HEARING

BEFORE THE

COMMITTEE ON FINANCE

UNITED STATES SENATE

ONE HUNDRED FIFTEENTH CONGRESS

SECOND SESSION

ON THE

NOMINATIONS OF

JOHN J. BARTRUM, TO BE ASSISTANT SECRETARY FOR FINANCIAL RESOURCES, DEPARTMENT OF HEALTH AND HUMAN SERVICES; AND LYNN A. JOHNSON, TO BE ASSISTANT SECRETARY FOR FAMILY SUPPORT, DEPARTMENT OF HEALTH AND HUMAN SERVICES

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OPENING STATEMENT OF HON. ORRIN G. HATCH, A U.S. SENATOR FROM UTAH, CHAIRMAN, COMMITTEE ON FINANCE

The committee will come to order.

I want to welcome you all here to this committee meeting this morning. Sorry we are starting just a little bit late.

Today we will consider the nominations of John Bartrum and Lynn Johnson.

I would like to extend a warm welcome to each of the nominees here today. Congratulations on your nominations, and thank you for your willingness to serve in this administration. These are important positions.

Mr. Bartrum, President Trump nominated you to be Assistant Secretary for Financial Resources at the Department of Health and Human Services. Now, this is not the first time that you have been called upon to serve your country. In fact, you have 30 years of military experience as both an active duty officer and as a Reserve officer.
And I personally, and I think all of us here on this committee, want to thank you for your service.

In addition to your substantial military career, you spent many years on Capitol Hill as a senior professional staffer to the United States House Appropriations Committee. In that capacity, you played a key role in funding the Department of Health and Human Services as well as many other agencies under its purview. Your experience has given you important insights into the costs associated with the policies and programs carried out by the Department.

Prior to your career on Capitol Hill, you served as part of the National Security Division of the Office of Management and Budget in the Executive Office of the President. At OMB, you were responsible for the budget of the Departments of Defense and Veterans Affairs.

It is obvious from your background that you have a good deal of experience crafting and implementing Federal budgets. I am sure these experiences will serve you well in the position for which you have been nominated. If confirmed, you will oversee HHS’s budget and provide guidance to the Secretary on all aspects of financial management.

As I am sure you are well aware, Medicare and Medicaid are expanding too quickly. According to the Centers for Medicare and Medicaid Services, national spending on mandatory health programs is projected to grow at an average of 5.5 percent per year between 2017 and 2026 and will reach $5.7 trillion by 2026. This trajectory is unsustainable.

Now, I have a long history of supporting entitlement reform and believe that we need to continue to find ways to curb excessive government spending while increasing access to high-quality, affordable care.

Now, I do not think I need to say this, but I will anyway. We have our work cut out for us, Mr. Bartrum.

On the other hand, Mrs. Johnson, President Trump nominated you to be Assistant Secretary for Family Support at the Department of Health and Human Services. Currently, you serve as Executive Director of Jefferson County Human Services, where you oversee a number of workforce and social services programs, including TANF.

Prior to your position with Jefferson County Human Services, you ran a consulting firm in Colorado that focused on mental health, high-risk youth, and child welfare, among other things. I am sure these experiences will serve you well in the position to which you have been nominated.

If confirmed, Mrs. Johnson, you will oversee a wide range of more than 60 programs with a budget of more than $53 billion, making it the second-largest agency in the U.S. Department of Health and Human Services.

You will oversee major programs, such as TANF, child welfare, child care, child support, and Head Start, partnering with States and communities to help families achieve prosperity and independence. You will also be charged with implementing laws passed by Congress to aid children and families across the country.

Last month, after years of hard work on both sides of the aisle, Congress passed and the President signed into law the Family....
First Prevention Services Act. Now, this law has the potential to improve the lives of tens of thousands of children and their families across this country.

The opioid epidemic has hit families hard, and the number of children entering foster care due to parental substance abuse is continuing to climb. Fortunately, this new law will help address the epidemic by providing more help to families to address substance abuse issues.

Mrs. Johnson, if confirmed, you will be charged with leading the agency in implementing this law. And I know members of this committee are eager to work closely with you to make sure it is implemented quickly and as intended so that families will get the help that they need.

I look forward to working with you both and hope that we can get your nominations reported and confirmed in short order so that we can get to work.

We have a great deal of work ahead of us on these issues, and I look forward to working with HHS as we work to achieve our shared goals.

[The prepared statement of Chairman Hatch appears in the appendix.]

The Chairman. Now, before I turn to my colleague, Senator Wyden, I have some foundational questions for the nominees.

First—and you can both answer this—is there anything that you are aware of in your background that might present a conflict of interest with the duties of the office to which you have been nominated?

Mr. Bartrum. No.

Mrs. Johnson. No.

The Chairman. Okay. Do you know of any reason, personal or otherwise, that would in any way prevent you from fully and honorably discharging the responsibilities of the office to which you have been nominated?

Mr. Bartrum. No.

Mrs. Johnson. No.

The Chairman. Okay. Do you agree without reservation to respond to any reasonable summons to appear and testify before any duly constituted committee of the Congress, if you are confirmed?

Mr. Bartrum. Yes.

Mrs. Johnson. Yes.

The Chairman. Finally, do you commit to provide a prompt response in writing to any questions addressed to you by any Senator of this committee?

Mr. Bartrum. Yes.

Mrs. Johnson. Yes.

The Chairman. Okay. Well, I want to thank you.

So I am now going to turn the time over to our Democrat leader on the committee, Senator Wyden, with whom I enjoy working.

OPENING STATEMENT OF HON. RON WYDEN,
A U.S. SENATOR FROM OREGON

Senator Wyden. Mr. Chairman, thank you very much.

And I particularly appreciate your mentioning Family First this morning. I think it is fair to say this is one of the biggest develop-
ments in child welfare reform in over 2 decades. I think this is an extraordinary accomplishment. It has been a pleasure to work with you.

We have a lot of colleagues on both sides of the aisle who care deeply about this. I know Senator Scott does. I know Senator Ben-net does.

And what this means is that families are now going to have additional options when they are dealing with opioids or an alcohol problem. And we will not just be left with the choice of leaving a youngster in an unacceptable situation at home or shipping them off to a foster care facility. Some foster care is good; some is not so good.

Family First is a revolution in child welfare development.

And I will just wrap up with this one point, Mr. Chairman. If somebody had said in the winter of 2017 that this committee would produce a 10-year reauthorization of the Children’s Health Insurance Program and begin the transformation of Medicare so that it would not be an acute care program, but instead would be a chronic care program, recognizing that most of the Medicare dollars will now be spent on cancer and diabetes and heart disease and strokes—Mr. Chairman, if somebody had said that this committee could move these three major bills in a polarized climate like this, in a bipartisan way, I think they would have been seen as hallucinating.

So, Mr. Chairman, I know you are going to retire. We have wished you and Elaine well before. But I want to take note—I am not sure how many more hearings we will have left in this session—that those three pieces of legislation, I think are going to make an enormous difference for the well-being of the people of this country.

And I want to thank you for your leadership, the chance to work with you. And I think that is what the Finance Committee is really all about. So let us see what else we can do between now and the end of the year.

But I want to take special note of those bills as we move to the nomination of these two individuals: John Bartrum, nominated to the role of Assistant Secretary for Financial Resources; Mrs. Lynn Johnson, Assistant Secretary for Family Support. These are important positions, and I will just have some short remarks.

Child welfare would be under Mrs. Johnson’s purview at the Department. And I do have some significant concerns about the Trump administration’s blocking key rules intended to help foster children.

This committee has long made it a bipartisan priority to help keep foster kids safe and well cared for. In order to evaluate whether our foster care programs are succeeding at protecting vulnerable kids and giving them a chance to get ahead, the Federal Government needs key information from the States, because they run the individual programs.

For example, if you want to do a better job of keeping foster care kids out of sex trafficking, you need to know information about how widespread the trafficking problem is, who is being victimized, and where.
So over 3 years ago, the Congress passed a bipartisan law to fight trafficking. HHS finally got underway revamping its out-of-date reporting requirements, including reporting on sex trafficking.

The last time this information was updated, colleagues, was 1993. The updates are supposed to be up and running now. But in the last few days, regrettably, the Trump administration has made the bizarre decision to step in and block the Administration for Children and Families from moving forward with this implementation.

I have tried in every way possible to warn the Trump administration against interfering with this process. I suspect there are some televisions being watched right now at the Department of Health and Human Services. I am quite certain that some of the nice people sitting behind our nominee are also from the Department of Health and Human Services. And I want all of these individuals to know how serious this is that the Trump administration has stepped in to block these key rules.

They have torpedoed them and, in the process, are standing in the way of helping some of the most vulnerable children in America. But they have their deregulation blinders on, and they have decided not to listen to any warnings about how this action could hurt kids.

Now, if confirmed, Mrs. Johnson would be in charge of these decisions. So we are going to discuss them this morning.

But I want everybody on both sides of the aisle to know I am not going to let this quietly pass in the night. It is too important to vulnerable children. We have put an awful lot of bipartisan work into child welfare, as the chairman has correctly noted, as the chairman deserves an enormous amount of credit on, and we should not derail it because we cannot get good information on matters like sex trafficking.

Now, I also have concerns about the fact Mrs. Johnson has supported legislation to allow Colorado to send foster kids to juvenile detention facilities. This may be a common practice in Colorado, and, apparently, it may be going on elsewhere. It does seem to be contrary to Federal law as I read it.

If the rules need updating, then policymakers ought to make that happen. But this is an area in the law that Mrs. Johnson will be in charge of interpreting and enforcing, if confirmed. So we will be anxious—and we talked about this in the office as well—to get into those questions.

Mr. Bartrum, you have a big job. You are in charge of how the Department is spending taxpayer dollars. To say you are a numbers guy is an understatement. We are talking about hundreds and hundreds of billions of dollars in Medicare and Medicaid and children's health. And that is particularly relevant in the Trump administration, because somehow there have been increasingly slash-and-burn decisions with respect to budgeting. And those are taking place no matter how many millions of Americans are going to get harmed.

You have a long career in public service—we recognize that—and strong qualifications. But we spent $3.5 trillion on American health care in this country last year, and a big chunk of it is in those pro-
grams that are under your jurisdiction, so I will have some important questions for you.

Mr. Chairman, thank you. And again, I hope that people are very much aware that in a polarized political time, we have been able to navigate important legislation. And with a few more months here before you retire, we are going to get on with it, and I look forward to working with you.

The CHAIRMAN. Well, thank you, Senator.

[The prepared statement of Senator Wyden appears in the appendix.]

The CHAIRMAN. I agree with you, and I appreciate your kind remarks here this morning.

I understand we have two Senators here who would like to introduce Mrs. Johnson.

Senator Bennet?

OPENING STATEMENT OF HON. MICHAEL F. BENNET, A U.S. SENATOR FROM COLORADO

Senator BENNET. Thank you, Mr. Chairman. I am grateful for your graciousness, as always, in allowing me and my colleague, Senator Gardner, to come here in a bipartisan way for this introduction.

It has been my view since I have been in the Senate that it is unfortunate that we spend too little time thinking about families living in poverty, and especially children living in poverty in the United States. Over 45 million of our fellow Americans live in poverty. That includes more than one in seven American children. One of six of our children may not know where they will receive their next meal.

We need more people in government, Mr. Chairman, who appreciate this, not as a matter of facts or numbers, but as a human tragedy—people who have seen it and who have confronted it firsthand.

And that is why it really is my privilege to introduce my fellow Coloradan, Lynn Johnson, the administration’s nominee to serve as Assistant Secretary for Family Support at HHS.

Mrs. Johnson served as chief of staff to former Lieutenant Governor Jane Norton and later as Deputy Director for Policy and Human Services for former Governor Bill Owens.

But currently, she serves as Executive Director of the Department of Human Services in Jefferson County, CO, where she manages over 500 employees and oversee critical programs like Head Start, Medicaid, and foster care for our State’s most vulnerable citizens.

In this role, Mrs. Johnson has promoted reforms to make human services more integrated, more accessible, and more responsive to vulnerable Coloradans. She appreciates that when we fail to integrate human services, vulnerable families and children fall between the cracks.

That is why Mrs. Johnson launched the Jefferson County Prosperity Project. The project unites schools, businesses, and community leaders to break the cycle of poverty with an integrated focus on schools, families, housing, health, and economic opportunity.
She knows that we need fresh ideas to fight poverty in America. For example, the typical response to delinquent child care payments is to punish the absent parent. Mrs. Johnson thought maybe we should help that parent get a job instead.

Mrs. Johnson has also worked to make Jefferson County Human Services more responsive to our community. She extended hours to improve access to vital human services like food stamps and Medicaid. She also created a Children and Youth Leadership Commission to give Americans under 21 a voice in the policy decisions affecting their lives.

This is just a sample of her many accomplishments in Jefferson County. And it is why I have heard from many Republicans, Democrats, and child advocates from Colorado who have praised Mrs. Johnson for her deep knowledge of these issues and, more important, for her actual record of fighting poverty in our State.

As this committee knows, the Department of Health and Human Services faces challenges on many fronts, from an opioid crisis that claims the lives of more than 42,000 Americans each year to a rapidly aging population. The Department needs creative thinking to meet these challenges and reimagine human services to be more efficient, integrated, and responsive to our fellow Americans.

I am grateful to Mrs. Johnson for her willingness to serve, for the work that she has done for Colorado. And I look forward to her testimony.

Thank you.

The CHAIRMAN. Thank you, Senator.

Senator Gardner is here. We are happy to take your testimony at this time.

STATEMENT OF HON. CORY GARDNER, A U.S. SENATOR FROM COLORADO

Senator GARDNER. Thank you, Mr. Chairman.

Thank you, Senator Wyden, and my colleague, Michael Bennet. And congratulations to both nominees here today.

Mrs. Johnson, thank you very much for your service. I am excited to be here introducing you as well.

This is my first experience before the august Finance Committee, so I echo—and this may be my last chance, I do not know—but I——

The CHAIRMAN. Well, you are showing good form here. [Laughter.]

Senator GARDNER. Thank you, thank you. But certainly, I must express my appreciation to the chairman as well for incredible service in the Senate, distinguished service. Thank you.

The CHAIRMAN. Thank you.

Senator GARDNER. Lynn Johnson, of course—and my colleague talked about some of the great aspects that she will bring to this position as we consider her nomination for Assistant Secretary for Family Support for the Department of Health and Human Services—she just demonstrates what dedication to public service looks like, what it means. And her tireless work on behalf of children and families has served as an inspiration for us in Colorado for many, many years.
She currently serves as the Executive Director of the Jefferson County Department of Human Services and has for the past 10 years. As my colleague mentioned, this is a department of hundreds of employees, a budget of nearly $90 million, overseeing the Temporary Assistance to Needy Families program, child support services, Head Start, Community Development Block Grants, child and adult protective services, adult and aging programs, pretrial and community correction services, a workforce center, Medicaid benefits, and other benefit programs—a wealth of experience that she brings to this position on how Federal Government programs can impact county programs as well. And that is incredibly important.

Over the course of her career, Mrs. Johnson has garnered great respect for her pragmatism and understanding of the issues. Her expertise has been sought from multiple Governors on both sides of the aisle. And she has served on such important committees, including the committee to address child welfare, welfare reform, the judicial committee for families and the courts, and the Child and Youth Leadership Commission, as Senator Bennet mentioned.

