



U.S. Representative Tom Price, M.D.
Sixth Congressional District of Georgia
3730 Roswell Road, Suite 50
Marietta, GA 30062
Phone: (770) 565-4990
Fax: (770) 565-7570

DATE: 16 Nov 2005 FAX #: 202-190-7380
TO: HHS - Congressional Liaison's office
FROM: Jeff Hamling _____
Tina McIntosh X _____
Debbie DeLong _____
Blair Simpson _____

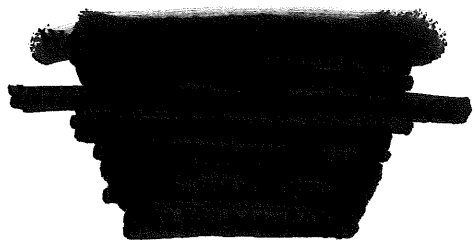
RE: Inquiry from [redacted] concerning
lack of flu vaccines.

Thank you for assisting in this matter.
Tina

I can be reached at the above numbers or at tina.mcintosh2@mail.house.gov.

There are 2 pages to this fax.

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November 9, 2005

NOV 1 2005

Representative Tom Price
3730 Roswell Road, Suite 50
Marietta, GA 30062

Dear Representative Price:

This letter comes to you because I am very frustrated and I am not sure where else to turn. I am a physician in private practice specializing in internal medicine with an emphasis in geriatrics. I take care of many elderly frail patients with multiple medical problems. Though I am responsible for the healthcare of some of our most vulnerable high-risk patients, for the second year now I have been unable to immunize them against influenza because the vaccine is just not available. Last year I understand there was a true shortage of vaccine. This year however (and to some extent last year) there is a severe shortage of vaccine created by large buying cartels of grocery stores and such that is effectively keeping the vaccine away from physicians and hospitals.

My practice is not alone in this crisis. The oncologists, the infectious disease specialists, the pulmonary specialists, the pediatricians, i.e. everyone in our community responsible for the healthcare of our most vulnerable persons cannot get the vaccine. But Krogers and Walgreens that buy millions of doses nationwide have plenty to spare and are selling it to all comers. It is not right that my eighty and ninety year old patients have to get on their walkers or into wheelchairs and wait in line two hours or more to receive a vaccine; but, I simply do not have it available to administer in the office during their routine checkups.

I am therefore seeking legislative initiatives and would like your support to see that vaccines (and conceivably other critical healthcare commodities) are distributed first to the responsible healthcare providers in this nation before large business enterprises are allowed to usurp the supplies. I have no problem with the philosophy of mass immunizations-- I just believe that those who care for the sickest members of our society all year should have unlimited access to the vaccines that they need first before the seasonal profiteers can corner the market.

I am quite frankly surprised that the FDA will allow grocery stores (even with nurses) to administer vaccines. The first time someone has an anaphylactic reaction and dies in K-mart, I fear that corporate America will pay a severe price for their avarice-- but not so dear a price as the patient. Please help me with the public education and legislative initiatives to redress this problem.

Sincerely,

[Handwritten signature]



211 312
NIF

260 561



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

FEE 15 2006

The Honorable Tom Price
Member, U.S. House of Representatives
3730 Roswell Road, Suite 50
Marietta, Georgia 30062

Dear Mr. Price:

Thank you for your letter to the U.S. Department of Health and Human Services on behalf of your constituent, [REDACTED], regarding the availability of influenza (flu) vaccine for the 2005-2006 flu season. Please excuse the delay of this response.

The Centers for Disease Control and Prevention (CDC) works to influence flu vaccine distribution and use through recommendations, guidelines, and extensive collaborations. However, flu vaccine distribution and administration is a mostly private sector enterprise.

Four manufacturers are providing flu vaccine in the United States this season: Chiron, GlaxoSmithKline, MedImmune, and sanofi pasteur. More than 83 million doses have been produced this season, which is substantially greater than the 61 million doses available last year and nearly equal to the maximum number of flu vaccine doses ever distributed in the United States within a single flu season. More than 78 million doses have now been distributed. Additional doses are currently available from FFF Enterprise, Inc. (contact Kit Bacon-Gressit, 800-843-7477, Ext. 1359 or [760] 522-1064), and from sanofi pasteur at www.vaccineshoppe.com or 800-822-2463. The very last doses of flu vaccine are currently being produced and will be available as part of the CDC pediatric influenza vaccine stockpile funded by the Vaccines for Children Program.

Despite the total number of doses available this season, however, the delay and decreased production of vaccines by one manufacturer has resulted in a mismatch between supply and demand for flu vaccine. This situation has left a number of healthcare providers, hospitals, long-term care facilities, and vaccine distributors without sufficient vaccine.

