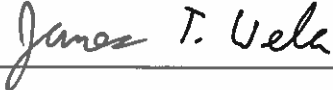



**DISCLOSURE BY ELECTED PUBLIC EMPLOYEE
OF TRAVEL EXPENSES SERVING A LEGITIMATE PUBLIC PURPOSE
AS REQUIRED BY 930 CMR 5.08(2)(d)2. ETHICS COMMISSION**

RECEIVED
2016 DEC -1 PM 2:13

	ELECTED PUBLIC EMPLOYEE INFORMATION
Name of elected public employee:	James T. Welch
Title/ Position	State Senator
Agency/ Department	Senate
Agency address:	State House, Room 309 Boston, MA 02133
Office phone:	617-722-1660
Office e-mail:	james.welch@masenate.gov
Write an X to confirm each statement.	<p>I am filing this disclosure because:</p> <p><input checked="" type="checkbox"/> I am going to engage in an activity that serves a legitimate public purpose, i.e., it is intended to promote the interests of the Commonwealth, a county or a municipality; and</p> <p><input checked="" type="checkbox"/> A non-public entity (but not a lobbyist) has offered to reimburse, waive or pay travel expenses and costs worth more than \$50.</p>
	ACTIVITY THAT SERVES A LEGITIMATE PUBLIC PURPOSE
Describe the activity which is the reason for traveling.	The Reforming States Group is a bipartisan group of health care policy experts from the executive and legislative branches of several states. The group is convening for a meeting in Miami to share information and discuss problems and solutions in health care policy.
Describe your participation in the activity.	I will participate in meetings and discussions regarding health care policy.
Date, time and location of activity.	December 5-7, 2016 Sonesta Coconut Grove Hotel 2889 McFarlane Road Miami, FL

Please explain how the activity will promote the interests of the Commonwealth, a county or a municipality.	This meeting will inform my work as the Senate Chair of the Joint Committee on Health Care Financing.
	TRAVEL EXPENSES
Identify the person or organization that offered to reimburse, waive or pay your travel expenses.	Milbank Memorial Fund
Address of person or organization.	645 Madison Avenue, 15th Floor New York, NY 10022
Provide information in as much detail as possible:	<i>Itemization and explanation of amounts offered:</i>
Transportation:	\$196.20 round-trip flight
Lodging:	\$182/night for 2 nights + tax
Meals:	\$300 total for 3 days
Admission:	
Other (please list):	
Total:	\$590.20
Write an X beside any relevant statement.	X I have attached the relevant itinerary. X I have attached the relevant agenda.

For the exemption to apply, check off <u>both statements.</u>	<p>Having disclosed the facts above, I determine that:</p> <p>X Acceptance of the reimbursement, waiver or payment of travel expenses will serve a legitimate public purpose i.e., it will promote the interests of the Commonwealth, a county or a municipality; AND</p> <p>X Such public purpose outweighs any special non-work related benefit to me or to the person providing the reimbursement, waiver or payment.</p>
Employee signature:	
Date:	

Attach additional pages if necessary.

Elected state or county employees – file with the State Ethics Commission.

Members of the General Court – file with the House or Senate clerk or the State Ethics Commission.

Elected municipal employee – file with the City Clerk or Town Clerk.

Elected regional school committee member – file with the clerk or secretary of the committee.

Form revised February, 2012



Leaders in Health Reform
from the States

Reforming States Group (RSG) Miami Pre-Conference

How Can States Improve Care for Older Adults with Complex Needs? State Policy Priorities for Improving Care

Sponsored by the Reforming States Group in
Collaboration with the Milbank Memorial Fund

Sonesta Coconut Grove, Miami, Florida
December 5, 2016

AGENDA

Monday, December 5	
12:00 P.M.	Buffet Lunch – Biscayne Ballroom
12:30	<p>Welcome and Introduction of Session <i>Nick Macchione, Vice Chair, RSG Steering Committee</i> <i>Director and Deputy Chief Administrative Officer, County of San Diego</i></p> <p>Almost 5 million Medicaid beneficiaries use long-term services and supports (LTSS) and more than 10 million Americans are dually eligible for both Medicaid and Medicare benefits. To support a growing population of aging adults as well as adults with disabilities, states are looking for solutions to provide high quality and cost-effective health care options. Two policy issues of major importance to the aging population drive many policy activities: rebalancing LTSS spending to community-based care and integrating Medicare and Medicaid for individuals covered under both programs.</p> <p>Federal Medicaid law requires states to provide institutional LTSS (long-term or custodial nursing home placement) for individuals over age 21, whereas most home and community-based services are optional, creating a bias for providing services in an institutional setting. Per capita costs for nursing facility services are often more expensive and are rarely the preferred setting for beneficiaries, which can have an adverse impact on their quality of life. However, states have shifted the balance of LTSS expenditures from only 18 percent for home and community-based services in 1995 to 51.3 percent in 2013 – just over half.</p> <p>Individuals dually eligible for Medicare and Medicaid are among the highest-cost enrollees in either program. The lack of coordination between these two programs creates challenges for beneficiaries who must navigate fragmented</p>