In addition—I think this goes to Senator Wyden’s conversation—Mrs. Johnson currently serves as the co-chair of the Human Trafficking Subcommittee in the State of Colorado.

Her initiative, the Prosperity Project, has helped ensure that each person, each individual, has the opportunity to reach his or her highest potential through wrap-around services and support. Her extensive experience and passion for the families that she serves is unmistakable.

Her achievements in her current position are widely recognized, and her leadership would be a tremendous asset to the Department of Health and Human Services.

And so I enthusiastically offer my support and this introduction and hope that the committee will join in that support as well. But it is important, I think, to have that local government experience. We could use a lot more of that understanding in Washington. So thank you very much.

Congratulations on your nomination, and welcome to your family.

Mrs. JOHNSON. Thank you.

Senator GARDNER. Thank you, Mr. Chairman. A great experience here in the committee. Wonderful. Thank you.

The CHAIRMAN. Well, you did a good job. Thank you.

We will begin with you, Mr. Bartrum, and take your testimony at this time.

STATEMENT OF JOHN J. BARTRUM, NOMINATED TO BE ASSISTANT SECRETARY FOR FINANCIAL RESOURCES, DEPARTMENT OF HEALTH AND HUMAN SERVICES, WASHINGTON, DC

Mr. BARTRUM. Thank you, sir.

Chairman Hatch, Ranking Member Wyden, and members of the committee, thank you for inviting me to testify today. I would also like to thank President Trump for his confidence in nominating me for this position.
It is an honor to stand before you as the nominee to be the Assistant Secretary for Financial Resources at the U.S. Department of Health and Human Services, or HHS.

I would first like to take a minute to introduce and thank my family: my wife Elizabeth and daughters Olivia and Sophia, who are behind me on my right. I also would not be able to serve without their support.

I must say “hello” to my mother Kitty in Kentucky and our family back home in Indiana, New York, and around the country who are likely first-time C-SPAN or Finance Committee website viewers.

I grew up in a small town in Indiana. My father worked in a factory and died when I was in grade school, and I faced many challenges in my youth, including being left to live on my own during my last years of high school. As a child, I never dreamed an opportunity like this would be possible.

Following a family tradition in military service, I enlisted in the Air Force. This allowed me to serve my country while I earned money for college and changed the direction of my life. I suspect my enlisted basic training instructor wondered if the 18-year-old kid from Indiana would graduate basic training, let alone serve for more than 30 years of service, including as a senior military officer.

My military service opened up so many opportunities our great country offers. Despite my early challenges, I went on to earn an undergraduate degree in business administration from McKendree College, holding degrees in bioenvironmental engineering and survival and rescue operations, as well as a master’s in business administration from Southern Illinois University and a juris doctorate in law from George Mason University School of Law.

My path demonstrates how the American dream is alive as our country opens doors beyond what a child’s young imagination may foresee.

I began my Federal career as an enlisted member of the Air Force and later continued working for the Department of the Air Force in a variety of positions in and outside of the United States as a civilian employee before joining the Air Force Reserve.

I have been mobilized in support of Operations Desert Shield and Storm and Iraqi Freedom. I am a combat veteran who currently serves as a Colonel in the Medical Service Corps, which is a hospital administrator/executive-type role. I am assigned to a Brigadier General position as the Mobilization Assistant to the Commander of the Air Force Medical Operations Agency, or AFMOA.

My military assignments include serving as Medical Commander, Individual Mobilization Augmentee, or an IMA, to the Deputy Assistant to the Surgeon General of the Air Force for Health Care Operations and Medical Research, and IMA liaison to the Air Force Surgeon General for Medical Reserve Forces, to list a few.

As you noted, until February of 2017, I was a civil servant for more than 32 years. In my last position, I served for 7 years as a professional staffer on the House Appropriations Committee, working on HHS appropriations issues with a specific focus on biomedical research, public health, and health care.

Prior to this position, I was the Budget Director for the National Institutes of Health, or NIH, advising the NIH Director on appro-
priations, budget, and policy issues and was also responsible for NIH-wide budget policy, planning, analysis, formulation, and presentation.

I joined the NIH from the Executive Office of the President's Office of Management and Budget, or OMB, as a senior OMB examiner in the National Security Division, working on management, policy, budget, and development issues for the Department of Defense health, medical, and research activities. In addition, I worked to improve the coordination between DOD and the Department of Veterans Affairs.

My position at OMB followed 3 years working at the Department of Veterans Affairs on medical budget, health-care policy, and other veterans' issues.

All these years later, it is still an honor to serve as an active Reserve officer and an honor to have served as a civil servant for more than 3 decades. With your support, I look forward to reentering government with another opportunity to serve the American people.

The Assistant Secretary for Financial Resources at HHS is responsible for development of the annual HHS budget, financial management, grants policy, and information technology policy. This position has an important role in the coordination of these activities across HHS's divisions.

I look forward to serving in a key role that works to make the best use of available resources to enhance and protect the health and well-being of all Americans.

Mr. Chairman, I believe my education and experience demonstrate a strong understanding of the Federal budget, the HHS budget, and the HHS public health, health, and medical research programs and uniquely qualify me for this position.

If I receive the confidence of the Senate to serve as Assistant Secretary, my desire is to ensure that my office and I will serve as a resource to Congress to best serve our Nation. I look forward to serving our Nation as the Assistant Secretary for Financial Resources at HHS.

Thank you for the opportunity to appear before you today. I look forward to answering your questions.

The CHAIRMAN. Well, thank you so much.

[The prepared statement of Mr. Bartram appears in the appendix.]

The CHAIRMAN. Mrs. Johnson?

STATEMENT OF LYNN A. JOHNSON, NOMINATED TO BE ASSISTANT SECRETARY FOR FAMILY SUPPORT, DEPARTMENT OF HEALTH AND HUMAN SERVICES, WASHINGTON, DC

Mrs. JOHNSON. I want to thank Senators Gardner and Bennet for supporting me today. It was an honor to have them both with me.

Thank you, Chairman Hatch, Ranking Member Wyden, and distinguished members of the Finance Committee. It is a tremendous honor and opportunity to appear before you today as the President's nominee to be the Assistant Secretary for Family Support.

First, I would like to introduce you to my family. My husband Lance encouraged me to accept the nomination so I can serve my country the best way I know how. I know that, should I be
confirmed, the rest of the family will also be serving America. My sons Greg and Kyle on this side, my daughter Brett, my mother-in-law Judy from Iowa, and my college roommate Tina from Arizona, are also here with me.

Unfortunately, my parents, Don and Marilyn, were not able to get here today. But they and my siblings, my extended family, my staff, my Jeffco Prosperity Project families and friends are all watching. I am thankful for all of them, and I know I could not have made this journey without them.

My family moved from Ohio to Colorado when I was young. Growing up, my parents instilled in me the dedication to serve others. My mom is a teacher; my dad served in the Army, worked for General Motors, and loved to play baseball. They are an example of what is great in America.

Looking back on my criminal justice career, I learned lessons from people who made some horrible decisions and suffered the painful consequences of rejection by society. Success stories were accompanied by failures in our criminal justice, education, mental health, and human services systems.

Top-heavy bureaucracy, coupled with the inability of systems to work in harmony, let offenders slip through the cracks, allowed the homeless and hungry to continue to suffer, and denied battered children the dignity of help they so rightfully deserved. Systems are made to be improved.

After leaving criminal justice, my fortune led me to work with Governor Bill Owens. He championed successful outcomes for vulnerable populations and challenged me to do the same. Here I learned policy, politics, and how difficult it was to decrease red tape, rules, and regulations.

Children, mothers, fathers are hungry now, so we need to act now. No more lengthy talking, no more lengthy planning.

As the Director of Jefferson County Human Services, I learned the workforce systems from the Department of Labor; anti-poverty programs from Head Start; child welfare programs, adult programs, and all of the eligibility programs from Health and Human Services; some of the housing programs from HUD; and SNAP programs from the Department of Agriculture.

We continually worked to integrate our systems to improve our outcomes. We set out to change the culture. We created a power of partnership with faith-based entities, partnered with nonprofits to maximize resources, and, most importantly, created the Jeffco Prosperity Partnership, JPP.

We moved with people from poverty to prosperity. JPP wrapped services around Head Start families to ensure children graduated high school and parents achieved full self-sufficiency at the same time.

The greatest triumph is the dignity and respect each family learns and earns moving out of government systems, becoming productive citizens, and giving back social capital so others can reach the American dream.

This nomination—and your confirmation—is the next great challenge, a challenge to reduce abuse and neglect, poverty, unemployment, homelessness, human trafficking, and hunger nationwide. I know we can, and I know I am up to the task.
For hundreds of years, we have deliberated on how to address society’s ills. If we do not act now, first, fast, focused with a definition of success, leaders sitting in these same seats years from now will be having these same discussions. Together, we can avoid putting Band-Aids on problems, and we can eliminate costly root causes.

The billions of dollars invested by government and philanthropy in communities can be reduced, because we can show a return on investment that will create a thriving, safe, and healthy society and one that all other countries worldwide will want to emulate.

Every day, I will work to earn your confidence. I will fight so the American people are better off. Together, we will make a difference. I will make it my mission to listen and always value dignity and respect for all of the people, children, and families we serve.

If confirmed, I will be responsive to your intent, follow the laws, and work closely with you to make good things happen. I hope you support me to lead this challenge.

I thank you for your consideration and look forward to answering any questions.

The CHAIRMAN. Well, thank you so much.

[The prepared statement of Mrs. Johnson appears in the appendix.]

The CHAIRMAN. Thank you to both of you, both for being here today and for your willingness to serve the American people at this very important time at the Department of Health and Human Services.

I know you have both been meeting with my colleagues and their staffs in recent months and providing all sorts of documents to the committee. That has been a matter we just have to go through.

So instead of asking you another question, I would like you both to just talk a little bit about your goals, should you be confirmed. Can you each talk a little bit about what you hope to accomplish in your time at HHS?

And we will start with you, Mr. Bartrum, and then Mrs. Johnson, and then I will turn to our ranking member.

Mr. BARTRUM. Thank you, sir. I think that is a great question, because I think, as a sailor sailing on the sea, you know, we have to look at what is our point of reference. And I think we want to look at the North Star. We do not want to look at a shooting star that fades out quickly and we end up with a shipwreck.

And so looking at our vision, I think, is important. And my vision is to support the mission of HHS, which is to enhance and protect the health and well-being of all Americans, in line with the Secretary’s priorities.

And so in doing so, part of what I hope to help accomplish is to improve the coordination, efficiency, and effectiveness of programs across the agency. And in that, the Office of ASFR and the staff there, they have a unique position where they sit across all of the Department and are looking across all the different programs.

And so part of what I plan to do is to meet with the staff and to do a self-assessment and to look at, what are the opportunities and what are the challenges that face the Department in helping
us implement these goals so that we can look forward towards the future.
So that is part of where I am headed, sir: supporting the mission of the Department.
The CHAIRMAN. Well, thank you.
Mrs. Johnson?
Mrs. JOHNSON. Thank you, Mr. Chairman. I also support the mission of the Administration for Children and Families, also known as Family Support.
But what I would like to see, should I be confirmed, is an additional sense of urgency to help assist individuals to be better off, reduce abuse and neglect, enhance the services that would eliminate poverty—not just help people get food, but also get food so they can move forward in a successful way.
So the long-term outcome is a priority for me, and that has to be wrapped around with a sense of urgency.
I also would like to look at the administrative burdens that are placed on local communities and on nonprofits, as well as the States, to identify whether we can be more efficient, more streamlined, and eliminate some duplication by working well with others so that we can better serve in the fastest way possible.
As I said in my opening, individuals are hungry now, and we need to be able to serve now in a quick way. The guidance that ACF provides to the States and the locals can be enhanced, and we can become better partners with those who are actually serving on the ground.
The CHAIRMAN. Well, thank you. I think you both are excellent choices, and you are both above politics. I think you would be terrific in these positions.
So we will turn to Senator Wyden.
Senator WYDEN. Thank you, Mr. Chairman.
Mrs. Johnson, as you know, I was going to lead off with the 2-year freeze at the Department on this rule that requires the agency to collect information that is crucial to preventing sex trafficking of young people in foster care.
This rule, the AFCARS rule, to modernize foster care data has not been updated in more than 2 decades now. And getting this is absolutely a prerequisite to keeping vulnerable kids from being trafficked. And that is why we have to get these upgrades.
So I am going to start with two “yes” or “no” questions. Did you support the bipartisan legislation Preventing Sex Trafficking and Strengthening Families Act?
Mrs. JOHNSON. Yes, I did.
Senator WYDEN. Okay. Does the law require that States report whether youth in foster care were victims of trafficking? That is a “yes” or “no.”
Mrs. JOHNSON. Yes.
Senator WYDEN. Okay. Now, over a month ago, Congressman Davis and I wrote the Secretary about the need for the Department to stop blocking this effort to get this information. Without warning, the Department finalized the delay.
Last Thursday, the Department announced it would shelve the new reporting requirements and declared it would reopen the en-
tire rulemaking, going back to square one, in effect starting all over.

My view is, as I told you in the office, this is indefensible. So this is just my takeaway for you and all the people watching, as I said, on their televisions at the agency and at the Department. You have to do more to convince me that you are going to do more for these vulnerable kids than just side with the political people who want this delay.

I made it clear before, and I will say it again: I enjoyed our visit. I know that you have done good work in the past in a number of areas, but I need to be clear that your nomination is not going forward with my support unless there is a commitment from the Department to get this done and a timeline to do it.

You are not at the Department now, so you cannot give it. But for all those people watching, I just want it understood that, while I have seen you do some good work, I am not going to be able to clear your nomination with my support until there is a timeline to get this rule out and a commitment to do it.

Now, let me ask you about another issue which you know a lot about, and that is the one that restricts the use of title IV–E funds to support the placement of foster kids in facilities used primarily for juvenile detention.

Pretty much any group out there that is advocating for the children says you should not place foster kids in detention facilities. And in my view, the Federal law could not be clearer: foster care funds cannot be used for this purpose. Yet it is widespread in your home State of Colorado, and you are on record supporting this practice.

So, if confirmed, you are going to be responsible for interpreting and enforcing the law. How do you interpret the Federal restriction on the placement of foster kids in detention facilities?

Mrs. Johnson. Thank you, Senator Wyden, and thank you for the time you spent with me in your office.

The process and practice in the State of Colorado is a crossover youth-type model. The courts can place a child into a detention system through the Department of Youth Corrections, or they can place a delinquent child to the Child Welfare Program. That is when the staff in the counties do an assessment and provide assessments back to the court to determine when and where a young child, a youth, would go.

With that practice, there are 30 licensed residential child care facilities, approximately 30, in the State of Colorado that can accept title IV–E. They are licensed as an RCCF. And the one in particular that you are speaking of, Ridgeview Academy, is also a charter high school that does not have walls or locks or bars, any of that type of thing.

The goal, I believe—and it was before my time—was that the troubled youth, whether in either system, would be placed in a nontraditional setting. The mental health treatment and the educational treatment at this RCCF has been helpful for some troubled youth, but it is not the answer for everybody. And homes with parents or two adults are the best placement, and I agree with you.

Senator Wyden. My time is up. And I just would like to give you a written assignment for next week. And that is, Federal law, in
my view, as I said, is completely clear: you should not place foster kids in detention facilities. Foster care funds cannot be used for this purpose.

