Other (specify): \_\_\_\_\_
3. a. Dates: Departure: 3/9/26 Return: 3/12/26  
b. Dates at Personal Expense, if any: \_\_\_\_\_ **OR**  None
4. Departure City: Washington DC Destination: Las Vegas Return City: Washington DC
5. Sponsor(s), Who Paid for the Trip: Healthcare Information and Management Systems Society (HIMSS)
6. Describe Meetings and Events Attended: Attended panels, meetings, & sessions focused on health tech, including discussions on work at CMS & ONC, and issues such as interoperability & AI in healthcare
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 *Additional Sponsor Form(s)*;
  - 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 agenda. *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: 3/25/26

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: Chairman Brett Guthrie Date: 3/25/26

Signature of Supervising Member: 

# COMMITTEE ON ETHICS

## SPONSOR POST-TRAVEL DISCLOSURE FORM

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 in the trip within 10 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.

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

1. Sponsor(s) who paid or provided in-kind support for the trip: Healthcare Information and Management Systems Society (HIMSS)

2. Travel Destination(s): Las Vegas, NV

3. Date of Departure: Monday, March 9, 2026 Date of Return: Thursday, March 12, 2026

4. Name(s) of Traveler(s): Nick Wooldridge

*Note: You may list more than one traveler on a form only if all information is identical for each person listed.*

5. Actual amount of expenses paid on behalf of, or reimbursed to, each individual named in Question 4:

	Total Transportation Expenses	Total Lodging Expenses	Total Meal Expenses	Total Other Expenses (dollar amount per item and description)
Traveler	\$879.21	\$300	\$153.68	\$1395 for conference registration fee government rate, waived for Congressional staff. \$475 for preconference forum registration fee for staffers arriving on Monday morning, waived for Congressional staff.
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 *per diem* or lump sum payment. Signify statement is true by checking box.

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

Signature: Thomas M. Leary Date: 3-17-2026

Name: Tom Leary Title: SVP and Head of Government Relations

Organization: Healthcare Information and Management Systems Society (HIMSS)

I am an officer of the above-named organization. Signify statement is true by checking box.

Address: 4300 Wilson Boulevard, Suite 510 Arlington VA 22203

Telephone: 845-775-7195 Email: tom.leary@himss.org

*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.

# COMMITTEE ON ETHICS

## TRAVELER FORM

1. Name of Traveler: Stephen Nicholas Wooldridge
2. Sponsor(s) who will be paying or providing in-kind support for the trip: Healthcare Information and Management Systems Society
3. City and State **OR** Foreign Country of Travel: Las Vegas, NV
4. a. Date of Departure: March 9, 2026 Date of Return: March 12, 2026  
b. Yes  No  Will you be extending the trip at your personal expense?  
If yes, list dates at personal expense: \_\_\_\_\_
5. a. Yes  No  Will you be accompanied by a family member at the sponsor's expense? **If yes:**
  - (1) Name of Accompanying Family Member: \_\_\_\_\_
  - (2) Relationship to Traveler:  Spouse  Child  Other (specify): \_\_\_\_\_
  - (3) Yes  No  Accompanying Family Member is at least 18 years of age?
6. a. Yes  No  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)?  
b. **If yes**, and you are requesting lodging for two nights, explain why the second night is warranted:  
\_\_\_\_\_  
\_\_\_\_\_

7. Yes  No  *Primary Trip Sponsor Form* is attached, including agenda, invitation, invitee list, and any other attachments and Additional Sponsor Forms.

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 a Professional Staff Member working on issues related to health care information technology, the educational sessions, panels, and addresses will enable me to gain a better understanding of the digital health landscape and the policy implications of these emerging technologies.

9. **Yes  No  Is the traveler aware of any registered federal lobbyists or foreign agents involved in planning, organizing, requesting, or arranging the trip?**

10. For staff travelers, to be completed by your employing Member:

### ADVANCED AUTHORIZATION OF EMPLOYEE TRAVEL

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: Brett Guthrie Date: 2/9/26

# COMMITTEE ON ETHICS

## 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's website (ethics.house.gov) provides detailed instructions for filling out the form. The Committee will notify the House invitees directly of its decision and will not notify the trip sponsors.

**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. Signatures must comply with section 104(bb) of the Travel Regulations.**

1. Sponsor who will be paying for the trip:  
Healthcare Information and Management Systems Society (HIMSS)
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, services, or in-kind assistance 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): \_\_\_\_\_  
See Attached for Additional Information
5. Yes  No  Is travel being offered to an accompanying family member of the House invitee(s)?
6. Date of Departure: March 9, 2026 Date of Return: March 12, 2026
7. a. City of departure: Washington, DC  
b. Destination(s): Las Vegas, NV  
c. City of return: Washington, DC
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; **OR**
  - b.  I checked 8(c) above but am not offering any lodging; **OR**
  - 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). *Indicate agenda is attached by checking box.*

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 the statement is true by clicking the box; OR*
  - b.  *Not Applicable.* Trip sponsor is a U.S. institution of higher education.
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:
- HIMSS develops, organizes, and conducts all aspects of the trip for congressional staff for HIMSS26. HIMSS26 is the leading healthcare conference, bringing together thought leaders from across the healthcare community, including healthcare providers, IT experts, vendors, and local, state and federal government representatives.
- 

13. **Answer parts a and b. Answer part c if necessary:**
- 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 *with regard* to congressional participation. If "b" is checked:
    - 1) Detail the cost *per day* of meals (approximate cost may be provided): \_\_\_\_\_
    - 2) Provide the reason for selecting the location of the event or trip: \_\_\_\_\_
- 

16. Name, nightly cost, and reasons for selecting each hotel or other lodging facility:

Hotel Name: Caesars Palace City: Las Vegas Cost Per Night: \$159  
Reason(s) for Selecting: Hotels are selected based on location and availability of rooms to accommodate congressional staff at the federal per diem rate.