CDC has worked closely with state and local public health officials, other federal agencies, and private sector partners, including the National Influenza Vaccine Summit (a collaboration of public, private, and nonprofit organizations involved in flu vaccination in the United States), to plan for and monitor the current flu season. Monitoring has largely focused on tracking flu vaccine production and distribution. The influenza planning team is conducting systematic assessments of vaccine supply problems experienced by various key stakeholders (e.g., state and

local public health officials, private and other providers, facilities that administer flu vaccine, the public, vaccine distributors) to understand the extent and duration of problems associated with vaccine supply and access to flu vaccine this season. Collecting this information will help us evaluate and respond to challenges in the current flu season and to plan for next year's vaccine distribution.

I share the frustration and concern of those who administer flu vaccine each year about not having sufficient supplies. In addition, I understand that vaccination providers face a number of competing issues regarding flu vaccine (i.e., finding a balance between saving vaccine for high-risk persons and minimizing the financial risk because of vaccines that are purchased but not administered).

For those providers whose vaccine supply is currently limited or uncertain, we make the following recommendations:

1. Contact the distributor, manufacturer, pharmacy, or other entity supplying the vaccine to find out how many doses you will receive and the anticipated timeline for delivery.
2. Contact your local or state public health agency to see if they know of any facilities or clinics that may be available to serve priority patients in the community.
3. Consider the nasal spray vaccine (FluMist) for priority and nonpriority patients for whom this vaccine is indicated—healthy, nonpregnant individuals who are 5 to 49 years of age.

An enhanced and stable domestic flu vaccine market is critical to improve the response to both annual and pandemic influenza. We continually work to improve our response to vaccine shortages and to unusual situations, such as the one occurring this season when the timing of demand and supply is not synchronized. We will also steadily work with the manufacturers and our partners in finding solutions to the challenges we face related to flu vaccine supplies.

I appreciate your interest in this important public health issue and hope this information is helpful. A copy of this correspondence is being mailed to your Washington, D.C. office.

Sincerely,


Julie Louise Gerberding, M.D., M.P.H.
Director

*** RECEIVED ***
Aug 08, 2011 11:53:21 WS#20
OSNUM: 060820111030
OFFICE OF THE SECRETARY
CORRESPONDENCE
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Congress of the United States

July 28, 2011

RECEIVED

3-8 4 11 24

OFFICE
OF THE
SECRETARY

The Honorable Kathleen Sebelius
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20001

Dear Secretary Sebelius,

We are writing to discuss the Centers for Disease Control and Prevention located in Atlanta, Georgia. Recognized around the globe as the preeminent public health organization, CDC is important to our nation and the world, and, as a major part of the local economy, we are proud to have it located in our backyard.

The entire Georgia Congressional delegation was recently invited by the Governor of Georgia, Nathan Deal, and the CDC to convene in Atlanta and tour CDC's facilities. At this meeting, we openly discussed how CDC is vital to keeping Americans safe, saving lives, and saving money.

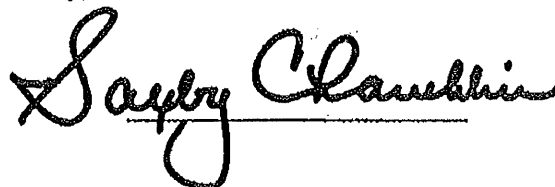

We appreciate CDC's willingness to showcase its exceptional work and allow for an open-ended discussion regarding CDC's core mission. As a delegation, we recognize the significance of the CDC's ongoing efforts, especially with regard to its core mission of protecting public health. The work of CDC directly supports work in each of our communities—as well as every Congressional district in the country—to safeguard our nation from major health threats, help Americans live longer, healthier lives, and ensure a healthy and productive U.S. economy.

We also recognize the challenging fiscal times faced by all and that we must make difficult decisions regarding our nation's deficit and future spending. Despite recent cuts, CDC should be commended for its efforts to prioritize key programs and maintain efficiency. However, to continue to be the global leader in public health, it must remain on a track of sustainability.

The work of CDC in each of our communities is a unique and critical function of government, and there is no private entity that can ensure continued vigilance against deadly and costly diseases. We understand that without an adequate public investment, CDC's capacity to safeguard our nation from major health threats will deteriorate.

We all have a shared responsibility as our country's leaders to do our utmost to ensure our country remains on a sound fiscal footing for generations to come, but we also must support and protect our nation's public health safety net. We are grateful for the opportunity to be educated about the critical work of the CDC, and as fellow leaders, we are pleased to join you in protecting its ongoing mission.