So I would like, within a week, a written explanation of how you are going to interpret and enforce this statute. Can you get that to me in a week?

Mrs. JOHNSON. Yes, sir, I can.

Senator WYDEN. Very good.

Thank you, Mr. Chairman.

The CHAIRMAN. Senator Whitehouse?

Senator WHITEHOUSE. Thank you, Mr. Chairman.

And welcome, to both of our nominees.

Mrs. Johnson, thank you very much for your service as a parole officer. I was a U.S. attorney and worked with our parole officers very closely. It is a terrific responsibility, and I thank you for the years you spent in that particular service.

Now, I want to ask you one thing about the opioid epidemic that is ravaging Rhode Island and many other States. In particular, we are seeing babies who are born opioid-dependent. In some cases, the mom is doing everything right, she is in recovery, she is getting medication-assisted treatment, and that medication puts the baby in the same position, when born, of being opioid-dependent.

And in order to solve that problem, we are finding, particularly through the work of Women and Infants Hospital, which is a very excellent leading OB/GYN hospital in Rhode Island, that you really need to look at the social determinants around that family and engage with the mom in a way that brings in a lot of other supports. And if you can do that, you can bring down the time spent in a hospital, you can improve outcomes. But it does take pulling a lot of things together.

Is this an area that you would be interested in supporting through the various programs that you will oversee?

Mrs. JOHNSON. Thank you, Senator Whitehouse.

Absolutely. I think my strength is pulling community resources together, whether it is in my own agency or in the community to wrap around a person-centered practice, working with the family, the parent, and the child at the same time, and the safety supports that wrap around them, especially with addiction.

It is not an easy thing to conquer. And so I would commit to working on this to enhance practices, but also to look throughout the country to find where are the services for these individuals. Are there enough substance abuse practices that are successful? And then, how do we best take care of the children?

Senator WHITEHOUSE. Perhaps we could even get you to Rhode Island to visit Women and Infants Hospital to see their program. I will extend you that invitation.

Mrs. JOHNSON. That would be an honor. Thank you.

Senator WHITEHOUSE. Mr. Bartrum, I have some favorite graphs that I spend a lot of time thinking about. And this is one that shows the CBO's projection of Federal health-care expenditures.

This top line is the red line here, and back here in 2010 is where this red line estimate was generated. And that was the predicted spending on Federal health care through those years.
We found the spending trend has been different than what CBO had predicted going forward.

In addition to being on the Finance Committee, I am on the Budget Committee. And in the Budget Committee, we do our work in 10-year increments. So here is a 10-year increment from 2018 to 2027. And in that period, something happened that caused a departure from the original projection that has saved us $3.3 trillion in Federal health-care spending.

I did not see benefit cuts in that period. What I have seen are things like Rhode Island’s physician-led ACO, Coastal Medical, taking advantage of the ACO provisions of the Affordable Care Act to drive costs per patient down $560, on average, per year. And they started below average to begin with, so this is not like those McAllen, TX pirates—nobody here is from Texas, I hope—who were overcharging like crazy. This was a more efficient-than-average practice.

And what I would like you to pledge to me is that you will help me understand why that took place, help me understand what the Department believes, what its experts and the people who do these kind of projections believe might explain how we reduced anticipated Federal health-care costs by $3.3 trillion over 10 years without cutting benefits.

Because if we can do that inadvertently, it is something I would like to do deliberately. Will you pledge that you will work with me to help understand why this took place?

Mr. BARTRUM. Senator, I certainly would pledge to work with you. And I would appreciate the opportunity to work with you and understand your details more. Because I think that you and I would both agree that the cost of health care is not affordable and that we need to make sure that we have affordable care and we have access to care and that people have the ability to get the types of care when and where they need it.

And I would suggest that we probably also agree that there probably need to be some changes to how the system operates and the way the modern operation of the world goes.

I mean, think about years ago how——

Senator WHITEHOUSE. Fee-for-service——

Mr. BARTRUM. Yes, just think about how technology has changed how you make your travel reservations. You used to use a travel agent; now you do it all online from your phone. And I do not think that the health-care industry has leveraged the technologies in the way that we could.

So I would be happy to work with you.

Senator WHITEHOUSE. Great. I look forward to working with you.

I thank the chairman.

The CHAIRMAN. Well, thank you, Senator.

Senator Scott?

Senator SCOTT. Thank you, Mr. Chairman.

And good morning to the panel. Thank you both for your willingness to serve. These are interesting times, important times, and certainly we need your expertise.

Over 430,000 children were in the Nation’s foster care system in 2016. That represents an increase of about 40,000 kids since 2012.
My understanding is that about 34 percent of the increase is due to substance abuse. So we can look specifically to the opioid crisis and its impact on destabilizing and then separating families. The power of this addiction seems to have no end, and so the importance of having child placement services cannot be overemphasized.

Our Nation’s child-placing agencies, whether they are private, faith-based, or otherwise, serve a critical need in providing such youth with the resources and care they need to have access to opportunity down the road.

Mrs. Johnson, I am sure that you are aware of the fact that in December 2016, the Obama administration moved to finalize a rule which would strip title IV–E funding from faith-based child-placing agencies that consider religious beliefs when placing children.

This year, Miracle Hill Ministries, an outstanding organization that serves as South Carolina’s largest provider of foster families for children without special needs, was notified that they will lose their funding unless they choose to ignore their faith when considering foster families.

This is particularly disturbing when just last year South Carolina’s Department of Social Services reported that it needed hundreds more foster families to meet growing demands.

Mrs. Johnson, would you agree that our Nation’s child-placing agencies should have the resources necessary to continue providing critical services to our Nation’s most vulnerable youth, be they private, faith-based, or otherwise?

Mrs. JOHNSON. Thank you, Senator Scott. I do agree that we need to have the best placements and the best adult role models for our children throughout the entire country.

I do believe that the Family First Act will also help decrease some of that need, but that means we need to increase the ability and the resources for two-parent families that will be available.

From my experience in Jefferson County, what we have done is to create the Power of Partnership, which is over 150 faith-based entities. We have brought in the nonprofit entities, businesses, because it takes everybody to find placements for these youth and children. And you are absolutely right, there are not enough. And that, I believe, drives some of the care increases.

So if we can work more with excellent placements that have good resources, really wrap around these kids so we can have success—I know in my community our groups have come together to completely eliminate any waiting lists for youth and children who are waiting for parents. And I hope we could do this through all placements in the Nation.

Senator SCOTT. Thank you. I hope you would agree to work with me to find workable solutions for folks like Miracle Hill Ministries.

I noticed in your comments that you have had some success, significant success, in Jefferson County in working with faith-based organizations. And I believe that the Obama administration’s stripping title IV–E funds from such organizations like Miracle Hill has unintended consequences. And I would hope that you would be willing to work with me to find ways to overcome those obstacles for these kids who seem to be growing in our care as opposed to decreasing in our care.

Mrs. JOHNSON. Yes, sir, I would look forward to it.
Senator Scott. Thank you.
The Chair. Thank you, Senator.
Senator Cantwell?
Senator Cantwell. Thank you, Mr. Chairman.
You know, continuing on this IV–E issue, obviously the State of Washington has utilized the IV–E waiver for an initiative we have, called Differential Response, which is intervention designed to prevent families and children from entering the foster care system where it can be avoided.
The program allows investment to keep families together—counseling, support services—so that foster care is not the first response.
So, obviously, we worked with Chairman Hatch on this in the Family First Prevention Services Act, which was included in the budget 2 years ago.
So, if confirmed, will you commit to continuing to help the implementation of the IV–E waivers?
Mrs. Johnson. Thank you, Senator Cantwell.
Yes, my county is also a Differential Response county. And the primary prevention efforts that are done to help families stay strong and healthy are the most important efforts that we can make so a child does not enter any system. And so I am very supportive of the IV–E efforts to wrap around a family to keep them strong.
Senator Cantwell. So do you support helping other States to utilize this fund for prevention programs and services?
Mrs. Johnson. I would follow the law in accordance with the Family First Act to use these funds.
Senator Cantwell. Okay. Yes, okay.
We are going to keep innovating; that is the key thing in the State of Washington. We are going to keep innovating, so thank you for your help on that.
The Speaker has talked about welfare reform, and that is his next focus. What would you do as far as reforming these programs?
Mrs. Johnson. Thank you, Senator.
The welfare reform efforts have been successful, but they are over 20 years old. Economics have changed, and the individuals whom we serve are looking to stand on their own two feet through employment and what I see today as multiple employments.
More individuals seem to be walking into our offices not unemployed, but under-employed. And so the incomes they are making are still not enough to move them out of government systems.
So what I would like to see with welfare reform is more integration with the systems that are in agencies other than HHS and ACF, in addition to working more with the communities.
I would also like to look at the relief of administrative burdens on the local and State agencies that we spend a lot of time on, rather than looking at people in the eyes and helping them to move forward in a successful way.
I would like to look at outcomes that are driven around the issues of poverty more than just a work participation rate. Employment is critical. Training is critical. Education is critical.
Senator Cantwell. What about housing?
Mrs. JOHNSON. Housing is probably one of the biggest issues I am dealing with in my community today. Housing, first—it is hard to get a job when you are living on the streets, so we should be looking at the housing issues and looking at the health issues.

The social determinants of the health and well-being of a community also impact an individual. So I would like to look at the whole picture and measure those outcomes, not whether we are being compliant, but whether we are actually moving to success and people are standing on their own two feet, and maybe even 2 years after they are out of our system.

Senator CANTWELL. Well maybe, if you are successful, you could have a moment with Speaker Ryan, because I do not think he gets the housing crisis that we are in. And just as your State has been successful, the chairman’s State has been successful with housing veterans. My State has had great success, despite the complexity of everything from workforce issues to returning veterans to all of it. It is so clear that housing stabilizes and increases the income potential of these individuals and gets us out of our cost scenarios as well when they have a safe place to be.

So how we get this across to our House colleagues, I just do not know. You have said it well: it is an investment that needs to be done in conjunction with these programs. You need to look across these other sectors. But I could not agree with you more: housing is a very big issue right now. But unfortunately, our House colleagues just do not seem to quite understand how critical that issue is.

So thank you very much.

The CHAIRMAN. Senator Cassidy?

Senator CASSIDY. Thank you both. Again, I will echo what Senator Scott said: thank you both for what you are doing.

Mr. Bartrum, nice to see you again.

I do not really know if I have a question for you except kind of a plea. My office every now and then starts digging into some of the money that is spent by different Federal agencies, and you are always a little bit shocked—NIH funding studies of folks in China to get their attitudes regarding sexuality and that sort of thing, nothing to do with the U.S. Nation. And we are spending money there.

And you have no culpability for this. And I think they have now finished that sort of activity. But unless somebody in Congress had dug into it, we would probably still have that activity.

And so, oftentimes, it seems like Federal agencies and HHS are a black box. And I am not trying to bust them, I am just trying to bring value for the U.S. taxpayer.

You do not have to comment on that. But just as we look forward to working with you, hopefully in collaboration we can seek the best bang for the taxpayer buck, if that makes sense.

Mr. BARTRUM. Senator, I would be happy to work with you. And furthermore, I am happy to talk to you about some of the ideas we talked about when I met with you in your office. And so I look forward, if I am confirmed, to meeting with you and looking into these issues.

Senator CASSIDY. That would be great. It is too soon for me to speak about it, but I am digging into some NIH assets which seem
to be underutilized and yet of significant expense. So if it is under-utilized, do we still need it? Or can you pare back the expense? That sort of thing. So just to kind of tip a hand about future conversations.

Ma'am, I am intrigued by some of the work you have done. One thing my staff showed to me is this kind of multigenerational approach to poverty, which just makes total sense to me. If you do not address more than one generation at once, you may not be successful.

Can you just comment on your all's efforts there and give us some insights into that?

Mrs. JOHNSON. Yes, Senator. Thank you.

The effort to work with families through my United States probation and parole experience and then working in this agency—I have seen that we have placed individuals into programs, they have gotten healthy, and then we have placed them back into dysfunctional homes.

And the other issue that I saw so much—it is from listening to the families—is that as they were placed back into the homes, and we did not create a safety net to help them be successful for the long term.

So the generational approach, while you are working with a child, a mother, a father, a grandmother—in my program, I have a 73-year-old great-grandfather raising his kids—matters. And while all are getting healthy together, we then bring in their neighbors—and many of you know this as 2Gen or Whole Family—but as we work on the whole picture at the same time, it saves money and it also ensures a bigger success when government gets out of the picture.

Senator CASSIDY. Well, I just recall former Senator Franken once spoke of going to a drug rehab for adolescents on an Indian reservation, and the kids were all bummed out. And he discovered that that is because they knew they were returning to a dysfunctional home life, which would be thwarting their attempt to remain out of drug abuse.

Now, it seems pretty daunting, though. You are speaking about not just a child and a parent, but you are speaking about a whole family and then a whole community. And that would enter into crime, education, built infrastructure, schooling, et cetera.

Thoughts?

Mrs. JOHNSON. Yes, sir. Once we break down the turf and the silos around who does what professionally, everybody has the same end goal of success for the human beings that we serve. So as we are moving on a path to success with the families, not for them, they end up helping each other.

Senator CASSIDY. So let me ask you—I smile when you say break down the silos. It hardly seems anything is more siloed than the Federal Government.

On the other hand, you would actually be attempting, from your Federal role, to break down silos in local and State government. Correct? And thoughts on how to do that?

Mrs. JOHNSON. My experience has been strictly relationship building. And then as we change practice, the hardest thing will be that all of the funding is siloed. The relationships and the crossover
between agencies are much easier than identifying how to legally——

Senator CASSIDY. I have a few seconds left. We once looked at whether or not Medicaid could work with HUD—Housing and Urban Development; I guess that is two different agencies—to address the problem of homelessness feeding into the problem of mental health, the lack of structure.

And apparently there are grant programs out there that would do that. I am just not sure how successful—I just do not know, they may have been successfully implemented. But clearly, they would want to go to scale.

I am out of time.

But anyway, I applaud you both. I thank you. I look forward to working with you and thank you for the good work you have already done.

I yield back.

The CHAIRMAN. Thank you, Senator.

Senator Carper?

Senator CARPER. Thanks, Mr. Chairman.

And welcome, one and all.

I want to talk a little bit about opioid addiction and overdose, which continue at epidemic levels, not just in my State of Delaware, but throughout the country.

According to CDC's recent report, I am told that emergency room visits for opioid overdoses increased by 30 percent over the last 2 years, 2016 and 2017. And the same report indicated that in my State of Delaware, emergency room visits increased by roughly 100 percent, three times the national average.

And it is alarming, actually extremely alarming, and more, it is a little bit frustrating. I am told that more than 75 percent of the $500 million that we in Congress allocated for combating this epidemic in 2016 remained unused by States.

Think about that. This is money that we allocated in 2016, and so far about 25 percent of the $500 million has been used by States, but three-quarters of it has not.

Given your combined experience in appropriations—this is for Mr. Bartrum—but given your combined experience in appropriations, budgeting, and State government, how do we help the States access Federal dollars to deal with the opioid and other drug addiction challenges a lot more quickly, please?

Mr. BARTRUM. So first, Senator, I am very supportive of your position on opioids and trying to get behind this opioid crisis.

And part of the work that I did on the Appropriations Committee was working with—and I am sure you are familiar with Chairman Hal Rogers and his opioid programs—and being able to help him with some of the CDC programs.

