

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)



Type or Print all Information Clearly:

Name: Katja Simone Fox Work Phone No. 603-271-9406

Work Address: DHHS Brown Bldg, 129 Pleasant St Concord, NH 03301

Office/Appointment/Employment held: Health Care Program Specialist

List the full name, post office address, occupation, and principal place of business, if any, of the source of any reportable honorarium or expense reimbursement. When the source is a corporation or other entity, the name and work address of the person representing the corporation or entity in making the honorarium or expense reimbursement must be provided in addition to the name of the corporation or entity.

Source of Honorarium or Expense Reimbursement:

Name of source: _____

Post Office Address: _____

Occupation: _____

Principal Place of Business: _____

If source is a Corporation or other Entity:

Name of Corporation or Entity: University of Massachusetts

Name of Corporate/Entity Representative: _____

Work Address of Representative: 55 Lake Avenue North, Worcester, MA 01655

Food and/or beverages consumed pursuant to RSA 15-B:6, II with value over \$25.00

Value of Honorarium: _____ Date Received: _____ If exact value is unknown, provide an estimate of the value of the gift or honorarium and identify the value as an estimate. Exact Estimate

Value of Expense Reimbursement: 74.93 Date Received: 1/18/13 A copy of the agenda or an equivalent document must be attached to this filing. Exact Estimate

Mileage to/from Concord

Briefly describe the service or event this Honorarium or Expense Reimbursement relates to:

NE States Consortium Systems Organization meeting on health reform in Norwich, VT

"I have read RSA 15-B and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief."

Signature of Filer: Katja Simone Fox

Date Filed: 1/25/13

9/07

RSA 15-B:9 Penalty. Any person who knowingly fails to comply with the provisions of this chapter or knowingly files a false report shall be guilty of a misdemeanor.

Return to: Secretary of State's Office, State House Room 204, Concord, NH 03301

RECEIVED

JAN 29 2013

NEW HAMPSHIRE DEPARTMENT OF STATE



New England States Consortium Systems Organization

NESCSO Board General Meeting

November 9, 2012

8:30 A.M. – 3:00 P.M.

Norwich, Vermont

Norwich Inn (www.norwichinn.com)

Policy Staff, Key Payment Reform Initiative Staff and/or Interagency Colleagues Are Encouraged to Join You.

TIME

8:30 – 9:00 A.M.

9:00 – 9:05 A.M.

9:05 – 9:30 A.M.

9:30 – 10:45 A.M.

10:45 – 11:00 A.M.

11:00 – 12:00 P.M.

12:00 – 12:45 P.M.

12:45 – 2:45 P.M.

2:45 – 3:00 P.M.

3:00 P.M.

TOPIC

▪ Breakfast

▪ Welcome, Brenda Harvey

▪ A Few Words about Vermont - Mark Larson, Commissioner

▪ Hospital Payment Reform - Connecticut/Mercer presentation
o Mercer: James Matthisen, Patty Anderson

Break

Reaction to the Connecticut approach – NE States

o Facilitated by Mercer
Kara Suter – VT Payment Reform Director
Elena Nicolella-RI Medicaid Director
Frank Johnson – Maine Health Management Coalition
Marian Wrobel, MA Analytics Director, Primary Care Payment Reform sponsor

Networking Lunch:

Discussion of Medical Care Advisory Committee

Other Payment Reform Initiatives
Barbara Walters, MD Dartmouth College
Richard Slusky, VT Health Access

Wrap up

Adjourn