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 payment. *Signify that the statement is true by checking the box.*

18. **Total Expenses for each Participant:**

<input type="checkbox"/> Actual Amounts <input checked="" type="checkbox"/> Good Faith Estimates	Total <b>Transportation</b> Expenses per Participant	Total <b>Lodging</b> Expenses per Participant	Total <b>Meal</b> Expenses per Participant
For each Member, Officer, or Employee	\$650		up to \$301 (per diem rate for 4 days)
For each Accompanying Family Member			


	<b>Other</b> Expenses (dollar amount per item)	Identify Specific Nature of "Other" Expenses (e.g., taxi, parking, registration fee, etc.)
For each Member, Officer, or Employee	See Attached	See Attached
For each Accompanying Family Member		

19. **Check only 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.

20. **I certify by my signature that**

- a. **I read and understand the Committee's Travel Regulations;**
- b. **I am not a registered federal lobbyist or registered foreign agent; and**
- c. **The information on this form is true, complete, and correct to the best of my knowledge.**

Signature: Thomas M. Leary  Digitally signed by Thomas M. Leary  
Date: 2026.01.28 11:37:20 -05'00' Date: 1/28/2026

Name: Thomas M Leary Title: SVP and Head of GR

Organization: HIMSS

Address: 4300 Wilson Boulevard, Suite 510, Arlington, VA

Email: tom.leary@himss.org Telephone: 571.331.2486

If there are questions regarding this form, please contact the Committee on Ethics at 202-225-7103 or travel.requests@mail.house.gov.

## Additional Information

### **Question 4. List of Congressional Invites**

Every congressional invitee to HIMSS26 plays a pivotal role in developing healthcare and health IT policy in the House of Representatives, and we believe they stand to benefit greatly from the educational sessions and speakers presenting at our conference. In addition to the education sessions, the conference provides the opportunity to interact with, and learn about, real-world applications of healthcare technologies, and hear how policy impacts the use of technologies that improve care, expand access, and lower healthcare costs.

House of Representatives Invitees:

1. Adam Durand, Rep. Thompson
2. Addison Porter, Rep. Miller
3. Alex DeRiso, Rep. Balderson
4. Anisa Alazraie, Rep. Lieu
5. Anna Moeller, Rep. Titus
6. Ari Kirsh, House Ways and Means
7. Ashley Strobel, Rep. Obernolte
8. Caleb Parada, House Veteran's Affairs Committee
9. Caroline Paris-Beh, Rep. Underwood
10. Caroline Tucker, Rep. Buchanan
11. David Steury, Rep. DeGette
12. Elizabeth Arevalo, Rep. Leger Fernandes
13. Sofia Mingote, Rep. Leger Fernandes
14. Isrrael Garcia Aguilar
15. Jackie Weinrich, Rep. Matsui
16. Jacquelyn Bolen, House Energy and Commerce
17. Jay Gulshen House Energy and Commerce
18. John Harry
19. Joshua Hardy
20. JP Moreland
21. Kassie Stagner
22. Laney O'Shea Conaway
23. Liz Beltran, Rep. Carter
24. Mahogany Feaster, Rep. Horsford
25. Michelle Galdamez Kelly
26. Michelle Paucar, Rep. Schakowsky
27. Reggie Darby
28. Richard Tesoriero, Rep. Amodei
29. Ross Johnston Kustoff
30. Samantha Warren Foster
31. Sarah Levin House Ways and Means
32. Sequoia Ragland Veasey
33. Steven Szucs

- 34. Tania Calle Underwood
- 35. Tyler Adams Thompson
- 36. Una Lee House Energy and Commerce
- 37. Will Burns Obernolte
- 38. Nick Wooldridge, House Energy and Commerce
- 39. James Stursberg, House Energy and Commerce

**Question 16: Reason(s) for Selecting Hotels**

HIMSS works with local hotels to negotiate room blocks at government per diem rate near the convention center where HIMSS26 is held. Hotels are selected based on location and availability of rooms to accommodate congressional staff at the federal per diem rate.

**Question 18: Total Expenses for each Participant:**

Total meal expenses per participant: Congressional staff will be responsible for their own meals during HIMSS26. HIMSS is offering reimbursement up to \$86/day and \$64.50/travel day, which is the per diem rate for Las Vegas for 2026, for a total of \$301 for 4 days of meals.

Total transportation expenses per participant: In addition to the cost of the flight (top estimate of \$650), Congressional staff will be reimbursed for any necessary ride shares or taxis to/from the airports in DC and Las Vegas. Staff are in the process of booking flights through our travel agency.

Other expenses: \$1395 for conference registration fee government rate, waived for Congressional staff. \$475 for preconference forum registration fee for staffers arriving on Monday morning, waived for Congressional staff.



**Congressional Staff Agenda**

Location: The Venetian Convention & Expo Center, Caesars Forum, and Wynn Las Vegas,  
Las Vegas, NV

March 9-12, 2026

Access Full Conference Information [here](#):

**All times are Pacific Time (PT).**

**\*\*Note: Congressional Staff will be responsible for finding their own meals\*\***

**\*\*Note: All events listed on this agenda are open to all conference attendees\*\***

**\*\*Note: Staff are in the process of booking flights through our travel agency. Once booked, this information will be updated on the schedule\*\***

Monday, March 9th			
Time	Title	Description	Speakers
Est. Arrival 9am-7pm	Staffers Arrive	via flight; flights to be booked via travel agency	
8:00 - 4:30	Public Health Data Modernization Preconference Forum	This forum will focus on critical public health data and systems modernization efforts and the partnerships and information exchange necessary to sustain the advancements. Presentations, interactive discussions, breakfast and lunch networking opportunities are included.	
12 - 4:30	Native American & Indigenous Symposium	The Native American & Indigenous Symposium will be a celebration of how leaders and partners are working to strengthen Tribal health systems. This will be an opportunity to learn about health IT solutions that enable health equity, respect sovereignty and leverage digital health innovation that support Native American and Indigenous communities.	
5-7pm	HIMSS26 Opening Reception	Remarks from Hal Wolf, CEO, HIMSS on the focus of the HIMSS25 global conference and preview of keynote sessions. Attendees will also have the opportunity to interact and engage with a broad array of conference attendees, including government officials, thought	Hal Wolf President and Chief Executive Officer HIMSS

		leaders, and representatives from across the healthcare ecosystem.	
7 - 9pm	Global Public Policy Welcome Reception	An evening of insightful conversations, networking, and collaboration with colleagues across the globe	
	Dinner on your own, by PTS consistent with per diem		