On the specific issue of what is going on here with these particular grant programs, if I am confirmed, I would like to work with you to understand that data more so that I can dig into these grant programs and find out a little bit more detail so that we can look and see what the solutions are.

Because I think we all have the same goal on this, and I do not think there is any divergence on where we want to be, which is we do not want to have this crisis.
Senator CARPER. All right, thank you.
Do you have anybody here in your family today, Mr. Bartrum?
Mr. BARTRUM. I do. I have my wife Elizabeth and my daughters Sophia and Olivia.
Senator CARPER. Olivia, Sophia, would you raise your hands? You are really good to be here and cut school so you could back up your dad. [Laughter.]
And your wife, what is your wife's name?
Mrs. BARTRUM. Elizabeth.
Senator CARPER. Elizabeth, thank you for your willingness to share your spouse with our country.
And, Mrs. Johnson, do you have any family members here?
Mrs. JOHNSON. Yes, sir, I do. My daughter is here, my two sons, my husband, my mother-in-law.
Senator CARPER. Which one is your mother-in-law?
Mrs. JOHNSON. Judy Johnson; she is from Iowa.
Senator CARPER. Judy Johnson. There is a baseball field named after you in Wilmington, DE where the Kansas City Royals' farm team, the Wilmington Blue Rocks, plays baseball. And it is called Judy Johnson field, and Judy Johnson was a great baseball player from Delaware in the Negro League.
So it is very nice to see you and your family. Welcome, one and all.
Mrs. JOHNSON. Thank you.
Senator CARPER. I must say, I spent 8 years as Governor of Delaware. We spent 8 years focused on root causes and stabilizing and strengthening families. That is what we did for 8 years. I am very proud; it is some of the best work we did.
Our new Governor, who was actually my Cabinet Secretary back in those days—Secretary of Finance—our new Governor has recreated the Family Services Cabinet Council to focus for however long he is Governor on strengthening the basic building block of our society, and that is our families.
I have a question on root causes and contraception access for you, if I could. And I am very much encouraged by your interest in addressing root causes of poverty and finding ways to build stronger families. When we spend so much time addressing symptoms or problems, we do not go to the root causes. And my sense is that you are interested in going after root causes.
But based on your extensive experience, what do you think are some of the root causes of poverty, and what should we be doing to help build more resilient families and communities?
That is a big question, but let me follow up and just mention, in our State of Delaware and your home State of Colorado, Iowa and other States, both red and blue States, State leaders have found that improving education and access to contraception, especially long-acting, reversible contraception, known as LARC, has helped mothers and families better plan their pregnancies, leading to better health outcomes for mothers and their children and saving State and Federal dollars.
And my question is, do you believe it is important that we do everything we can to improve and expand access to contraception for women and their families?
Mrs. Johnson. Thank you, Senator. I believe that we should have access to all quality medical care for our children, our youth, and our women throughout the entire Nation. And what they need should be very person-centered to prevent poverty.

Senator Carper. Marian Wright Edelman once said—she is a giant in the area of families and supporting families and all—she used to say that if a 16-year-old girl becomes pregnant, drops out of school, does not marry the father of her child, there is an 80-percent likelihood that they will live in poverty—8–0—80 percent.

She went on to add, if that same young woman does not become pregnant at 16, graduates from high school, waits until 21 to have a child and actually marries the father of her child, the likelihood of that family living in poverty is 8 percent. Eighty percent on the one hand, 8 percent on the other, which suggests to me that we should be trying to make sure that they do not have that first child at 16 and actually wait well into their early or later years to bring a child into the world.

In my State and I think across the country, half of the pregnancies are unplanned—half the pregnancies are unplanned. Actually, we have made great progress in reducing teenage pregnancy as you know, but we still have half of our pregnancies unplanned, and we could do a better job than that.

And one of the most encouraging elements in that battle could be these—we call them LARCs, but they are part of the solution; I am convinced they are part of the solution.

And we have a program in Delaware that is called Upstream. I do not know if you have ever heard of Upstream. We brought it in from California, and it is, I think, going to be a game changer. Young girls, or not-so-young girls, do not take their oral contraceptives. They may not have the money to get them, and the idea that they can have a long-acting contraceptive that can last years and years and years—you do not have to remember anything, you do not have to pay for anything else—I think that is the place to go.

What do you think?

Mrs. Johnson. As I said before, I think that is one of the reasons TANF has reduced out-of-wedlock and unintended pregnancies, both as one of the four purposes of TANF.

But I also agree. We work very closely with the youth in our Jeffco Prosperity Project. And we have discussions about healthy choices; we have discussions about education.

I do believe, as you said earlier, education is the number one, most important effort to be made to end poverty—quality education—plus opportunity and this safety network that wraps around individuals. So all of those discussions, everything you just said, needs to be wrapped around these individuals as they need it, one person at a time.

Senator Carper. Yes.

Mr. Chairman, you have been very generous with the time.

I just want to conclude with four words, and those four words are: long-acting reversible contraception.

Thank you.

The Chairman. Thank you, Senator.

You have really acquitted yourself well, both of you. And we are grateful that you have appeared here. We are grateful you are will-
ing to serve our people in this country. And I think both of you will be excellent people to serve in our Federal Government. So we are grateful to you.
And with that, we are going to recess until further notice, and we will move ahead.
And I want to thank everyone for their attendance and participation today. I recognize that each of the nominees is anxious to get to work, and I hope that we can work in a bipartisan way to get these highly qualified nominees reported to the floor in short order.
Now, there is a lot of work left for us to accomplish before the end of this year, and I would like to once again encourage my colleagues on both sides of the aisle to reach out to me with any ideas or suggestions so that we can continue the fine bipartisan work of this committee.
With regard to questions for the record, I ask that you submit them by close of business this Friday, March 23rd.
And with that, this hearing is adjourned.
[Whereupon, at 11:22 a.m., the hearing was concluded.]
APPENDIX

ADDITIONAL MATERIAL SUBMITTED FOR THE RECORD

PREPARED STATEMENT OF JOHN J. BARTRUM, NOMINATED TO BE ASSISTANT SECRETARY FOR FINANCIAL RESOURCES, DEPARTMENT OF HEALTH AND HUMAN SERVICES

Chairman Hatch, Ranking Member Wyden, and members of the committee, thank you for inviting me to testify today. I would also like to thank President Trump for his confidence in nominating me for this position. It is an honor to stand before you as the nominee to be the Assistant Secretary for Financial Resources at the U.S. Department of Health and Human Services (HHS).

I would first like to take a minute to introduce and thank my family: my wife Elizabeth and daughters Olivia and Sophia. I would not be able to serve without their support. I must say “hello” to my mother Kitty in Kentucky and our family back home in Indiana and in New York, who are likely first-time C-SPAN viewers.

I grew up in a small town in Indiana. My father worked in a factory and died while I was in grade school, and I faced many challenges in my youth, including being left to live on my own during my last years of high school. As a child, I never dreamed an opportunity like this would be possible for me.

Following a family tradition in military service, I enlisted in the Air Force. This allowed me to serve my country while I earned money for college and changed the direction of my life. I suspect my enlisted basic training drill sergeant wondered if the 18 year-old kid from Indiana would graduate basic enlisted training, let alone serve for more than 30 years, including as a senior military officer. My military service opened up so many of the opportunities our great country offers.

Despite my early life challenges, I went on to earn an undergraduate degree in business administration from McKendree College, holding degrees in bioenvironmental engineering and survival and rescue operations as well as a master in business administration from Southern Illinois University and a juris doctorate in law from George Mason University School of Law.

My path demonstrates how the American dream is still alive as our country opens doors beyond what a young child’s imagination may foresee.

I began my Federal career as an enlisted member of the Air Force (USAF), and later continued working for the Department of the Air Force in a variety of positions in and outside of the United States as a civilian employee and joining the USAF Reserve Forces. I have been mobilized in support of Operations Desert Shield and Storm and Iraqi Freedom.

I am a combat veteran who currently serves as a Colonel in the Medical Service Corps (Hospital Administrator/Executive) assigned to a Brigadier General position as the Mobilization Assistant to the Commander of the Air Force Medical Operations Agency (AFMOA). My military assignments included serving as Medical Commander, Individual Mobilization Augmentee (IMA) to the Deputy Assistant to the USAF Surgeon General (SG) for Health Care Operations and Medical Research, and IMA Liaison to USAF/SG for Medical Reserve Forces to list a few.

Until February of 2017, I was a civil servant for more than 32 years. In my last position, I served 7 years as a professional staffer on the House of Representatives Appropriations Committee, working on HHS appropriations issues with a specific focus on biomedical research, public health, and health care. Prior to this position, I was the Budget Director for the National Institutes of Health (NIH), advising the
NIH Director on appropriations and budget policy issues and was also responsible for the NIH-wide budget policy, planning, analysis, formulation, and presentation.

I joined NIH from the Executive Office of the President, Office of Management and Budget (OMB) as a senior OMB examiner in the National Security Division, working on management, policy, and budget development issues for the Department of Defense (DoD) health, medical, and research activities. In addition, I worked to improve the coordination between DoD and the Department of Veterans Affairs (VA). My position at OMB followed 3 years working at the VA on medical budget, health care policy, and other veterans' issues.

All these years later, it is still an honor to serve as an active Air Force reserve officer and to have served our government as a civil servant for more than 3 decades. With your support, I look forward to re-entering government with another opportunity to serve the American people.

The Assistant Secretary for Financial Resources at the Department of Health and Human Services is responsible for development of the HHS annual budget, for financial management, and for grants policy and information technology policy. The position has an important role with the coordination of these activities across HHS’s divisions. I look forward to serving in a key role that works to make the best use of available resources to enhance and protect the health and well-being of all Americans.

Mr. Chairman, I believe my education and experience demonstrate a strong understanding of the Federal budget process, the HHS budget, and the HHS public health, health, and medical research programs and uniquely qualifies me for this position.

If I receive the confidence of the Senate to serve as Assistant Secretary, my desire is to ensure my office and I work to serve as a resource to Congress to best serve our Nation. I look forward to serving our Nation as the Assistant Secretary for Financial Resources at HHS.

Thank you again for the opportunity to appear before you today. I look forward to answering your questions.

SENATE FINANCE COMMITTEE

STATEMENT OF INFORMATION REQUESTED OF NOMINEE

A. BIOGRAPHICAL INFORMATION

1. Name (include any former names used): John Joseph Bartrum.

2. Position to which nominated: Assistant Secretary for Financial Resources (ASFR) for Department of Health and Human Services.

3. Date of nomination: July 19, 2017.

4. Address: (list current residence, office, and mailing addresses):

5. Date and place of birth: February 22, 1966; Grand Rapids, MI.

6. Marital status (include maiden name of wife or husband’s name):

7. Names and ages of children:

8. Education (list secondary and higher education institutions, dates attended, degree received, and date degree granted):
   - August 2000–May 2004: juris doctorate in law from George Mason University School of Law.

9. Employment record (list all jobs held since college, including the title or description of job, name of employer, location of work, and dates of employment):
   Squire Patton Boggs (U.S.), Washington, DC, partner, February 2017 to present.
   National Institutes of Health (NIH), Associate Director, Director, Office of Budget, Bethesda, MD, October 2006 to December 2009—Senior Executive Service (SES).
   Assistant Secretary for Management, Office of Budget, Medical Service Department of Veterans Affairs (VA), Washington DC, December 1998 to June 2001—Senior Budget/Program Analyst.
   United States Air Force, Scott Air Force Base, IL (Federal employee), January 1994 to August 1996—Deputy Chief, Quality/Process Improvement Division (program manager); October 1988 to January 1994—Aircraft Maintenance Specialist.
   Widick Custom Woodworking, Evansville, IN, April 1988 to September 1988.
   United States Air Force, United States Air Force Reserve Command (officer), various positions since April 1990 to present; current positions: Mobilization Assistant to the Commander of the Air Force, Medical Operations Agency, San Antonio, TX.

10. Government experience (list any advisory, consultative, honorary, or other part-time service or positions with Federal, State, or local governments, other than those listed above):
    No other positions other than those listed above, to include Air Force Reserve service that is generally part-time since 1990.

11. Business relationships (list all positions held as an officer, director, trustee, partner, proprietor, agent, representative, or consultant of any corporation, company, firm, partnership, other business enterprise, or educational or other institution):
    I am a part owner of three small commercial rental buildings in Evansville, IN. The land is part of a sub-chapter S Corporation. I hold the position as president of J&G Real Estate Investments, Inc. Until July 2017, it was owned jointly between my aunt and me with each having equal shares. It is a non-paid position. The distributions are made in the form of dividends. In July 2017, due to health conditions of my Aunt, my wife and I purchased her shares. Therefore, my wife and I are the owners of all shares of stock between the two of us.

12. Memberships (list all memberships and offices held in professional, fraternal, scholarly, civic, business, charitable, and other organizations):
    National Rifle Association (current).
    Republican Party (current).
    Member: First Baptist Church of Alexandria, VA (current).
    Deacon: First Baptist Church of Alexandria, VA (current).
    Finance committee member: First Baptist Church of Alexandria, VA as of January 2016.
Finance committee chairman: First Baptist Church of Alexandria, VA as of January 2017.
Society of Reserve Medical Service Corps Officers member (current).
Virginia Bar Association (current).
U.S. Air Force Reserve Officer (current).
President of J&G Real Estate Investment, Inc., subchapter S corporation for commercial rental property. I owned it with my aunt until July 2017 but now own it with my wife.

13. Political affiliations and activities:
   a. List all public offices for which you have been a candidate.
      None.
   b. List all memberships and offices held in and services rendered to all political parties or election committees during the last 10 years.
      I have not held any offices in a political party. I have been a member of the Republican Party.
   c. Itemize all political contributions to any individual, campaign organization, political party, political action committee, or similar entity of $50 or more for the past 10 years.
      Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC) Committee ID: C00401083: $1,315.75 up through May 2017.
      Wendy Rogers: Principal Campaign Committee: wendyrogers.org; ID: C00510958: $250.00 in June 2012.
      Donald J. Trump for President, Inc.; Committee ID: C00580100: $48.00 on July 11, 2016.
      Joseph Murray for VA State Senate: Murray for Senate: $1,250 total contributions in 2015 ($1,000 on May 8, 2015 and $250 on October 10, 2015).

14. Honors and awards (list all scholarships, fellowships, honorary degrees, honorary society memberships, military medals, and any other special recognitions for outstanding service or achievement):

   Military Decorations and Medals as of July 15, 2017

<table>
<thead>
<tr>
<th>Awards and Decorations</th>
<th>Devices</th>
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<tbody>
<tr>
<td>1. Meritorious Service Medal</td>
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<tr>
<td>2. Air Force Commendation Medal</td>
<td>2</td>
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<tr>
<td>3. Air Force Achievement Medal</td>
<td>1</td>
</tr>
<tr>
<td>4. AF Outstanding Unit Award with Valor Device</td>
<td>3</td>
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<tr>
<td>5. AF Organizational Excellence Award</td>
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<tr>
<td>6. AF Good Conduct Medal</td>
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<tr>
<td>7. Air Reserve Forces Meritorious Service Medal</td>
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<tr>
<td>8. National Defense Service Medal</td>
<td>1</td>
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<tr>
<td>9. Global War on Terrorism Expeditionary Medal</td>
<td>0</td>
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<tr>
<td>10. Global War on Terrorism Service Medal</td>
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<tr>
<td>11. Humanitarian Service Medal</td>
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<tr>
<td>12. Air Force Expeditionary Service Ribbon with Gold Border</td>
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<tr>
<td>13. AF Longevity Service</td>
<td>6</td>
</tr>
<tr>
<td>14. Armed Forces Reserve Medal with 1 &quot;M&quot; Device</td>
<td>2</td>
</tr>
<tr>
<td>15. USAF NCO PME Graduate Ribbon</td>
<td>0</td>
</tr>
<tr>
<td>16. AF Training Ribbon</td>
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   Other Military Honors
   Scott Air Force Base Air Force Association one of the Outstanding Airman of the Year, 1987.