	<p>program rules and different providers, among other challenges. Perverse incentives to reduce spending in respective programs result in bad health outcomes and unnecessary spending. An increasing number of states are working with federal partners, health plans and provider groups to implement various types of integrated care programs with the intended goal of simplifying the delivery system for beneficiaries and aligning cost incentives across programs.</p> <p>This pre-conference session will bring together nationally-recognized experts to discuss shifting care delivery and spending from institutional to community-based settings, and efforts to integrate Medicaid and Medicare activities that advance person-centered, high quality, cost-effective care.</p>
12:45	<p>Overview of Long-Term Services and Supports (LTSS) Rebalancing and Medicare-Medicaid Integration: The National Landscape <i>Michelle Herman Soper</i> <i>Director of Integrated Care</i> <i>Center for Health Care Strategies</i></p> <p>Ms. Soper will provide a national perspective on federal and state activities.</p>
1:05	<p>LTSS Rebalancing Presentation and Q & A <i>Michael Nardone</i> <i>Director, Disabled and Elderly Health Programs Group</i> <i>Center for Medicaid and CHIP Services (CMCS)</i></p> <p>Mr. Nardone will provide an overview of current LTSS needs and describe policy levers that are available to policymakers. He will describe the rationale for investing in LTSS rebalancing efforts, related operational and policy challenges, and the future direction for this work.</p>
1:50	<p>LTSS Rebalancing Caucus Participants will divide into small groups and discuss a case study example to address policy, programmatic, and stakeholder considerations for LTSS rebalancing. Each group will present case study solutions and key lessons from the discussion.</p>
2:45	BREAK
3:15	<p>Medicare-Medicaid Integration Presentation and Q & A <i>William Hazel, Jr.</i> <i>Secretary of Health and Human Resources</i> <i>Commonwealth of Virginia</i></p> <p>Dr. Hazel will provide an overview of the importance of and current needs for Medicare-Medicaid integration for dually eligible individuals. He will discuss the challenges associated with working with Medicare, state innovations to address these challenges, and future direction for this work.</p>
4:05	<p>Medicare-Medicaid Integration Caucus Participants will divide into small groups and discuss a case study example to address policy, programmatic, and stakeholder considerations for Medicare-Medicaid integration. Each group will present case study solutions and key lessons from the discussion.</p>
5:15	Closing Remarks and Adjourn



The
Reforming
States
Group

Leaders in Health Reform
from the States

Reforming States Group (RSG) Miami Meeting

Sponsored by the Reforming States Group in
Collaboration with the Milbank Memorial Fund

Sonesta Coconut Grove, Miami, Florida
December 5, 2016

AGENDA

Monday, December 5	
6:00 P.M.	Reception – Bay Room
6:30	<p>Dinner</p> <p>Welcome and Introduction of President <i>Harriette Chandler, Co-Chair</i> <i>RSG Steering Committee</i> <i>Majority Leader</i> <i>Massachusetts State Senate</i></p> <p>Overview of Meeting <i>Christopher F. Koller, President</i> <i>Milbank Memorial Fund</i></p> <p>Individual Introductions <i>Meeting participants</i></p>
7:15	<p>What now? State Health Policy Options in an Era of Increased Federal Flexibility <i>Jane Kitchel, Chair, Committee on Appropriations</i> <i>Vermont Senate</i> <i>Christopher Koller</i></p> <p>Health policy will be a priority issue as the new Administration and Republican-led Congress come to Washington DC in 2017. What changes in the next year or two will most likely affect states? Chris will facilitate a discussion with the participants on how states might respond to new federal directions.</p>
8:30	Adjourn



Leaders in Health Reform
from the States

Reforming States Group (RSG) Miami Meeting

Sponsored by the Reforming States Group in
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Sonesta Coconut Grove, Miami, Florida
December 6-7, 2016