<b>Tuesday, March 10th</b>			
<b>Time</b>	<b>Title</b>	<b>Description</b>	<b>Speakers</b>
8:30 AM – 10:00 AM	Keynote Address -- Dr. Oz		
10:15 AM to 11:15 AM Concurrent Education Sessions, staffers will choose from one of the following sessions:	Education Session: Stakeholder Governance Strategies for Ambient Artificial Intelligence Scribes: An Interactive Workshop	Ambient artificial intelligence (AI) Scribe applications are rapidly emerging technologies in healthcare environments, and healthcare organizations are currently piloting implementations. However, several questions have arisen from each of the key stakeholders. There is uncertainty regarding patient understanding, the need for frequent consent and reconsent, and privacy concerns. Clinicians are expressing hope for greater patient engagement during clinical encounters and reduced “pajama time,” but are mindful of workflow disruptions and the potential inaccuracies and fallibility of generative AI. Similarly, information technologists recognize the need for validations, business rules and ongoing alignment with health IT strategy. However, many of these considerations have not yet been established, resulting in a lack of supporting documentation. The goal of this workshop is to collect practices utilized by healthcare organizations from the patient, clinician and information technologist perspectives,	Wendy Charles Assistant Professor, Health Informatics and Healthcare Management University of Denver  Renée Pratt Faculty, Computer Science and Information Systems University of North Georgia  Jack Crumbly Management Department Head and Faculty Andrew F. Brimmer College of Business and Information Science, Tuskegee University

		to formulate ambient AI scribe governance best practices for each.	
Education Session: Smart Medication Management: Bridging Technology with Patient Understanding	Health literacy is a social determinate of health and low health literacy is a persistent barrier to effective care and safety, especially at discharge. This session showcases how one healthcare system improved health and medication literacy through a patient-centered education tool integrated into its electronic healthcare record. Attendees will learn how personalized, multilingual and standardized medication calendars using plain language, pictograms and clinical indications can help improve patient comprehension of their medication regimens and discharge readiness. The session highlights implementation lessons, training strategies and equity-focused design approaches that can be adapted by any healthcare system seeking to improve medication adherence, meet patients where they are, ensure patient safety and reduce disparities. Attendees will leave with clear strategies for embedding technology to aid health literacy into medication reconciliation and discharge workflows.	Greg O'Neill Director, Patient and Family Health Education ChristianaCare  Kristen Callaghan Nursing Professional Development Specialist, Patient and Family Health Education ChristianaCare	
Education Session: Wait, I'm the Human in the Loop?	<p>“Human in the loop” is everywhere in AI policy and vendor promises — but what does it actually mean when applied in healthcare? Too often, the label shifts risk onto clinicians and leaders without giving them the tools, context, or authority to act effectively. Meanwhile, the “learned intermediary” model raises similar questions: who carries responsibility, how is oversight documented, and when is it more symbolic than substantive?</p> <p>This session unpacks the real implications of HITL and learned intermediary models in healthcare AI. Using AI-generated reproductions of</p>	Julia Zarb Principal & Founder Blue x Blue Inc.	

		recent scenarios from operations, extreme weather and disaster response, we will explore when oversight empowers safe, explainable decisions — and when it risks becoming a liability handoff.	
11:30am - 12:30pm  Concurrent Education Sessions, staffs will choose from one of the following sessions:	Education Session: Connecting Behavioral Health and Whole-Person Care in Georgia	Behavioral health does not exist in isolation—it is deeply intertwined with housing, employment, physical health, and social supports. Georgia Health Information Network (GaHIN), the state’s health information exchange serving 11 million residents, is transforming how behavioral health is delivered by connecting community service boards (CSBs), hospitals, and social services into a single interoperability framework. Through its Social Care Integration Initiative with the Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD), GaHIN is building closed-loop referral systems, Smart-on-FHIR tools, and data exchange pathways that bridge clinical care with social determinants. This session will explore how GaHIN aligned state agencies, local providers, and technology vendors to deliver scalable, measurable solutions that improve access and continuity of care for individuals with behavioral health needs. Attendees will learn strategies for overcoming interoperability barriers, aligning stakeholders with different priorities, and embedding behavioral health into whole-person care models.	Denise Hines Executive Director GaHIN
	Education Session: Empowering Providers, Protecting Humanity: Leading Artificial Intelligence Adoption in Healthcare Workplaces	As artificial intelligence (AI) reshapes healthcare—from documentation support to clinical decision-making—healthcare systems face a dual imperative: adopt innovation wisely and protect the human core of healthcare. Adopting innovation requires both organizational and individual change management. This workshop explores how healthcare organizations can navigate AI adoption while prioritizing	Kari Yacisin Physician University of New Mexico  Nicole Capehart Lecturer, Organizational Behavior and Human Resources Anderson School of