   Civil Service Awards
Department of the Air Force Award for Meritorious Civilian Service.
National Institutes of Health Director’s Award.

15. Published writings (list the titles, publishers, and dates of all books, articles, reports, or other published materials you have written):

Books:
None.

Articles:
None published.

“Barros Appoints Five to Top NIH Posts,” NIH Record, November 17, 2006, interviewed for the article as one of the new five senior leaders.

Reports:
Participated in the development of the Department of Veterans Affairs Medical annual budget justification request to Congress during the years 1998 through 2001.

Participated in the development of the Executive Office of the President, Office of Management and Budget, annual budget request to the Congress from 2001 through 2006 with a primary contribution to the Defense Health programs and Veterans programs.

Participated in the development of the National Institutes of Health (NIH) annual budget justification request to Congress during the years 2006 through 2009.

Participated in the development of the annual U.S. House of Representatives Appropriations bills, reports, and hearings for the Labor, Health, and Human Services (LHHS) subcommittee from 2009 through 2017 with a primary focus on medical research, public health, and other health-related activities.

Other published materials:

House of Lords visited NIH June 4–6, 2008; Lawton Chiles International House published the slides I presented to them on the NIH and the budget process.

16. Speeches (list all formal speeches you have delivered during the past 5 years which are on topics relevant to the position for which you have been nominated):
No formal speeches delivered during the past 5 years.

17. Qualifications (state what, in your opinion, qualifies you to serve in the position to which you have been nominated):
Extensive experience in Federal Government resource and budget aspects from program operations to passing of appropriations and management of policy implementation to support congressional and administrative budget policy.

More than 30 years of Federal service at all levels of the Federal Government has prepared me for this position.

Served within the Department of Health and Human Services (HHS) as Senior Executive Service Budget Director of the National Institutes of Health.

More than 7 years as a senior professional staff member on the House Appropriations Committee with extensive hands-on experience of the HHS accounts.

Career professional staff member in the Office of Management and Budget and work on health and medical research budget and resources issues in the Department of Veterans Affairs.

Military enlisted and officer for more than 30 years with the majority of my experience in medical care and health-care leadership positions.

More detail provided in employment answer number 9 above.
B. FUTURE EMPLOYMENT RELATIONSHIPS
1. Will you sever all connections with your present employers, business firms, associations, or organizations if you are confirmed by the Senate? If not, provide details.
Yes.
2. Do you have any plans, commitments, or agreements to pursue outside employment, with or without compensation, during your service with the government? If so, provide details.
Only passive activity related to my rental property and serving in the U.S. Air Force Reserve.
3. Has any person or entity made a commitment or agreement to employ your services in any capacity after you leave government service? If so, provide details.
No.
4. If you are confirmed by the Senate, do you expect to serve out your full term or until the next presidential election, whichever is applicable? If not, explain.
Yes.

C. POTENTIAL CONFLICTS OF INTEREST
1. Indicate any investments, obligations, liabilities, or other relationships which could involve potential conflicts of interest in the position to which you have been nominated.
I am not aware of any potential conflicts.
2. Describe any business relationship, dealing, or financial transaction which you have had during the last 10 years, whether for yourself, on behalf of a client, or acting as an agent, that could in any way constitute or result in a possible conflict of interest in the position to which you have been nominated.
I am not aware of any potential conflicts.
3. Describe any activity during the past 10 years in which you have engaged for the purpose of directly or indirectly influencing the passage, defeat, or modification of any legislation or affecting the administration and execution of law or public policy. Activities performed as an employee of the Federal Government need not be listed.
Prior to February 2017, I was a Federal employee for more than 30 years. Since February 2017, I have represented legal clients where I primarily provided strategic advice on the Federal Government process. However, in a couple of instances I advised them on how to work with the agency, administration, or Congress to shape policy through requesting appropriations report language, educating congressional members on areas of interests, or suggesting they work with Federal agencies to discuss policy concerns.
4. Explain how you will resolve any potential conflict of interest, including any that may be disclosed by your responses to the above items.
If I encounter any potential conflicts of interest, I will seek the advice of the HHS career ethics officials.

D. LEGAL AND OTHER MATTERS
1. Have you ever been the subject of a complaint or been investigated, disciplined, or otherwise cited for a breach of ethics for unprofessional conduct before any court, administrative agency, professional association, disciplinary committee, or other professional group? If so, provide details.
I am not aware of any complaint, investigation, discipline, or other citation for breach of ethics for unprofessional conduct against me.
2. Have you ever been investigated, arrested, charged, or held by any Federal, State, or other law enforcement authority for a violation of any Federal, State, county, or municipal law, regulation, or ordinance, other than a minor traffic offense? If so, provide details.
I am not aware of any investigation, arrest, charge, or by any Federal, State, or other law enforcement authority for a violation of any Federal, State, county, or municipal law, regulation, or ordinance, other than a minor traffic offense against me.

3. Have you ever been involved as a party in interest in any administrative agency proceeding or civil litigation? If so, provide details.
   I was part of a 2008 Equal Employment Opportunity Commission (EEOC) complaint.
   Organization/business/entity where it took place: National Institutes of Health.
   Date of claim: On or about 2008.
   My involvement in the claim: I was the supervisor of the complainant’s supervisor as I served as the agency Budget Director.
   Nature of allegations/circumstances: To the best of my recollection the complainant resigned during her probationary employment period after being notified of failure to progress with her duties. The complainant filed an EEOC complaint alleging she was discriminated against and subject to a hostile work environment on the bases of race, disability, and reprisal.
   Resolution of the claim: My understanding is the case was dismissed by the EEOC in 2010 without merit, according to the Department of Health and Human Services attorney (General Law Division), Holly Rich. It was EEOC Case No. 531–2010–00086X; Agency Case No. HHS–NIH–0014–2009.

Divorced on May 29, 1997.
   Full name of former spouse: Last: Woltering; First: Diane; Middle: Carole.
   Date of birth: November 17, 1961 (estimated).
   Place of birth of former spouse: City: Breese; State: IL.
   Country: Former spouse was a United States citizen.
   Date/place married: November 10, 1994; Belleville, IL.
   Divorce date/place: May 29, 1997 (estimated); Belleville, IL.

4. Have you ever been convicted (including pleas of guilty or nolo contendere) of any criminal violation other than a minor traffic offense? If so, provide details.
   I am not aware of ever being convicted of any criminal violation other than a minor traffic offense against me.

5. Please advise the committee of any additional information, favorable or unfavorable, which you feel should be considered in connection with your nomination.
   None.

E. TESTIFYING BEFORE CONGRESS

1. If you are confirmed by the Senate, are you willing to appear and testify before any duly constituted committee of the Congress on such occasions as you may be reasonably requested to do so?
   Yes.

2. If you are confirmed by the Senate, are you willing to provide such information as is requested by such committees?
   Yes.

QUESTIONS SUBMITTED FOR THE RECORD TO JOHN J. BARTRUM

QUESTION SUBMITTED BY HON. JOHN THUNE

Question. Mr. Bartrum, my office recently met with a nursing program in South Dakota that has previously accessed Federal competitive grants through the Indian Health Service (IHS) aimed at growing the nursing workforce serving Native Americans. They raised concerns that in the last round of awards, their grant was approved, but not awarded due a restriction imposed on the number of grants per IHS region.
While the university recognizes the intent for the grants to be competitive and the fact that there are limited resources, the concern stems from language in Federal law stating that the Secretary shall award one of the nursing grants to the University of North Dakota. It was indicated to the nursing program that its application could not be funded due to HHS’s determination that it would only award funds to one university in the Great Plains Area, and University of North Dakota must receive one by law.

It appears that there has been at least one instance in the past where multiple universities in the Great Plains Area have been awarded funds simultaneously to the University of North Dakota receiving funding. Simply put, the nursing program wants to ensure that their application can compete moving forward and that they are not automatically discounted from consideration due to the set aside in law for North Dakota.

If confirmed, will you commit to working with my office on this issue, and more broadly, to improving access to quality health-care services for tribal members?

Answer. If confirmed, I look forward to working with your office on this important issue and working toward our shared goal of improving access to quality health care for tribal members.

Question Submitted by Hon. Ron Wyden

Question. The President’s Fiscal Year 2019 budget request for the Department of Health and Human Services proposes $1,120 billion in mandatory funding. This is over 90 percent of the Department’s annual budget and represents billions of dollars in operating and administrative costs for programs that are absolutely essential to the American people, including Medicare, Medicaid, CHIP, and TANF. As the key advisor to the Secretary on all policy decisions with a budgetary or programmatic impact, you will play a central role shaping the future of these programs.

If confirmed, what will be your key considerations when advising the Secretary on policy decisions that have a budgetary impact on mandatory programs?

How will you weigh a policy’s impact on cost savings, provider payments, beneficiary access, and program integrity?

Where do you draw the line between “number crunching” and policy development?

How will you balance the Secretary’s and administration’s priorities with Congress’s directive?

Answer. If confirmed, I would faithfully transmit the budgetary impact and analysis provided by each HHS division, based on their feedback as subject matter experts. The President’s budget is a policy document intended to express the administration’s position on programs that have a budgetary impact, and sets a benchmark for Congress’s consideration. If confirmed, I will faithfully execute the laws as passed by Congress.

Follow-up Questions Submitted by Hon. Ron Wyden

Question. If confirmed, what will be your key considerations when advising the Secretary on policy decisions that have a budgetary impact on mandatory programs?

Answer. If confirmed, my key considerations when advising the Secretary on policy decisions that have a budgetary impact on mandatory programs will be to best support the HHS mission of ensuring the health and well-being of all Americans in line with the Secretary’s priorities and the available resources. It will be my job to solicit Department-wide input from both career and political staff, as well as seek the input of subject matter experts, to ensure that adequate and informed impact analysis is appropriately weighed and reflected in any policy decision.

Question. How will you weigh a policy’s impact on cost savings, provider payments, beneficiary access, and program integrity?

Answer. The balance of the impact on cost savings, provider payments, beneficiary access, and program integrity is based on supporting the HHS mission to enhance the health and well-being of all Americans within current law and available resources. Just as in Congress, consideration of all potential impacts, budgetary or otherwise, is critical to the policy making process. As such, a policy’s impact on cost
savings, provider payments, beneficiary access, and program integrity would all be important elements to weigh.

Question. Where do you draw the line between “number crunching” and policy development?

Answer. If confirmed, I will work collaboratively with leaders in HHS who are the program policy experts to develop a balance of the Secretary's priorities and HHS mission in line with congressionally passed laws and available resources. My experience in the Office of Management and Budget and on the House of Representatives Appropriations Committee staff has taught me to understand various options are available to address issues which need to be balanced against the available resources and priorities.

For example, when I was on the Appropriations Committee staff developing the fiscal year 2015 appropriations bill, the chairman desired an approach to better address the opioid epidemic. I worked with various policy experts related to the issue to recommend options. The options ranged from using existing Centers for Disease Control and Prevention (CDC) programs to a more targeted new CDC effort. The Chairman, based on the policy experts’ research, decided to move forward with a targeted CDC effort to build local capacity and support state data systems to improve surveillance to best support the health and well-being of all Americans. Through my examination, inquiry, and data synthesis, I was able to help drive solutions and resources in the best possible way on this critically important issue.

Question. How will you balance the Secretary’s and the administration’s priorities with Congress’s directive?

Answer. Whether in the legislative branch developing budgets or crafting appropriations bills, or in the executive branch developing budgets, policy choices drive the identification of topline targets and inform all the numbers that follow. If confirmed, I would work collaboratively with the Department leaders and Congress to address the administration's priorities and those instilled upon the Department by Congress. The President’s budget, for example, is a policy document intended to express the administration’s position on programs and sets a benchmark for Congress’s consideration. If confirmed, I will faithfully execute the laws as passed by Congress to enhance the health and well-being of all Americans.

QUESTIONS SUBMITTED BY HON. DEBBIE STABENOW

Question. Last year, there were 55.5 million total Medicare beneficiaries, including nearly 2 million in Michigan.

Would you advise against any cuts to the Medicare program and seniors’ benefits, if confirmed?

Answer. The President has clearly stated his, and the administration’s commitment to ensuring Medicare beneficiary access to care remains a top priority. Any policies seeking to strengthen the fiscal solvency and long-term sustainability of the program to ensure its existence for future generations to come, must be done in a manner that does not impede current beneficiaries’ access to care.

Question. Despite the President’s promise not to cut Medicaid, every major healthcare proposal that came before Congress last year as well as the HHS budget included Medicaid cuts over $1 trillion dollars.

At ASFR, you are providing guidance on all budgetary aspects, and will be involved in advising on the next budget request.

Do you support block-granting and cutting the Medicaid program?

Would you recommend that Medicaid expansion be ended?

Answer. I agree with the administration’s repeated call to provide States with the flexibility to customize their Medicaid program to fit the needs of each State’s unique population. While there is no one-size-fits-all solution, States must be able to customize a program that works best for their residents, while ensuring that patients have access to high-quality health care.
QUESTIONS SUBMITTED BY HON. SHERROD BROWN

Question. As you have previously acknowledged, it takes resources—including financial resources—to ensure the successful implementation of any policy. The successful implementation and day-to-day execution of the Affordable Care Act (ACA) is no different. As Assistant Secretary for financial Services you will be responsible for estimating the resources necessary to carry out the various programs and policies under the jurisdiction of HHS.

If confirmed, will you commit to truthfully estimating the resources required to successfully implement and ensure successful management and execution of all laws of the land, including the ACA?

Will you commit to answering questions raised by members of both the majority and the minority in Congress in a both truthful and prompt manner?

Answer. Yes, if confirmed, I commit to being responsive to all members of Congress in a truthful and prompt manner, and I will faithfully execute the laws as passed by Congress.

Question. In 2015, the Department of Health and Human Services announced that it would be investing $110 million from the non-recurring expenses fund (NEF) in the Centers for Disease Control and Prevention’s (CDC) National Institute for Occupational Safety and Health (NIOSH) center in Cincinnati, Ohio for site selection, acquisition, and construction of a new research facility. This project is ongoing and construction is expected to start later this year. Last year, Senator Portman and I wrote to then Secretary Price to express our support for this project and ask for a status update. We were pleased when the Department responded that work on a new NIOSH facility in Cincinnati remains underway and the Department plans to continue prioritizing this project. We have since spoken with Secretary Azar about our enthusiasm for seeing this project completed in a timely manner.

If confirmed, will you commit to working with Senator Portman and me to ensure this project remains a Department priority, that the funds that have been publicly committed to this NIOSH project remain dedicated to this project, and that you will work with your team and others in the Department to ensure timely completion of this project?

Answer. Yes, if confirmed, I look forward to working with both your office and Senator Portman’s office on this project.

QUESTIONS SUBMITTED BY HON. ROBERT P. CASEY, JR.