AGENDA

Tuesday, December 6	
7:00 A.M.	Breakfast – Biscayne Ballroom
8:00	Welcome and Overview of Agenda <i>Terry Cline</i> <i>Co-Chair, RSG Steering Committee</i> <i>Oklahoma Commissioner of Health</i>
8:15	State Jurisdiction Updates – 10 minutes for each report. Five minutes of discussion/Q & A will follow. <i>Meeting participants facilitated by co-chair.</i> Milbank staff will provide a background sheet with vital information on each state represented. Each state will provide answers to the following questions: <ul style="list-style-type: none">• What were the most significant health care–related legislative or budget initiatives from your most recent legislative session?• What health care issues have dominated the policy discussions in your state this year?• Will there be changes in the ACA landscape in your state in the near future? States with delegations can either have one person speak on their behalf or divide up responses.
10:00	Break
10:30	State Updates - Continue

12:15 P.M.	Lunch
1:00	<p>Leveraging Medicaid to Address the Social Determinants of Health <i>Deborah Bachrach</i> <i>Partner</i> <i>Manatt Health</i></p> <p>Extensive research demonstrates the impact of social factors on individual health and population health outcomes, particularly of low-income populations. These findings are not lost on policymakers who continue to look for strategies to address the medical and social determinants of health. This session will consider how and when Medicaid can cover and pay for non-clinical services that influence population health.</p>
2:45	Break
3:15	<p>Integrated Data Systems: Using Data Across Systems to Make Better Program Investments <i>Dennis Culhane</i> <i>Dana and Andrew Stone Professor of Social Policy</i> <i>School of Social Policy and Practice</i> <i>University of Pennsylvania</i></p> <p><i>Christopher Kelleher</i> <i>Project Manager</i> <i>Center for Evidence-based Policy</i></p> <p><i>David Patterson</i> <i>Chief, Health and Demographics Section</i> <i>South Carolina Revenue and Fiscal Affairs Office</i></p> <p>Government lacks the capacity to fully define, develop, or evaluate the effectiveness of health, behavioral health, and social service interventions over time and across multiple state and local systems. As a result, a number of states and local jurisdictions have developed Integrated Data Systems (IDS) to link data across government agencies to help identify the individuals and families at greatest risk and to assess the impact of program interventions. This session will focus on efforts to develop integrated data systems that bring together health and human services data to inform policy and program decisions.</p>
5:00	Adjourn
6:00	<p>Reception and Dinner Spasso Restaurant – 3540 Main Highway</p>

Wednesday, December 7	
7:00 A.M.	Breakfast – Biscayne Ballroom
8:00	Overview of Session <i>Nick Macchione, Vice Chair, RSG Steering Committee</i> <i>Director and Deputy Chief Administrative Officer, County of San Diego</i>
8:10	Letter to the New Administration (LNA) <i>Jane Kitchel, Member, LNA Work Group</i> <i>Chris Koller</i> <p>2017 brings new leadership to the White House and all federal agencies. As the only national, bipartisan organization of state and local officials from the executive and legislative branches of government committed to improving population health, the RSG Steering Committee is in a unique position to offer bipartisan guidance to the incoming administration. Approved by the Steering Committee in August, this consensus letter suggests federal policy initiatives that can help state and local policymakers implement policies and programs to improve the well-being of the populations they serve. Each of these initiatives are bipartisan, can be implemented administratively, are evidence-based, and do not require new funding. Members of the RSG Steering Committee will present the proposed policy initiatives and how they are being disseminated and received.</p>
9:00	RSG and MMF Activities <i>Chris Koller, Trina Gonzalez and Jane Beyer</i> <p>The RSG and MMF work throughout the year on projects focused on state and local health policy. In addition to the fall meetings, we publish reports and issue briefs, convene policymakers on topics of interest, and provide state-specific technical assistance. MMF staff will provide an overview of these projects.</p>
9:30	Common Themes from State Updates and Review Project Selection Criteria and Potential Projects <i>Chris Koller, Trina Gonzalez and Jane Beyer</i> <p>What are some of the themes and issues for state health policy emerging from these two days? At its January meeting, the RSG Steering Group will commission 2017 projects for work by RSG members and the Fund. Based on what you have learned here, this is your chance to weigh in with suggestions on the information you would like to have—to enable you to improve the health of populations in your state.</p>
10:30	Break
10:45	Next Steps and Meeting Evaluation
11:30	Adjourn - Box lunches will be available for participants