	<p>provider well-being and the human core of clinical care. The workshop addresses key organizational, human resources (HR) and frontline provider considerations, offering a framework for developing inclusive AI policies, empowering providers to engage with AI tools critically, and fostering leadership that prioritizes humanity alongside innovation. With lessons from real-world case studies and HR/organizational behavior insights, attendees will learn how to: build and advocate for AI policies rooted in transparency, trust, and provider well-being; empower providers to question or adopt AI implementation; identify and address AI bias in workforce tools; and lead change with clarity in a burned-out, throughput-driven culture.</p>	<p>Management, University of New Mexico</p> <p>Meghan Brett Hospital Epidemiologist; Medical Director, Antimicrobial Stewardship; Associate Professor, Infectious Diseases University of New Mexico School of Medicine</p>
<p>Education Session: Will Artificial Intelligence Help or Hinder Advancing Sustainable Healthcare?</p>	<p>The integration of artificial intelligence (AI) into healthcare presents both opportunities and risks for sustainability. This workshop will provide attendees with a nuanced understanding of how AI can either accelerate progress toward environmentally sustainable healthcare or exacerbate its carbon footprint. Through brief presentations and interactive activities, participants will explore: (1) the potential for AI to optimize clinical workflows, reduce waste and improve resource allocation; and (2) the energy and environmental costs of AI-driven healthcare systems, including the carbon footprint of model training and inference. The workshop will employ an inclusive and participatory design-thinking methodology, enabling attendees to contribute to the development of best practices for deploying AI sustainably in healthcare. A large-group activity will focus on assessing AI's sustainability impact across different healthcare domains such as radiology, digital documentation and predictive</p>	<p>Chethan Sarabu Director, Clinical Innovation for the Health Tech Hub Cornell Tech</p> <p>Stefano Leitner Physician Informaticist Suki</p> <p>Manijeh Berenji Associate Clinical Professor UC Irvine</p>

		analytics. By the end of the session, participants will leave with practical frameworks for evaluating the environmental trade-offs of AI in healthcare and strategies for implementing AI in a way that aligns with decarbonization goals.	
12:30 PM – 1:30 PM	HIMSS26 Exhibition Hall Open	Interact with leading healthcare technology companies to gain valuable insights into how innovations are transforming care delivery and improving outcomes across communities and care settings. Experience thousands of innovative products with hands-on and interactive demonstrations and learn from global thought leaders and experts on how technology is delivering better care for more people. *Staff will be provided a list of organizations represented from their states or districts, where applicable.	
1:30pm-2:00pm	Lunch Break - **Meal on your own, by PTS consistent with per diem**		
2:15pm - 3:15pm  Concurrent Education Sessions, staffers will choose from one of the following sessions:	Education Sessions: Global Progress Toward Digital Transformation in the Post-Pandemic Era	The COVID-19 pandemic accelerated digital health adoption worldwide, but how far have healthcare organizations actually progressed in their digital transformation journeys? This session presents comprehensive analysis from the HIMSS Office of Scientific Research, examining Digital Health Indicator (DHI) data from 253 healthcare organizations across 12 countries, revealing striking global patterns in digital maturity development. The research uncovers significant variations in digital readiness across regions, with notable differences between developed and developing healthcare systems. Most remarkably, the data reveals that governance and workforce capacity consistently rank as the strongest digital health capability globally, while person-enabled health and predictive analytics lag significantly behind across	Alexandra Wright Director, Research, Office of Scientific Research HIMSS

		all countries. Through analysis of interoperability, person-enabled health, predictive analytics and governance capabilities, this session examines what these patterns reveal about global digital health priorities and readiness. The findings highlight critical gaps where healthcare organizations worldwide are struggling to advance, particularly in patient engagement technologies and data-driven decision-making.	
Education Sessions: Rural Case Management: Lowering Utilization and Healthcare Costs	Rural communities face unique healthcare hurdles. This session unveils a blueprint for advancing community health in these underserved areas, focusing on a Primary Care Case Management model. This approach effectively targets non-clinical drivers of health at the community level, empowering rural hospitals to lead local care coordination and unlocking new funding streams for managing both clinical and non-clinical needs. This session will explore the lessons learned and interim findings from Missouri’s Transformation of Rural Community Health (ToRCH) pilot program, specifically designed to tackle the unique complexities of rural Medicaid populations. It will delve into the application of data-driven, community-based strategies to effectively manage chronic diseases, reduce disparities, and mitigate the impact of non-clinical drivers of health. Attendees will gain actionable insights and a clear roadmap for replicating this success to foster healthier, more resilient communities.	<p>Kirk Mathews Chief Transformation Officer Mo HealthNet</p> <p>Marvin Smoot Vice President, Clinic Operations Bothwell Regional Health Center</p> <p>Dr. Halima Ahmadi-Montecalvo Vice President, Research and Evaluation Unite Us and Milken Institute School of Public Health at George Washington</p>	
Education Session: Securing the Edge: Protecting Our Hospital	Hospitals are increasingly reliant on a vast and diverse ecosystem of edge devices—ranging from mobile workstations and tablets to infusion pumps and diagnostic equipment. Yet, these devices often operate with limited oversight, outdated software and weak access controls, making them a prime target for attackers. In this session, we	Phil Curran Chief Information Security Officer and Chief Privacy Officer Cooper University Health Care	

		will share a comprehensive case study on how we tackled edge device vulnerabilities and reshaped our security posture from the ground up. Attendees will learn how we addressed these risks through device hardening, using customer information system baselines, network segmentation, identity and access management improvements, and passive vulnerability monitoring. .	
Concurrent Education Sessions, staffers will choose from one of the following sessions:			
3:30 PM to 4:30 PM	Education Session: Innovating for Access: Real-World Strategies Advancing Healthcare System Resilience	This panel highlights how applied innovation can drive scalable, sustainable improvements in health outcomes by addressing upstream barriers to care referred to as social determinants of health. Drawing from work in veteran services, cancer care, broadband expansion and digital literacy, the session presents real-world strategies that integrate technology, policy and human-centered design. Panelists from academia, the nonprofit sector and digital health startups will share how their initiatives improve infrastructure, care coordination and patient engagement, offering actionable solutions to persistent system gaps.	Luis Belén Health Innovation Leader and Chief Executive Officer NHIT Collaborative for the Underserved  Gabriela Mustata Wilson Educator University of Louisiana at Lafayette  Rahul Mahadevan Founder and Chief Executive Officer The WiTT Group, Inc.
3:45 PM to 4:15 PM	Education Sessions: Building Trust and Confidence Through Better Healthcare Data Quality and Usability	Leveraging the Sequoia Project’s Data Usability Workgroup Implementation Guide Version 2.0, released December 11, 2024, this session explores seven critical focus areas—from provenance and code use to reducing duplicates and ensuring data integrity—that directly underpin trustworthiness. Participants will gain a roadmap to enhance systems and workflows through practical tech-agnostic guidance aligned with United States Core Data for Interoperability (USCDI) version 3 and HL7® standards. We will dive into how the Data Usability Taking Root Community of Practice has leveraged structured	Didi Davis Vice President, Informatics, Conformance and Interoperability The Sequoia Project