Question. This administration has undertaken a systematic dismantling of protections for lesbian, gay, bisexual, and transgender (LGBT) Americans and has worked to quietly push programs administered by the Department of Health and Human Services away from serving LGBT individuals, such as by limiting Federal agency data collection on the needs of LGBT youth and older Americans. How will you ensure that programs administered by HHS are not hampered from serving the LGBT community?

Answer. If confirmed, I would work to enhance and protect the health and well-being of all Americans, including the LGBT community.

Question. The mission of the Department of Health and Human Services is “to enhance and protect the health and well-being of all Americans,” including by “fostering advances in . . . public health.”

Do you agree with this mission statement?

How will you promote health, if confirmed as Assistant Secretary for Financial Resources?

What approaches to promoting public health do you feel are the most effective?

How will you engage with the full range of stakeholders, from both the public sector and the private and non-profit sectors, to promote public health? Do you see value in seeking input from nongovernmental stakeholders, even when opinions may differ?

Answer. As I stated in my opening testimony before the committee, I look forward to serving in a key role that works to make the best use of available resources to enhance and protect the health and well-being of all Americans. I would seek to faithfully transmit the budgetary impact and analysis provided by each HHS divi-
sion, based on their feedback as subject matter experts, which is formed, in part, from the input they receive from various nongovernmental stakeholders and experts in their field.

PREPARED STATEMENT OF HON. ORRIN G. HATCH, A U.S. SENATOR FROM UTAH

WASHINGTON—Senate Finance Committee Chairman Orrin Hatch (R–Utah) delivered the following opening statement at a Finance Committee hearing considering the U.S. Department of Health and Human Services (HHS) nominations of John Bartrum to be an Assistant Secretary of Health and Human Services and Lynn Johnson to be an Assistant Secretary for Family Support.

Today we will consider the nominations of John Bartrum and Lynn Johnson. I would like to extend a warm welcome to each of the nominees here today. Congratulations on your nominations and thank you for your willingness to serve in these important positions.

Mr. Bartrum, President Trump nominated you to be Assistant Secretary for Financial Resources at the Department of Health and Human Services. This is not the first time you have been called upon to serve your country. In fact, you have 30 years of military experience as both an active duty officer and as a reserve officer. We thank you for your service.

In addition to your substantial military career, you spent many years on Capitol Hill as a Senior Professional Staffer to the United States House Appropriations Committee. In that capacity, you played a key role in funding the Department of Health and Human Services as well as many other agencies under its purview. Your experience has given you important insights into the costs associated with the policies and programs carried out by the Department.

Prior to your career on Capitol Hill, you served as a part of the National Security Division of the Office of Management and Budget in the Executive Office of the President. At OMB, you were responsible for the budget of the Department of Defense and Veterans Affairs. It is obvious from your background that you have a good deal of experience crafting and implementing Federal budgets. I’m sure these experiences will serve you well in the position for which you have been nominated.

If confirmed, you will oversee HHS’s budget and provide guidance to the Secretary on all aspects of financial management. As I’m sure you are well aware, Medicare and Medicaid are expanding too quickly. According to the Centers for Medicare and Medicaid, national spending on mandatory health programs is projected to grow at an average of 5.5 percent per year between 2017 and 2026 and will reach $5.7 trillion by 2026.

This trajectory is unsustainable.

I have a long history of supporting entitlement reform and believe that we need to continue to find ways to curb excessive government spending while increasing access to high-quality, affordable care.

I don’t think I need to say this, but I will anyway: we have our work cut out for us, Mr. Bartrum.

On the other hand, Mrs. Johnson, President Trump nominated you to be Assistant Secretary for Family Support at the Department of Health and Human Services. Currently, you serve as executive director of Jefferson County Human Services, where you oversee a number of workforce and social services programs, including TANF. Prior to your position with Jefferson County Human Services, you ran a consulting firm in Colorado that focused on mental health, high-risk youth, and child welfare among other things. I’m sure these experiences will serve you well in the position for which you have been nominated.

If confirmed, Mrs. Johnson, you will oversee a wide range of more than 60 programs with a budget of more than $53 billion, making it the second largest agency in the U.S. Department of Health and Human Services. You will oversee major programs such as TANF, child welfare, child care, child support, and Head Start—partnering with States and communities to help families achieve prosperity and independence.

You will also be charged with implementing laws passed by Congress to aid children and families across the country. Last month, after years of hard work on both
sides of the aisle. Congress passed—and the President signed into law—the Family First Prevention Services Act. This law has the potential to improve the lives of tens of thousands of children and their families across this country. The opioid epidemic has hit families hard, and the number of children entering foster care due to parental substance abuse is continuing to climb. Fortunately this new law will help address the epidemic by providing more help to families to address substance abuse issues.

Mrs. Johnson, if confirmed, you will be charged with leading the agency in implementing this law, and I know members of this committee are eager to work closely with you to make sure it is implemented quickly, and as intended, so that families will get the help they need.

I look forward to working with you both, and hope that we can get your nominations reported and confirmed in short order so that you can get to work. We have a great deal of work ahead of us on these issues. And I look forward to working with HHS as we work to achieve our shared goals.

PREPARED STATEMENT OF LYNN A. JOHNSON, NOMINATED TO BE ASSISTANT SECRETARY FOR FAMILY SUPPORT, DEPARTMENT OF HEALTH AND HUMAN SERVICES

Thank you, Senators Gardner and Bennet, for supporting me today. It is an honor to have you both with me. Thank you, Chairman Hatch, Ranking Member Wyden, and distinguished members of the Finance Committee. It is a tremendous honor and opportunity to appear before you today as the President’s nominee to be the Assistant Secretary for Family Support.

Before I continue, I would like to introduce you to my family. My husband Lance encouraged me to accept this nomination so I can serve my country in the best way I know how. Should I be confirmed, I know that he and the rest of my family will also be serving America. My sons Greg and Kyle and my youngest daughter Brett are all here today. My mother-in-law Judy from both Arizona and Iowa and my college roommate Tina, who made the trek from Arizona, are here with me. My parents, Don and Marilyn from Ohio and Colorado, and my brothers, sister, nieces, nephews, aunts, uncles, my staff, and friends are all watching right now. Without all of them, I could not have made this journey through my career. I am thankful for them.

My family moved from Ohio to Colorado when I was young. Growing up in Colorado, my parents instilled in me the dedication to serve others. My Mom was a teacher, and my Dad served in the Army and loved to play baseball. They are an example of what is great in America. With great pride and humility I want to note many families who have moved themselves out of poverty and have taught me so much about dignity, respect and the valuable voice for our most vulnerable people are watching right now.

Looking back on my Criminal Justice career, I learned lessons from people who made some horrible decisions and suffered the painful consequences of rejection by society. Success stories were accompanied by failures in our criminal justice, education, mental health, and human services systems. Top-heavy bureaucracy coupled with the inability of systems to work in harmony let criminal offenders “slip through the cracks,” allowed the homeless and hungry to continue to suffer, and denied battered children the dignity of help they so rightfully deserved. I cannot imagine ever saying “no” to an opportunity to serve my country and to dedicate myself to having an impact and to make a positive difference.

Systems are made to be improved. After leaving criminal justice, my fortune led me to work with Governor Bill Owens, known for more action and less talk. He championed successful outcomes for vulnerable populations and challenged me to further the cause. Here I learned policy, politics, and how difficult it was to decrease red tape, rules, and regulations. I learned that the American people do not want to wait any longer for bureaucracy to plan and plan and plan to make a difference. Children, mothers, fathers are hungry now, so we need to act now.

In 2007 I became the Director of Jefferson County Human Services. This was my Ph.D. in serving. I had the opportunity to work with others in the helping professions from staff to partners to the children and families who walk in our doors and to maximize their God-given potential. I didn’t waste a single moment. I learned the workforce systems from the Department of Labor; anti-poverty programs from Head Start; child welfare programs, adult programs, and all of the eligibility programs
from HHS; some of the housing programs from HUD; and the SNAP program from the Department of Agriculture. We continually worked to improve our outcomes. We set a course for community partnerships at the highest levels. We set out to change the culture. We created a power of partnership with over 150 faith-based entities serving people first, partnered with nonprofits to maximize resources, and, most importantly, created the Jeffco Prosperity Partnership (JPP). We moved with people from poverty to prosperity. This all was accomplished through a whole-family model that has demonstrated great success. JPP started with life coaches wrapping services around Head Start families to ensure children graduate high school and parents achieve self-sufficiency. The highest success is the dignity and respect each family learns and earns moving out of government systems, becoming productive citizens, and giving back social capital so others can reach for the American dream. Because of this, we are ending poverty in Jefferson County with a goal to end it throughout America.

The chance to serve my country as the Assistant Secretary for Family support is my next great challenge. The challenge is to reduce abuse and neglect, poverty, unemployment, truancy and dropouts in our schools, homelessness, human trafficking, and hunger for all of our Nation’s communities. Based on my journey, I believe we can, and I believe I am up to lead the task at hand. I know that ACF is a large agency that has huge responsibilities. If we don’t act now, fast, focused with a definition of success, leaders sitting in these same seats years from now will be having these same discussions. By working with this esteemed body of government, with the executive branch, State and local governments, businesses, non-profit partners, and faith-based entities, and most importantly by working and doing with, not for, our most vulnerable populations, we can make the difference that we will all be proud of. Together we can avoid putting Band-Aids on problems and we can eliminate costly root causes. The billions of dollars invested in the United States by government and philanthropy in communities can be reduced because we can show a return on investment that will create a thriving, safe, and healthy society, and one that all other countries worldwide will want to emulate. Every day, I will work to earn your confidence. I will fight so we can say the American people are better off because together we made a difference. I will make it my mission to listen and always value dignity and respect for all of the people, children, and families we serve.

If confirmed, I will be responsive to your intent, follow the laws, and work closely with you to make good things happen. I hope you support me to lead this challenge. I thank you for your consideration and look forward to answering any questions.

SENATE FINANCE COMMITTEE

STATEMENT OF INFORMATION REQUESTED
OF NOMINEE

A. BIOGRAPHICAL INFORMATION

1. Name (include any former names used): Lynn Ann Johnson; maiden name: Mestnik.
2. Position to which nominated: Assistant Secretary for Family Support for the Department of Health and Human Services.
3. Date of nomination: June 16, 2017.
4. Address (list current residence, office, and mailing addresses):
5. Date and place of birth: April 7, 1959, Wiesbaden, Germany.
6. Marital status (include maiden name of wife or husband’s name):
7. Names and ages of children:
8. Education (list secondary and higher education institutions, dates attended, degree received, and date degree granted):
   I attended the University of Northern Colorado and obtained a bachelor of science major in special education, rehabilitation and related services with a

9. Employment record (list all jobs held since college, including the title or description of job, name of employer, location of work, and dates of employment):

Arizona Department of Corrections, Phoenix, AZ, 1982–1987. In 1982–1983 I was a policy analyst, a project coordinator, and a legislative assistant. I worked for the policy liaison, Judy Burris. From 1983–1987 I was an Arizona State Parole Officer managing a caseload of up to 100 criminal cases, conducting arrests, searches, and seizures. The parole chief was Jim Armstrong. Bob Altweis and Lee Gaugler directly supervised me.

From 1987 through 1994, I worked for the United States Probation Office in Arizona and Colorado. From 1987 through 1992 I was a U.S. Probation Officer in the District of Arizona, with offices in Phoenix, Tempe, and Mesa, AZ, conducting investigations, making recommendations on the disposition of cases for the court, writing court reports, responding to motions, and managing a caseload of offenders in addition to implementing training for co-workers. In 1992, I did the same work in the District of Colorado, offices located in Denver and Lakewood, CO, and was promoted to mental health specialist from 1994 through 1999. This position entailed managing a caseload of offenders needing mental health treatment. I managed a caseload of sex offenders in addition to providing the Federal Judicial Center assistance on nationwide training on the management of sex offenders. In Arizona, the chief was Robert Thomas and in Colorado, the chief was Richard Miklic.

From 1999 through 2003, I was employed by the State of Colorado working in the Office of Governor Bill Owens starting as a senior policy analyst, becoming the Director for the Governor’s Office for Family and Children and the Head Start Collaboration Director. I was promoted to Deputy Director for Policy and Initiatives in 2000, ultimately moving to deputy chief of staff for policy in March 2002 through January 2003. My direct supervisors were Richard O’Donnell and Roy Palmer.

From January through April of 2003, I was employed by the State of Colorado as chief of staff for Lieutenant Governor Jane E. Norton, directly supervised by her. I was responsible for the direct day-to-day operations of the office.

In April 2003 through July 2007, I did consulting work as president/owner of Lynn A. Johnson, Inc. I worked on numerous projects dealing with mental health, youth issues, developmental disabilities, and education. Specific projects were done for the National Alliance for the Mentally Ill (NAMI), Rite of Passage (ROP), Developmental Pathways Community Centered Board, CCB Partners, Fund for Colorado’s Future, and University of Denver Graduate School of Social Work. I worked out of my home in Lakewood, CO.

From July 2007 to present, I have been the Executive Director of the Jefferson County Department of Human Services, in Golden, CO. This agency is responsible for Workforce (WIOA), Head Start, Medicaid and other benefit programs, Community Development Block Grants (CDBG), Temporary Assistance to Needy Families (TANF), child support services, child and adult protection, child welfare, adult and aging programs, delinquency services, and pretrial and community corrections. In this position, I manage over 650 employees and a 90+ million-dollar budget. I report to a county board of commissions and am currently supervised by county manager Don Davis.

10. Government experience (list any advisory, consultative, honorary, or other part-time service or positions with Federal, State, or local governments, other than those listed above):

None.

11. Business relationships (list all positions held as an officer, director, trustee, partner, proprietor, agent, representative, or consultant of any corporation, company, firm, partnership, other business enterprise, or educational or other institution):

None.
12. Memberships (list all memberships and offices held in professional, fraternal, scholarly, civic, business, charitable, and other organizations):
   - Children's Ark Child Care Board—parent member.
   - Colorado Human Services Directors Association—member.
   - Friends for Youth—board member.
   - National Association of Public Child Welfare Administration—president-elect and vice president.
   - American Public Human Services Association—member.
   - Colorado Human Trafficking Council—Governor-appointed member.
   - Alpha Phi International Fraternity—member.

13. Political affiliations and activities:
   a. List all public offices for which you have been a candidate.
      None.
   b. List all memberships and offices held in and services rendered to all political parties or election committees during the last 10 years.
      Area coordinator, caucus chair, and county and State delegate for the Jefferson County Republican Party.
   c. Itemize all political contributions to any individual, campaign organization, political party, political action committee, or similar entity of $50 or more for the past 10 years.
      Donations to Congressman Mike Coffman (R–CO) $100 or less.

14. Honors and awards (list all scholarships, fellowships, honorary degrees, honorary society memberships, military medals, and any other special recognitions for outstanding service or achievement):
   - Jefferson County Hall of Fame—West Chamber of Commerce 2017.
   - Local and State outstanding member award—American Public Human Services Association 2016.
   - Award of excellence for successful transformation of Human Services and support of substance abuse treatment—Signal Behavioral Health Network 2009.
   - Impact volunteer, Mile High United Way.
   - Lynn Johnson Day in Jefferson County, Jefferson County Board of County Commissioners proclamation, June 14, 2012.
   - Outstanding service and professional commitment—Rite of Passage, Inc.
   - Outstanding woman of Jefferson County—The West Chamber 2012.
   - Serving our Seniors (SOS) award, Colorado Senior Lobby 2013.