		provenance tracking, standardized coding, narrative linkage, lab interoperability and metadata tagging, which all contribute to data's integrity—and to the clinician and patient confidence it inspires. With USCDI version 3 adoption starting in 2026, plus growing expectations for data insight tools and artificial intelligence, there is no better time to build the foundation of trusted data.	
3:40 PM to 4:00 PM	Cybersecurity Command Center: Assessing data risks in the world of artificial intelligence	Using Generative A.I. tools may be beneficial in many areas of healthcare. However, using these tools comes with a possibility of substantial risks to data. With using any Generative A.I. within an organization, data is created at an exponential level and healthcare organizations should be aware of the risks involved with using these tools. Learn some of the risks and ways to approach assessing using Generative A.I. tools at this session.	Jerry McIver Director, Cyber Services and Data Privacy Officer Trustpoint.One
4:30 PM - 5:30 PM	Government Connections Plaza Opening Reception *optional, open to all attendees	Join us for the Government Connections Plaza Opening Reception and connect with fellow health information and technology thought leaders and policy influencers from around the globe	
	Dinner on your own, by PTS consistent with per diem		

<b>Wednesday, March 11th</b>			
<b>Time</b>	<b>Title</b>	<b>Description</b>	<b>Speakers</b>
8:30am-9:30am	Opening Keynote		
9:45am - 10:45am Concurrent Education Sessions, staffs will choose from one of	Education Session: Accelerating Artificial Intelligence (AI) Literacy in Public Healthcare	Changi General Hospital (CGH), Singapore, launched a large-scale AI literacy programme to prepare staff for safe adoption of emerging AI tools. With generative AI platforms such as the national Pair platform and SingHealth's Tandem system gaining traction, CGH recognized that democratizing access required education	Weien Chow Chief and Senior Consultant Cardiologist Changi General Hospital  Narayan Venkataraman

the following sessions:		rather than restrictions.  This presentation will share methodology, partnership models, and lessons from scaling AI literacy across a major healthcare institution. Attendees will gain practical strategies for embedding AI education, designing governance frameworks for democratized access, and sustaining clinical excellence while embracing innovation.	Deputy Director of Data Science and Intelligence Changi General Hospital  Charlene Liew Doctor Changi General Hospital
	Education Session: Using Technology to Enhance Access to Youth Mental Healthcare	This session will present data from the East Carolina University's (ECU) Center for Telepsychiatry that serves children and adolescents using an approach that integrates primary and specialty care. Using pediatric clinics as the host sites helps remove the stigma associated with mental health, enhances compliance with appointments, and offers expert consultation support for busy and often overwhelmed pediatricians. Using virtual reality, the program has also created "NC Rural Kids Get Well," a 3-D community on the Roblox platform to serve three main purposes: education, peer support and surveillance. The program features an artificial intelligence-driven knowledge management online portal to enhance collaborations among different sites' healthcare providers; encourage family members' engagement in children's mental healthcare; discover innovative and customized mental health service approaches for rural children; and disseminate timely and relevant mental health knowledge to healthcare professionals, family members and local community partners.	Sy Atezaz Saeed Founding Executive Director North Carolina Statewide Telepsychiatry
	State Officials Forum		
11:00am - 12:00pm  Concurrent Education	Congressional Forum	The Congressional Forum is a lively panel discussion featuring key Congressional staffers on the digital health policy landscape and what we can expect from the legislative agenda in	

Sessions, staffers will choose from one of the following sessions:		2026. This session will look at the pressing issues facing lawmakers and what opportunities exist with a divided Congress to pass meaningful legislation that will advance the U.S. health system transformation.	
	Industry Solutions Session: Interoperability Makes the World Go Round	Interop is a major health policy initiative globally, it is a key investment area for most in the MedTech and HIT space, and it is a still a major challenge. Why and how can we move forward effectively?	<p>Madhu Narasimhan Chief Information Officer DaVita</p> <p>Kevin Larsen Senior Vice President, Clinical Innovation Optum</p> <p>Haim Goudel Senior Technologist Medtronic</p> <p>Alex MacLeod Head of Healthcare Solutions Support InterSystems</p>
12:00-12:30pm	Lunch Break - **Meal on your own, by PTS consistent with per diem**		
12:30pm-1:30pm	HIMSS26 Exhibition Hall Open	Interact with leading healthcare technology companies to gain valuable insights into how innovations are transforming care delivery and improving outcomes across communities and care settings. Experience thousands of innovative products with hands-on and interactive demonstrations and learn from global thought leaders and experts on how technology is delivering better care for more people. *Staff will be provided a list of organizations represented from	

		their states or districts, where applicable.	
2:00pm - 3:00pm Concurrent Education Sessions, staffers will choose from one of the following sessions:	Education Session: Statewide Approach for Addressing Health Related Social Needs	This session will share the results of a statewide public/private partnership to address health related social needs in Pennsylvania. The presenter will share the key learnings on how engagement with healthcare providers, community-based organizations and the state's departments yielded the successful rollout of the program. The presenter will also describe the methods that were used to maintain that engagement over the long term, describing the importance of using standard code mappings from the Gravity Project® to aggregate data in a meaningful way. The presentation will include current usage statistics that show the impact that the statewide approach has had on communities within Pennsylvania and it will provide meaningful lessons learned that other states and organizations can employ to successfully implement a program in their communities.	Keith Cromwell Senior Director, Ambulatory Applications and Epic Connect Penn Medicine
	Education Sessions: Leveraging Digital Health Integration to Advance Military Medicine	Learn how the Military Health System is leveraging Health Informatics, and enterprise coordination to implement new technology to improve health outcomes and the patient and provider experience.	Tracy Farrill Director, Digital Health Integration Office Defense Health Agency  Tara Conner Chief Health Informatics Officer Defense Health Agency
3:15pm - 4:15pm	From Silos to Sustainability : Driving Financial Transformation Through System-Wide Integration	As healthcare systems face unprecedented financial and operational pressures, Hackensack Meridian Health Network developed and implemented a bold, systemwide Clinical Integration and Financial Sustainability model designed to drive clinical, operational and financial performance, reduce unwarranted variation, and improve value-based outcomes. This session will showcase how HMHN built a scalable,	Elham Yousef Vice President & Chief Clinical Integration Hackensack Meridian Health  Michael Allen President, Financial Services Division and Chief

		governance-driven framework that integrates clinical standardization, real-time analytics and operational accountability across all care settings to drive clinical excellence and ensure long-term financial sustainability. The model embeds clinical decision support, performance dashboards and cost-monitoring tools into workflows—enabling a projected annual return on investment that exceeds \$150 million through cost variation reduction, imaging and level of service optimization, and enhanced revenue cycle performance. The session will provide actionable strategies to align clinical, operational and financial leadership, build accountability and leverage digital infrastructure to support continuous performance improvement.	Financial Officer Hackensack Meridian Health
3:30 PM to 4:00 PM  Concurrent Education Sessions, staffers will choose from one of the following sessions:	Education Session: Rural Population Health: Data Insights Drive Enhanced Outcomes and Cost Savings	Rural healthcare organizations face distinct challenges in providing high-quality, accessible care to aging and geographically dispersed populations. Addressing these challenges requires integrated, patient-centered and data-driven strategies that go beyond traditional models to consider both clinical needs and social determinants of health. This session highlights how one rural healthcare system implemented a successful population health program that improved quality metrics, expanded preventive care, reduced hospital readmissions and increased revenue. The session will also explore how technology and data analytics enhance decision-making and financial allocation, even in resource-limited settings. Participants will leave equipped with practical strategies for strengthening care team collaboration, fostering deeper patient relationships and achieving better long-term outcomes.	Holly Davis Chief Nursing Officer Bingham Healthcare
	Education Session: Value- Based Care	As value-based care (VBC) expands, healthcare systems must reimagine how they coordinate care, especially in post-	Lafe Bauer Vice President, Post-Acute

	Pioneer Shares Its Secrets	acute environments. This session will showcase how a regional academic healthcare system, under the leadership of its population health director, transformed its VBC performance by redesigning post-acute workflows, investing in predictive data analytics and driving deeper collaboration with skilled nursing facilities. Together with a regulatory expert from the health-technology sector, this session will explore what’s next, including how federal programs like the AHEAD model and the Centers for Medicare and Medicaid Services (CMS) mandatory Transforming Episode Accountability Model may reshape care delivery and reimbursement models. Attendees will walk away with tactical insights and measurable results from a healthcare system that achieved a 32 percent reduction in skilled nursing facilities’-related readmissions in just two years.	Services University of Maryland Medical System  Robin Roberts Director, Health IT Regulatory Affairs PointClickCare
4:00 PM to 4:30 PM	Exhibition Demo: AI Agents, Real Results: Faster, Safer Patient Interactions	Poor experiences—from scheduling to billing to simple questions—erode trust in healthcare providers. Agentic AI changes that by resolving issues quickly and consistently, with automation built for scale plus enterprise-grade security and compliance.	George Downey Conversational AI Consultant NiCE Cognigy
5pm-6:30pm	Patient ID Now HIMSS26 Happy Hour *optional, open to all attendees		
	Dinner on your own, by PTS consistent with per diem		

Thursday, March 12th			
Time	Title	Description	Speakers
Est. Departure 9am-12pm	Staffers depart via flight; flights to be booked via travel agency		
8:30 AM to 9:30 AM	Architecting Federal Public Health with the CDC Technical Reference Architecture	Public health informatics is supported by a complex web of information technology (IT) systems, databases, applications and networks. In the face of such complexity, how do large public health organizations drive public health impact through digital transformation and technology modernization? We present how the Centers for Disease Control and Prevention	Ryan Harrison Enterprise Architect Centers for Disease Control and Preventio

	<p>(CDC), the U.S. federal public health agency, used Enterprise Architecture to codify principles, standards and preferred solutions into a consolidated Technical Reference Architecture (CDC TRA). During this session, we will briefly overview the federal health architecture, public health informatics and the data modernization initiative. Next, we will show the publicly accessible version of the CDC TRA, with an emphasis on how it is used in enterprise and local governance. Finally, we will discuss lessons learned applicable to mid-to large-sized enterprises engaged in their own health informatics modernization initiatives, and how enterprise architecture is a driver of technology transformation.</p>	
<p>Education Session: From Insight to Impact: Advancing Artificial Intelligence Readiness in Nursing Practice</p>	<p>As healthcare systems face increasing demands for efficiency, quality and workforce sustainability, artificial intelligence is rapidly emerging as a tool to support clinical decision-making, reduce documentation burden and optimize workflows. While many healthcare systems are investing in AI integration and how it may address some of these challenges, a critical problem must first be addressed. Despite AI's growing presence, many nurses are often unprepared or report uncertainty, confusion or resistance when asked to adopt AI-supported tools due to limited exposure, training or trust. These barriers pose a significant risk to successful implementation, as nurse engagement is essential to realizing the value of AI at the bedside and across care teams. This session highlights a nurse-centered implementation strategy designed to introduce AI into nursing workflows for users with little to no prior exposure. Using a phased, human-centered approach, the initiative prioritized foundational education, workflow alignment, peer-led training and communication, and continuous feedback from frontline nurses. Findings included increased nurse engagement with AI tools, reduced documentation latency and improved nurse confidence in using AI-</p>	<p>Cheryl Denison Principal Clinical Business Solution Analyst Mercy Tracy Breece Vice President, Nursing Innovation, AI &amp; Emerging Technologies Advocate Health</p>