15. Published writings (list the titles, publishers, and dates of all books, articles, reports, or other published materials you have written):
   None.
16. Speeches (list all formal speeches you have delivered during the past 5 years which are on topics relevant to the position for which you have been nominated):

- American Public Human Services Association—“TED Talk.”
- Human Trafficking PowerPoint—standard speech and training collaborations speech.
- Triad presentation.
- Colorado Human Services Directors Association Integration.
- Human Trafficking.
- NACO Integrated, Generative Services.
- The Jeffco Prosperity Project for the Power of Partnership Conference on Human Trafficking.
- Arvada K–8 Working Together.
- Live Well San Diego presentation on integration.
- The Good News Breakfast—formal speech.
- Metro State University—formal speech.
- ROP slide presentation on integration and juvenile justice.
- Human services standard talking points and PowerPoint.
- Jeffco Thrives PowerPoint on integration and reaching excellence.
- Local Human Service Directors speech.
- Two Gen and the generative approach—Harvard.
- Two Gen and integration to generative thinking Tennessee
- Early childhood and Jeffco Prosperity Project for the TRIAD, early childhood.

17. Qualifications (state what, in your opinion, qualifies you to serve in the position to which you have been nominated):

I have dedicated my life to serving my country by working with the most vulnerable of people from offenders, to abused children, to the homeless, mentally ill, addicted, and beaten. My education and my experience together enable me to serve well in the position I have been nominated to. I have a broad understanding of the multiple Federal systems working to end poverty, abuse, neglect, and other costly issues in society. I understand the need to integrate systems and to decrease waste while increasing positive outcomes with dignity and respect. My approach to systems and to those we serve enables me to be a good steward of the tax dollar while moving families and individuals to a place in society where they are self-sufficient, free from abuse, and from neglect. I understand rules, regulations, laws, budgets, and financing. I have good experience with legislation and a broad understanding of the judicial system. All of this together qualifies me to serve in the position to which I have been nominated, Assistant Secretary for Family Support (Administration for Children and Families in Health and Human Services).

B. FUTURE EMPLOYMENT RELATIONSHIPS

1. Will you sever all connections with your present employers, business firms, associations, or organizations if you are confirmed by the Senate? If not, provide details.

Yes.

2. Do you have any plans, commitments, or agreements to pursue outside employment, with or without compensation, during your service with the government? If so, provide details.

No.

3. Has any person or entity made a commitment or agreement to employ your services in any capacity after you leave government service? If so, provide details.

No.
4. If you are confirmed by the Senate, do you expect to serve out your full term or until the next presidential election, whichever is applicable? If not, explain.
   Yes, I would be honored.

C. POTENTIAL CONFLICTS OF INTEREST
1. Indicate any investments, obligations, liabilities, or other relationships which could involve potential conflicts of interest in the position to which you have been nominated.
   I owned BlackRock Health Sciences Opportunities Portfolio (SHSAX) in a personal SEP/IRA account. This has been sold.

2. Describe any business relationship, dealing, or financial transaction which you have had during the last 10 years, whether for yourself, on behalf of a client, or acting as an agent, that could in any way constitute or result in a possible conflict of interest in the position to which you have been nominated.
   None.

3. Describe any activity during the past 10 years in which you have engaged for the purpose of directly or indirectly influencing the passage, defeat, or modification of any legislation or affecting the administration and execution of law or public policy.
   In my role as Executive Director of Human Services, I worked directly with the State Director and the legislature during session as requested, to provide information, education, or guidance on bills impacting the State or local delivery of services. I did not act in the capacity of a lobbyist at any time.

4. Explain how you will resolve any potential conflict of interest, including any that may be disclosed by your responses to the above items.
   I will comply with all of the requirements of the Office of Government Ethics concerning potential conflicts of interest. I have sold the BlackRock Health Sciences Opportunities Portfolio (SHSAX) that is in a personal SEP/IRA account.

5. Two copies of written opinions should be provided directly to the committee by the designated agency ethics officer of the agency to which you have been nominated and by the Office of Government Ethics concerning potential conflicts of interest or any legal impediments to your serving in this position.
   Completed.

D. LEGAL AND OTHER MATTERS
1. Have you ever been the subject of a complaint or been investigated, disciplined, or otherwise cited for a breach of ethics for unprofessional conduct before any court, administrative agency, professional association, disciplinary committee, or other professional group? If so, provide details.
   No.

2. Have you ever been investigated, arrested, charged, or held by any Federal, State, or other law enforcement authority for a violation of any Federal, State, county, or municipal law, regulation, or ordinance, other than a minor traffic offense? If so, provide details.
   No.

3. Have you ever been involved as a party in interest in any administrative agency proceeding or civil litigation? If so, provide details.
   I have not been named as a party in any personal litigation. I have been named as a party in litigation in my official capacity as Director of Human Services. Please let me know if you need a full listing of the litigation.

4. Have you ever been convicted (including pleas of guilty or nolo contendere) of any criminal violation other than a minor traffic offense? If so, provide details.
   No.

5. Please advise the committee of any additional information, favorable or unfavorable, which you feel should be considered in connection with your nomination. 
I would be honored and completely dedicated to the agency I am nominated to. Should I be confirmed, I would look forward to working at the Federal level to continue the efforts I have made to reduce unnecessary costs while at the same time assist individuals and families to be self-sufficient and free from government subsidies.

E. TESTIFYING BEFORE CONGRESS

1. If you are confirmed by the Senate, are you willing to appear and testify before any duly constituted committee of the Congress on such occasions as you may be reasonably requested to do so?
   Yes.

2. If you are confirmed by the Senate, are you willing to provide such information as is requested by such committees?
   Yes.

QUESTIONS SUBMITTED FOR THE RECORD TO LYNN A. JOHNSON

Question Submitted by Hon. John Thune

Question. Mrs. Johnson, an area of concern I’ve heard from some of the tribes in South Dakota administering their own child support programs is that they currently lack direct access to the Federal Parent Locator Service, which helps locate non-custodial parents to enforce child support orders. Similarly, tribes cannot utilize the Federal offset program, which would allow them to collect past-due child support payments from a noncustodial parent’s tax refund. If confirmed, will you commit to working with my office on finding ways to address these concerns and ensure that tribes can successfully enforce child support orders?

Answer. Child support is critical to the healthy growth of children and the ability for families to become self-sufficient and move out of poverty. If confirmed, I will commit to working with your office to find ways to address these concerns.

Question Submitted by Hon. Claire McCaskill

Question. Mrs. Johnson, of the 273,539 children who entered foster care during FY 2016, one-third entered foster care because of parental substance abuse. As the opioid epidemic continues to plague families across the country, what steps will you take, if confirmed, to ensure that the different child welfare systems across the country are prepared to properly deal with the growing number of children affected by parental substance abuse?

Answer. Parental substance abuse has impacted many children and families throughout our country with the opioid epidemic exacerbating the number of children affected by this crisis. Preventative measures, access to (successful) treatment opportunities for parents and ongoing monitoring is critical to support children in homes where a parent struggles with substance abuse. It is also important to strengthen in-patient programs that keep children and parents together in cases where this is possible and in the best interest of the child.

Successful support networks must be identified in localities to provide the best support to a caregiver with an addiction to ensure sobriety throughout his or her lifetime. Substance abuse cannot be addressed adequately without also looking at self-medicating issues around mental health. In addition to treatment, primary prevention to address substance abuse prior to addiction is paramount to ensure less families suffer the challenges that come with substance abuse. Addiction cannot be addressed in a silo and, if confirmed, I look forward to working with SAMHSA and CMS, and with our State and local partners to identify innovative programs that work for families.

Question. Mrs. Johnson, do you support collaboration and coordination between drug courts and the child welfare system? If yes, what are your plans for collaboration and coordination, if confirmed?

Answer. I fully support collaboration and coordination between drug courts and the child welfare system. The courts and the child welfare system in Jefferson Coun-
ty Colorado have achieved a successful drug court/child welfare integrated program. We are extremely proud of the success due to this collaborative effort. Our drug court known as FIT Court has been selected as a National Peer Learning Court (PLC). There are 450 family drug courts across the country and a total of 8 have been selected by Children and Families Futures and OJJDP as Peer Learning Courts. FIT Court has been selected to serve as a PLC because of our team’s commitment to evidence-supported practices, innovative strategies to improve outcomes for children and families, and the strong foundation of collaboration among the court, child welfare, and substance use disorder treatment agencies.

QUESTIONS SUBMITTED BY HON. ROBERT P. CASEY, JR.

LGBT ISSUES

Question. The Department of Health and Human Services’ (HHS) Street Outreach Program, administered by HHS’s Administration for Children and Families (ACF), supports organizations around the country that work with homeless, runaway, and street youth to help them find stable housing and services. The program’s goal is to prevent the sexual abuse or exploitation of young people living on the streets or in unstable housing and prepare them for independence. While previous funding announcements specifically stated that grantees were required to address the unique needs of lesbian, gay, bisexual, transgender, and queer (LGBTQ) youth, the 2017 announcement removed that requirement as well as all mentions of LGBTQ youth. Furthermore, in previous years, applicants were required to submit an “LGBTQ Accessibility Policy” assurance, which stated that the needs of LGBTQ individuals would be taken into consideration and that the applicant would establish policies prohibiting harassment. The 2017 funding announcement did not require applicants to submit this assurance.

HHS’s decision to eliminate LGBTQ youth as a focus of the program ran counter to its own findings and recommendations and could have serious repercussions on the lives of at-risk LGBTQ youth. According to a 2016 study released by HHS, while 3 to 5 percent of youth in this country self-identify as LGBT, one-third of youth served by the Street Outreach Program reported being lesbian, gay, or bisexual, and HHS’s own study also found that LGBTQ youth served by the program “were significantly more likely to have experienced victimization on the streets (including being beaten up, robbed, sexually assaulted or raped, threatened with a weapon, or assaulted with a weapon) than their heterosexual counterparts.” HHS also found that LGBTQ youth supported by the program faced barriers accessing services, including the lack of LGBTQ-friendly policies and staff. Because of these barriers, HHS concluded that programs and services funded by the Street Outreach Program would need to be especially sensitive to LGBTQ youth and that additional information about the needs of LGBTQ youth, as well as more effort, was needed to better serve these individuals. HHS’s decision to remove requirements to address the unique needs of LGBTQ youth leaves the Department in contradiction of its own recommendations.

If you are confirmed, how will you ensure that all ACF programs, including the Street Outreach Program, meet the unique needs of the LGBTQ community?

Answer. Should I be confirmed, I will commit that all ACF programs will treat all children and youth fairly and with compassion and respect for their human dignity. Should I have the opportunity to lead ACF, I am committed to following Congress’s lead in seeing that the agency supports the well-being of all the children and youth its programs touch, and promotes positive youth development that includes quality care and nurturing for success as healthy adults.

COOPERATION

Question. If you are confirmed, do you commit to providing thorough, complete, and timely responses to requests for information from all members of Congress, including requests from members in the minority?

Answer. Yes, I will commit to working with and responding in a thorough, complete, and timely manner to all members of Congress.

IMPACT OF CHILDHOOD TRAUMA

Question. Ongoing research, including studies funded by the Centers for Disease Control and Prevention, have demonstrated the broad prevalence of Adverse Childhood Experiences (ACEs) and the ways in which these experiences can lead to life-
long health consequences. There is also what researchers call a “dose-response relationship,” meaning that as children experience more traumatic events, the negative impacts get worse. Children who are continuously exposed to trauma can experience developmental and behavioral problems, which may not be recognized as a symptom of their ongoing or residual trauma. These are the children that most need our help.

The trauma can come from many sources these days: community or school violence, abuse or neglect, witnessing domestic violence in the home, exposure to parental substance abuse, and even being removed from one’s home. In some ways, we have started to adapt to this understanding of trauma, such as through the work this committee has done with the Family first Prevention Services Act to move our child welfare system towards a prevention-focused system that works to stabilize and support vulnerable families where possible, and only removing children from their homes as a last resort. However, we must ensure that we continue to inform our work with the latest research on trauma and the impact of trauma on children, so that we can ensure we are providing the best resources and support for these vulnerable children.

If confirmed, how will you ensure that the Administration for Children and Families promotes trauma-informed and trauma-sensitive systems for children?

Answer. Should I be confirmed, the use of trauma-informed and trauma-sensitive systems should continue to be identified as a best practice. All individuals who work with children/youth and parents in our systems should be trained on the identification and care for individuals with trauma. This would also include the parents who were at one time, the child with a high ACE score. Through Jefferson County’s early childhood program, we work with mental health and education systems to identify areas of trauma. Our Head Start has created an innovative therapeutic classroom for the children needing low stimulus and highly trauma-informed teachers. We have also trained all staff who work with children and youth. In addition, we provide trauma informed therapy to any staff who have witnessed horrific situations through their day to day work.

It would be helpful to work with the institutions of higher learning to ensure this training is also provided in degree programs.

Question. How will you ensure that children who must be removed from their caregivers and placed in foster care are not re-traumatized by the child welfare system?

Answer. This is a difficult question and one practitioners have been asking for many years. The Family first Prevention Services Act is a good first step towards reducing trauma of change and lack of stability. There needs to be however, coordinated efforts from multiple systems from human services, health, mental health, education, and others to ensure children are not re-traumatized. Primary prevention efforts to strengthen marriage and families, enhanced supports for schools to identify and care for children, enriched parenthood programs, and further support for foster parents will all assist towards the desired goal. The effort to integrate and collaborate within government and within a community will be critical to these efforts.

Question. How can you ensure that the child welfare system and child welfare workers are supported so that children who present with challenging behaviors can be identified, given appropriate support, and achieve permanency in their placement through reunification, kinship care, or adoption?

Answer. The child welfare system and child welfare workers do not operate in a silo. Identification of the multi-disciplinary teams necessary to adequately care for children with challenging behaviors assists the child welfare worker and the system move towards a successful outcome for children and families. It is critical that the system have standards for best practice, available resources, appropriate case load numbers, and clear expectations for professional behavior. The ability to legally share data with other helping systems assists families as well as workers. In my current position, we work hard to ensure that our child welfare workers are adequately paid, that we are an “Employer of Choice” for the workers, and that they are best trained and supported during difficult cases. We provide stress relief through therapy and other activities and stress a healthy work/life balance. Our staff are the most valuable resource to ensure children and families are safe and healthy. They must have the tools and resources to do the job.
CHILD WELFARE

Question. We have a responsibility to protect children in foster care, because we—society—have accepted the responsibility to care for them and ensure their well-being until they can be reunited with their family or found another permanent home.

I have heard multiple reports that the child welfare system is being particularly strained by the opioid epidemic, and the number of children needing services due to parents with substance use disorders. If confirmed, how do you plan to support caregivers and children impacted by the opioid epidemic who intersect with the child welfare system?

Answer. Parental substance abuse has impacted many children and families throughout our country with the opioid epidemic exacerbating the number of children affected by this crisis. Preventative measures, access to (successful) treatment opportunities for parents, and ongoing monitoring are critical to support children in homes where a parent struggles with substance abuse. It is also important to strengthen in-patient programs that keep children and parents together in cases where this is possible and in the best interest of the child.