		supported systems. Success was driven by early nursing involvement, integration within existing workflows, and sustained support from nurse champions and leadership.	
	Education Session: Healthcare and Public Health Cybersecurity: Building Resiliency with Innovation	The healthcare and public health sector is seeing exponential increases in data breaches and ransomware attacks. You don't have to look further than any major news media outlet to see that healthcare cyberattacks are increasing and becoming more complex as our sector has valuable patient and research data along with high profile services that when disrupted cause serious impacts. This panel discussion will include senior executive participation from the U.S. Department of Health and Human Services (HHS) and interagency partners to discuss how sector organizations can implement cybersecurity best practices and the resources available to help improve their cybersecurity posture. The panel will also include a look back at recent high profile cybersecurity attacks on the sector and the resulting lessons learned. Panelists will also preview innovative solutions being developed to support cyber-resilience.	Andrew Carney Program Manager Advanced Research Projects Agency for Health  Chris Tyberg Chief Information Security Officer Abbott  Madhu Gottumukkala Acting Director
9:45 AM to 10:45 AM	Education Session: Empowering Rural Healthcare: Strategic Leap with Generative Artificial Intelligence	Rural healthcare often faces distinct hurdles. Hear the inspiring story of Southern Coos Hospital and Health Center, which successfully navigated these challenges by strategically adopting Generative AI. Learn how they leveraged a variety of resources available to rural health systems and began using this technology to bridge gaps, empower their workforce and ultimately better serve their community.	David Rhew Chief Medical Officer Microsoft  Laura Kreofsky Director, Rural Health Resiliency Microsoft  Scott McEachern Director Southern Coos Hospital
11:00 AM to 12:00 PM Concurrent Education	Education Session: Boosting Medicaid Efficiency Through	As Medicaid programs pursue operational excellence, statewide health information exchanges (HIEs) are becoming essential health data utilities (HDUs) infrastructure that transform data into actionable insights, supporting Medicaid and public health	Chris Underwood Senior Consultant Colorado Department of Healthcare Policy and Financing

Sessions, staffers will choose from one of the following sessions:	Health Information Exchange Integration	<p>priorities. This session features Medicaid leaders discussing how to leverage HIEs/HDUs to enhance system performance above and beyond what national interoperability networks offer. Attendees will gain practical tips for using HIE solutions to reduce emergency department visits and realize Medicaid cost savings, improve quality, measure performance through supplemental data, support behavioral health and crisis system integration, and deliver real-time data that supports care coordination and Centers for Medicare and Medicaid Services (CMS) compliance. The panel will highlight best practices for robust data normalization, patient matching and identity resolution—core HDU capabilities that ensure high-quality analytics—as well as strategies that sustain long-term value. Through real-world use cases, participants will learn how HIEs/HDUs can drive Medicaid efficiency and align with regulatory goals to improve member outcomes.</p>	<p>Melissa Kotrys Chief Executive Officer Contexture</p> <p>Anthony Flot Chief Information Officer Arizona Health Care Cost Containment System (AHCCCS)</p>
	Education Session: Invisible Frontlines: Supporting IT Professional's Mental Health in Telehealth Service	<p>Burnout and mental health issues among medical providers have been extensively documented, prompting the development of support systems tailored to their needs. However, the mental health challenges faced by IT professionals supporting telehealth services remain largely unrecognized. This session explores the emotional toll experienced by IT staff in high-stakes clinical environments, highlights a critical incident that exposed this gap, and outlines a structured support framework developed to address their unique needs. Using Scott's Three-Tier Interventional Model, we implemented targeted interventions including mandatory debriefings, stigma-free access to mental health resources, and simulation-based training. Our findings underscore the necessity of extending mental health support beyond clinicians to include all members of the telehealth team.</p>	<p>Bobbie Carlisle TeleNICU Coordinator University of Utah Healthcare</p>
	Education Session:	<p>Maternal care deserts, regions lacking adequate access to maternity services, pose</p>	<p>Lauri Billingsley Student Research</p>

<p>Artificial Intelligence Powered Solutions to Address Maternal Care Deserts in Communities</p>	<p>a critical threat to maternal and infant health, particularly in rural and underserved communities. This session explores the application of AI to identify, analyze and help mitigate these disparities. By leveraging machine learning and geospatial analysis, we identified high-risk areas with limited access to obstetric care and assessed them with poor maternal health outcomes. Our findings highlight the predictive power of AI in mapping care gaps and anticipating adverse events, enabling more targeted policy interventions and resource allocation. We also examined AI-driven solutions such as telehealth triage systems, mobile health platforms and predictive models for early risk detection. Although it appears that AI offers transformative potential to bridge maternal care gaps, we cautiously address ethical deployment, community collaboration, and policy alignment as anticipated challenges to ensure equitable and effective outcomes.</p>	<p>Assistant UTA Center for Rural Health and Nursing  Mari Tietze Myrna R. Pickard Endowed Professor University of Texas at Arlington</p>
<p>2:00 PM to 3:00 PM  Concurrent Education Sessions, staffers will choose from one of the following sessions:</p>	<p>Education Session: A Rural Health System’s Leapfrog Improvement Using Smarter Medication Guidance</p> <p>After becoming newly independent, our healthcare system faced a critical challenge: how to maintain our community’s trust in the quality and safety of our care without the infrastructure of a large healthcare system. With limited resources, we set a goal to improve our Leapfrog Hospital Safety Grade. One of our first challenges was Computerized Physician Order Entry (CPOE). We leveraged analytics and medication decision support innovation to achieve a CPOE rate of more than 95 percent and surpass the average Leapfrog CPOE testing score of 80.23. This session tells the story of how the healthcare system leveraged a data and clinical decision support optimization solution to analyze, optimize and streamline medication alerts across its electronic health record without creating alert fatigue. The result was a dramatic improvement in alert relevance and a notable decrease in prescriber overrides, coupled with high levels of clinician satisfaction and improved Leapfrog CPOE testing results. Attendees</p>	<p>Julie Demaree Executive Director of Clinical Innovation and Transformation St. Mary’s Healthcare  Michael LeBlanc Clinical Pharmacy Manager St. Mary’s Healthcare  Josh Baker Director, Pharmacy St. Mary’s Healthcare</p>

		will learn replicable strategies for enhancing clinical safety and efficiency, even in settings where staffing and budgets are constrained.	
	Education Session: Stronger Together: Advancing Social Determinants of Health Through Cross-State Collaboration	Health Information Exchanges (HIEs) in Colorado, Arizona and Wyoming are redefining collaboration through innovative Social Determinants of Health (SDoH) initiatives that bridge healthcare and community services. This session will explore how these states are partnering with community-based organizations to build seamless, interoperable systems that connect medical, behavioral and social care providers. By aligning shared goals, building trust and leveraging collective expertise, these HIEs are reducing duplication, improving care coordination, advancing health equity and lowering overall system costs. Presenters will share real-world examples, lessons learned, and practical strategies that demonstrate how cross-state collaboration and “co-opetition” can accelerate healthcare system transformation. Attendees will gain insight into how these partnerships are driving sustainable, data-informed solutions that support whole-person care and improve outcomes for vulnerable populations. The key takeaway: when HIEs work together across state lines and sectors, they can achieve greater impact, efficiency and long-term value than by working in isolation.	<p>Sarah Martin IT Manager Wyoming 211</p> <p>Kelly McGann Director, Social Determinants of Health Contexture</p> <p>Jackie Sievers Vice President, Social Determinants of Health and Government Affairs Contexture</p>
3:15pm-4:30pm	Closing Keynote		

Michael Guest, Mississippi  
*Chairman*  
Mark DeSaulnier, California  
*Ranking Member*

Andrew R. Garbarino, New York  
Ashley Hinson, Iowa  
Nathaniel Moran, Texas  
Brad Knott, North Carolina

Deborah K. Ross, North Carolina  
Glenn F. Ivey, Maryland  
Sylvia R. Garcia, Texas  
Sahas Subramanyam, Virginia



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## U.S. House of Representatives

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*Counsel to the Ranking Member*

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Telephone: (202) 225-7103  
<https://Ethics.House.gov>

March 6, 2026

Mr. Stephen Wooldridge  
Committee on Energy & Commerce  
2125 Rayburn House Office Building  
Washington, DC 20515

Dear Mr. Wooldridge:

Pursuant to House Rule 25, clause 5(d)(2), the Committee on Ethics hereby approves your proposed trip to Las Vegas, Nevada, scheduled for March 9 to 12, 2026, sponsored by Healthcare Information and Management Systems Society (HIMSS).

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 \$525 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,

Michael Guest  
Chairman

Mark DeSaulnier  
Ranking Member

MG/MD:nl

# HIMSS<sup>®</sup> 26

March 9-12 | Las Vegas

GLOBAL HEALTH CONFERENCE & EXHIBITION

## Cutting-Edge Healthcare Starts Here! Save the Date.



**February 9, 2026**

**Dear Mr. Wooldridge,**

On behalf of the HIMSS Government Relations Team, we are honored to invite you extend this invitation for you to attend the 2026 HIMSS Global Health Conference and Exhibition in Las Vegas, Nevada, taking place March 9-12, 2026.

As the largest U.S.-based healthcare conference and a premier global convening of leaders across the health ecosystem, HIMSS26 will gather more than 25,000 professionals, including clinicians, policymakers, health system executives, and technology innovators. The Opening Keynote is a signature event, expected to draw 7,000–8,000 attendees, and offers an influential platform to share your vision for the future of healthcare.

HIMSS26 will include hundreds of highly vetted sessions from industry leaders, renowned keynote speakers, specialty programs to meet distinct needs, and hands-on preconference symposia and forums. Attendees include hospital executives, physicians, practice managers, nurses, pharmacists, and other healthcare providers, federal, state, and local government representatives, public health professionals, and technology vendors and market suppliers. To learn more about HIMSS26 please visit <https://www.himssconference.com/>

During the conference, you may be especially interested in participating in a range of policy discussions and exhibits, including the HIMSS Interop+Smart Experience Pavilion, AI Pavilion, Patient Engagement 365 Pavilion, Cybersecurity Command Center, Government Connections Plaza, and other educational opportunities.

For over twenty years, HIMSS has offered paid educational opportunities for select policymakers and staff to attend the HIMSS Global Health Conference to learn about the policy issues and challenges of the system-wide adoption of health information and technology. Consistent with Senate and House ethics rules, HIMSS is extending an invitation to attend HIMSS25 for up to three days (72 hours, excluding travel time). HIMSS does not employ or engage a registered lobbyist or lobbying firm, nor do we serve as a foreign agent. Upon acceptance of this invitation, we will provide the necessary documents to submit with your request for approval of privately sponsored travel to the Senate Select Committee on Ethics or the

House Committee on Ethics, as applicable. Requests must be submitted to ethics by COB February 9 (at least 30 days prior to travel). HIMSS will also provide instructions to book your travel in compliance with applicable ethics travel rules.

**If you are able to accept our invitation, we respectfully request a reply by February 9th, 2026, to support planning for travel logistics.** If you have any questions, please feel free to contact Lovina John at [ljohn@himss.org](mailto:ljohn@himss.org) or 845-775-7195. Thank you for considering our invitation.

A handwritten signature in cursive script that reads "Thomas M. Leary". The signature is written in black ink and is positioned above the printed name and title.

**Thomas M Leary, MA, CAE, FHIMSS**

Senior Vice President and Head of Government Relations