Successful support networks must be identified in localities to provide the best support to a caregiver with an addiction to ensure sobriety throughout his or her lifetime. Substance abuse cannot be addressed adequately without also looking at the self-medicating issues around mental health. In addition to treatment, primary prevention to address substance abuse prior to addiction is paramount to ensure less families suffer the challenges that come with substance abuse. Addiction cannot be addressed in a silo and, if confirmed, I look forward to working with SAMHSA and CMS, and with our State and local partners to identify innovative programs that work for families.

Question. How do you plan to enhance interstate collaboration and sharing of child welfare best practices?

Answer. Should I be confirmed, I would encourage continued collaboration with our non-profit partners (NGOs) such as the Alliance for Strong Families and Communities, American Public Human Services Association and their affiliate National Association for Public Child Welfare Agencies, Casey Family Programs, Annie E. Casey, the Child Welfare League, State and local partners, and so many more to continue an integrated approach to enhance best practices and share in peer monitoring and reviews between child welfare departments. The multitude of organizations who deeply care about our families and children will be essential to the success of our child welfare practices.

Question. How do you plan to increase access to mental health and behavioral health services for children in foster care?

Answer. Should I be confirmed, I will coordinate closely with the offices in ACF as well as with our partner agencies CMS and SAMHSA on the issue of mental health and behavioral health services. Enhancing the care and access in mental and behavioral health is critical for the success of our families and children.

QUESTIONS SUBMITTED BY HON. RON WYDEN

INTERPRETATION AND ENFORCEMENT OF FEDERAL LAW

Question. Mrs. Johnson, if confirmed, there is a Federal law you will be responsible for enforcing that restricts the use of title IV–E funds to support the placement of foster children in facilities used primarily for juvenile detention. Dozens of groups advocating for children say you shouldn’t place foster children in detention facilities. And in my view, Federal law is clear. Foster care funds cannot be used for this purpose.

How would you interpret the Federal restriction on the placement of foster youth in facilities that operate primarily for juvenile detention? Please be specific in describing your views on the types of characteristics and caseload makeup that should determine whether a facility operates in such a way.

Answer. The Federal restriction on the placement of foster youth in facilities that operate primarily for juvenile detention is clear. States determine and fund detention in ways that are different than a Residential Child Care Facility. The licensing to be a Residential Child Care Facility is also thorough and clear. I would follow
the law regarding the use of title IV–E funding and, should there be areas of con-
cern, would work with Congress to clarify the placements, purpose, and funding.

It is clear that using title IV–E funds to support the placement of foster children
in residential child care facilities is allowable. What could use more clarity is the
response to behaviors of our youth who may have been abused and/or neglected but
who are acting out as teens, sometimes in ways that would appear delinquent. If
confirmed, it would be my goal that these youth, if possible not end up in a high-
end system of detention. It is critical that all children and youth in our systems be
treated so that they can be cared for in a normalized manner to become successful
and healthy adults. This should also include the priority of the least restrictive envi-
ronment, and stable educational efforts.

BIPARTISAN FOSTER CARE REPORT

Question. Mrs. Johnson, Chairman Hatch’s oversight and human services policy
staff spent 2 1⁄2 years with my team investigating the expanding role of privatized
foster care services in many States. You had a productive conversation with the bi-
partisan committee’s staff about the report’s findings during your due diligence meet-
ings. Included in the report were policy recommendations for the States and Tribes,
the Department of Health and Human Services (HHS) and for Congress to consider.
Among the recommendations for HHS, establishing a common definition for thera-
peutic foster care (TFC), aiding States to accurately collect provider-specific out-
comes data (consistent with AFCARS, NCANDS, and the CFSRs), and establishing
maximum caseload guidelines were included. As part of the committee’s investiga-
tion, staff repeatedly found instances where States lacked definitional consistency
and simply had no feasible way to collect specific data metrics requested by the
committee (and required by Federal law).

Please identify which HHS-specific policy recommendations outlined in the report
you would consider acting on if confirmed to lead the Administration for Children
and Families (ACF) and which you would not and explain why.

Answer. The recommendations provided for States and Tribes, Department of
Health and Human Services, and Congress are thorough and necessary. Should I
be confirmed, rather than chose a few recommendations, I would want to prioritize
the recommendations and evaluate the impact of change. The level of oversight for
all placements should be reviewed and issues of oversight identified. The support
for enhanced oversight of foster families to ensure robust background checks would
require the child welfare system access to criminal investigation data bases. This
access would also not only ensure timely placement, it also would reduce multiple
placements due to not having to wait for the background information. I would take
into consideration all recommendations after receiving evaluative results, would pro-
ceed with prioritization and take steps to implement such policies.

QUESTIONS SUBMITTED BY HON. ROBERT MENENDEZ

Question. One of the concerns with programs like Temporary Assistance for Needy
Families (TANF) is that many families who could benefit from the program have
been excluded due to restrictive definitions of eligibility. The President has proposed
deep cuts to TANF in addition to promoting work requirements in Medicaid and
cuts to nutrition programs.

Do you support cuts to TANF?

Can a program be deemed successful if many individuals continue to experience
hardship but are unable to access assistance?

Following up on that question, what plans do you have to help individuals who
fall in the middle ground between eligibility for anti-poverty programs and true
financial stability?

What plans do you have to ensure people are not falling off an assistance cliff as they
work toward financial security?

Answer. If confirmed, I look forward to working with leaders of ACF and the
Office of Management and Budget to build upon what has been learned over the
years and to ensure the TANF program is successful in reducing the number of indi-
viduals who are in poverty and in need of such services as well as to ensure that
funds are used in the most effective manner.
In Jefferson County, we started what is known as the Jeffco Prosperity Project. This effort wraps around individuals who need services to assist them in moving from generational poverty to success. The families and individuals in the project provide the insight and guidance on barriers and what should change in government systems. Non-profit organizations, businesses, faith-based entities, local communities, and the government departments all participate in neutralizing the issues around eligibility and especially the cliff effect. These efforts are done in a whole family/multi-generation model to ensure success for parents and break the cycle of poverty for the children. Employment, education, training, child care assistance, substance abuse treatment, physical, oral, and mental health care, housing, financial assistance, transportation, food, and much more is needed to move from abject poverty to self-sufficiency. Should I be confirmed, I would work with Congress to ensure that TANF assists individuals to successfully move towards true financial stability, out of poverty with dignity and with respect.

Question. As part of the Bipartisan Budget Act of 2018, Congress passed the Family First Prevention Services Act. Can you commit to ensuring Family First will be fully implemented in the manner intended by its bipartisan supporters in Congress?

Answer. Yes, should I be confirmed, I will commit to ensuring the Family First Prevention Services Act is fully implemented in the manner intended by its bipartisan supporters in Congress.

Question. Will you also commit to providing this committee updates on the implementation process?

Answer. Yes, I will commit to providing updates on the implementation process of the FFPSA.

Question. The opioid epidemic has taken a toll on the country in many ways, and one of the most devastating has been the impact on children. You’ve mentioned previously working to break down silos—what opportunities do you see to coordinate amongst the various Departments and with States to improve outcomes for children caught up in the opioid epidemic?

Answer. Most of our systems, health, mental health, education, substance abuse, housing, human services, judicial, and others can all have an impact on primary prevention as well as identification of issues before they become a crisis. No one system can solely handle the opioid epidemic or other issues by itself. Should I be confirmed, I would be excited about the opportunity to work with Federal agencies, States and local entities, HHS and ACF departments. Collaboration and integration to move toward common goals, reduce duplication of efforts and prioritize person centered, family serving efforts could promote and enhance true outcomes for all people.

QUESTIONS SUBMITTED BY HON. DEBBIE STABENOW

Question. Funding for early childhood education is one of the best Federal investments we can make, and I am a strong supporter of Head Start and Early Head Start.

Can you describe any previous experience overseeing or working with Head Start grantees?

Answer. I was the Head Start State Collaboration Director when I worked for Governor Bill Owens. I currently manage a Head Start in Jefferson County. Head Start is the center of all our poverty initiatives and the lead on the Jeffco Prosperity Project. In this project we are currently working with Head Start families until their children graduate from High School. At the same time, we work with the family to reach full self-sufficiency.

Question. What changes would you recommend at the Federal level, if any? Would you recommend increased Federal investment in the program?

Answer. Head Start is an anti-poverty initiative, not just an early learning initiative. Should I be confirmed, I would like to look at the funding for both Early Head Start and Head Start before recommending additional funding. I would also like to look at the standards and guidelines to ensure we are not placing unnecessary burdens on the staff. The care of the family and children is of utmost importance.

Question. I was proud to work with the HHS Administration for Children and Families to expand Head Start services in Flint in response to the water crisis.
The comprehensive services that Head Start and Early Head Start provide, including developmental screenings, referral to health-care services, and family services are particularly important in helping children overcome lead exposure.

Can you elaborate on the role the agencies you would be overseeing should play in responding to a public health crisis like the one in Flint?

Answer. Should I be confirmed, the people serving agencies I would oversee could play a significant role in responding to an issue such as the one in Flint. Cooperation and coordination with other agencies, providing information and services to families and children can be very helpful. Guidance and assistance to the community, as requested by a community would be a priority.

Question. Do you have experience working with programs funded through the SSBG?

Answer. Yes, I have experience working with programs funded through the SSBG.

Question. The FY 2019 HHS Budget eliminates funding for SSBG, which would leave many States, including Michigan, with tough choices on where to cut services.

In Michigan, the SSBG is administered by the Michigan Department of Health and Human Services (MDHHS) and funds the following programs: children’s foster care, adult protective services, runaway and homeless youth services, domestic and sexual violence prevention and treatment, and multicultural services.

What do you believe is the role of the SSBG, and what changes would you recommend?

Answer. In my current role, SSBG has been used to provide many innovative senior services. Should I be confirmed, I would need to review SSBG to provide recommended changes.

Question. Do you support eliminating the SSBG?

Answer. As a nominee I have not been involved with the policy decision-making process for the development of the President’s budget, therefore I cannot speak to the policy rationale.

Question. The Community Services Block Grant (CSBG) is another vital program States use to help lessen poverty and address the needs of low-income individuals.

Michigan’s Federal CSBG allocation is about $23 million per year, and the State uses the money to help families achieve self-sufficiency, promote financial wellness, and find meaningful employment.

In Michigan, the CSBG has eliminated nearly 556,640 poverty conditions, helped service more than 1.9 million volunteer hours, and served 182,000 people, 50,000 being children. Unfortunately, this program is zeroed out in the administration’s proposed budget.

Do you support funding the CSBG? Given your substantial experience in State government, how would you expect States to respond to the elimination of the CSBG?

Answer. In my current role, CSBG has been used to assist with issues impacting homelessness and poverty. However, as a nominee I have not been involved with the policy decision-making process for the development of the President’s budget, therefore I cannot speak to the policy rationale.
youth and giving them a chance to get ahead, the Federal Government needs key information from States, which run each individual program.

For example, if you want to do a better job of keeping foster kids out of the world of sex trafficking, you need information about how widespread a problem trafficking is today, who it’s victimizing, and so on.

Over 3 years ago, Congress passed a bipartisan law to fight trafficking, and HHS finally got underway revamping its out-of-date foster care reporting requirements, including reporting on sex trafficking. In fact, the last time HHS updated any of these requirements was in 1993. Those updates were supposed to be getting up and running right about now. But just in the last few days, the Trump administration made the baffling decision to step in and block the Administration for Children and Families from moving forward with implementation.

Now, I’ve warned the Trump administration against interfering with this process. By torpedoing these rules, the Trump administration is standing in the way of helping some of the most vulnerable kids in the country. But they’ve got their deregulation blinders on, and they decided not to listen to any warnings about how this action could hurt kids.

If confirmed, Mrs. Johnson would be in charge of these decisions, so I plan to discuss this further with her today. But I want to make one thing clear: I am not going to let this go. This committee has put in a lot of bipartisan work on child welfare, including very recently passing the biggest improvements to the system in decades. I want to be able to continue this type of bipartisan work, including with the administration.

I’ve also got serious concerns about the fact that Mrs. Johnson has supported legislation to allow Colorado to send foster kids to juvenile detention facilities. While this may be a common practice in Colorado, and somewhat similar approaches may be taken in other States, it’s contrary to Federal law as I read it. If the rules on this need updating, policy makers ought to make that happen. But this is an area of the law that Ms. Johnson will be in charge of interpreting and enforcing if she is confirmed. I look forward to hearing from her directly about this issues in question.

With that, I’ll turn to Mr. Bartrum’s nomination to be the HHS Assistant Secretary for Financial Resources. This is a big job that has a lot of influence over how HHS spends taxpayer dollars.

To say the person in this role is just a “numbers guy” is a serious understatement. When you’ve got major decisions affecting the spending of Medicare, Medicaid, the Children’s Health program, and more coming across your desk, you’ve got a lot of influence over policy. That’s particularly relevant in the Trump administration, which takes a slash-and-burn approach to health-care budgeting no matter how many millions of Americans it stands to harm.

Mr. Bartrum has a long career as a public servant, and his qualifications are strong. But these bigger questions dealing with health-care budgeting are what I’m hoping to discuss with him today.

I want to thank both nominees for being willing to serve and appearing before the committee today.
March 20, 2018

The Honorable Orrin G. Hatch
Chairman
Committee on Finance
U.S. Senate
219 Dirksen Senate Office Building
Washington, DC 20510

The Honorable Ron Wyden
Ranking Member
Committee on Finance
U.S. Senate
219 Dirksen Senate Office Building
Washington, DC 20510

Dear Chairman Hatch and Ranking Member Wyden:

The American Public Human Services Association (APHSA) is a bipartisan, non-profit membership organization representing state and local health and human service agencies through their top-level leadership. Through our member network and three national Collaborative Centers, APHSA seeks to influence modern policies and practices that support the health and well-being of all children and families and that lead to stronger communities.

On behalf of APHSA, it is my pleasure to recommend Lynn A. Johnson for the Assistant Secretary for Family Support appointment with the U.S. Department of Health and Human Services.

Mrs. Johnson's expertise and wisdom in the field of human services, drawn from her work with three administrations of Governors in Colorado and national leadership positions, is well known. Mrs. Johnson has served as a leader in APHSA's Local Council and the National Association of Public Child Welfare Administrators. Mrs. Johnson has strong connections to state and local health and human services leaders across the country and is perfectly positioned to engage these stakeholders in developing new solutions to address the changing needs of children, youth, and families.

Mrs. Johnson is a renowned visionary and innovator, implementing new program models that serve families. She has a proven record of developing cross-cutting programs that focus simultaneously on the needs of parents and children to ensure the whole family's success. We trust that she will use this opportunity to identify solutions in communities across the country and address the administrative burdens, unnecessary rules and regulations that get in the way of success for families.

Mrs. Johnson works with sincere motivation to serve communities and citizens. Her dependability and drive are character traits that cannot be taught and are crucial to any leadership position. She continually demonstrates dedication to going above and beyond and exhibits her contributions to change lives for the better. Not only does she take initiative to learn the regulations and intricacies of human services with phenomenal expertise, she also takes the time to learn related systems and understand how systems can work together to achieve efficient and effective solutions.

We urge you to quickly confirm Lynn A. Johnson as the Assistant Secretary for Family Support appointment with the U.S. Department of Health and Human Services. We have full confidence in Mrs. Johnson's ability to support state and local
human services leaders and develop programs and systems that will make a difference in the lives of children and families.

Sincerely,
Tracy Wareing Evans
President and CEO