Sincerely,



*** RECEIVED ***
Aug 08, 2011 11:53:21 WS# 20
OSNUM: 090820111030
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John Lewis

Brie Simpson

Maura Davis

Austi Scott

Heidi Johnson

Tom Scott

Rob Woodall

Ray Bump

Jan Bann

CC: The Honorable John Boehner
The Honorable Leader Harry Reid
The Honorable Nancy Pelosi
The Honorable Mitch McConnell
CDC Director Tom Frieden

Congress of the United States
Washington, DC 20515

~~1152609~~
2314762

October 21, 2014

President Barack Obama
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear President Obama:

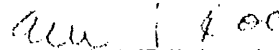
As doctors and nurses, we have been closely monitoring the growing Ebola epidemic in West Africa with concern. The transmission of Ebola to two health professionals who helped care for Thomas Duncan is extremely concerning, as is the possibility that many more Americans were potentially exposed to the virus by these individuals. Containment is the key to stopping the spread of this highly contagious and deadly disease, and we strongly urge your administration to consider implementing a temporary travel ban for individuals who are citizens of, or traveled to, affected countries in West Africa. For American citizens who have been exposed to Ebola, we support the recommended 21-day quarantine before they can enter the country.

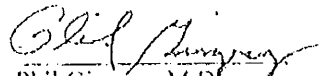
We understand and support the continued flow of aid workers and supplies to control the spread of Ebola at its source, but temporarily restricting entry to the United States for individuals from --or who traveled to--affected countries could limit the possible introduction of additional individuals carrying the virus. We strongly support continued American leadership to help the affected countries in West Africa combat this deadly disease, and urge other members of the global community to redouble their efforts.

Yet we must not lose sight of the fact that Ebola has reached America and has been transmitted on our soil, despite efforts to prevent this from occurring. Already, we have expanded the scope of our preventive measures because initial protocols were insufficient to stop the disease from spreading. To assuage rising public anxiety about a potential health crisis--and to ensure national preparedness if the worst should happen--we urge your administration to take proactive steps to educate, equip, and train public health authorities to effectively contain this disease.

We look forward to working with your administration and public health officials in educating citizens and health professionals on Ebola as we bend the curve in the spread of this disease and strive to protect American lives both at home and abroad.

Sincerely,


Phil Roe, M.D.
Member of Congress


Phil Gingrey, M.D.
Member of Congress

Diane Black

Diane Black, R.N.
Member of Congress

John Fleming

John Fleming, M.D.
Member of Congress

Dan Benishek

Dan Benishek, M.D.
Member of Congress

Charles Boustany

Charles Boustany, M.D.
Member of Congress

Paul Brown

Paul Brown, M.D.
Member of Congress

Larry Bueshon

Larry Bueshon, M.D.
Member of Congress

Michael C. Burgess

Michael C. Burgess, M.D.
Member of Congress

Bill Cassidy

Bill Cassidy, M.D.
Member of Congress

Scott DesJarlais

Scott DesJarlais, M.D.
Member of Congress

Renee Ellmers

Renee Ellmers, R.N.
Member of Congress

Paul A. Gosar

Paul A. Gosar, D.D.S.
Member of Congress

Abdy Harris

Abdy Harris, M.D.
Member of Congress

Tom Price

Tom Price, M.D.
Member of Congress

Brad Wenstrup

Brad Wenstrup, D.P.M.
Member of Congress

*** RECEIVED ***
Oct 15, 2010 14:17:52 WS# 20
OSNUM: 101620101054
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Congress of the United States
Washington, DC 20515

2083879
FYI
to CDC

October 12, 2010

The Honorable Kathleen Sebelius
Secretary
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Secretary Sebelius:

As members of Congress from the State of Georgia, we are writing today to express our concern regarding the recent distribution of \$25 million in emergency supplemental funding for the Ryan White AIDS Drug Assistance Program (ADAP). On August 24, 2010, Georgia was awarded \$731,614 in additional ADAP funding.

On July 1, 2010, Georgia's ADAP initiated a waiting list for access to life-sustaining HIV medications. Cost containment strategies have been in place for a significant period of time prior to closing enrollment to this important program.

Furthermore, Georgia's waiting list has grown at a faster rate than any other waiting list in the country. As of September 23, 2010 the waiting list stands at 553 people, making it the second largest waiting list in the country.

While we understand that ADAPs throughout the country are in financial crisis, it is difficult for us to grasp how nine states would qualify for a larger share of funding than Georgia. What is even more troubling is that many of these states did not have an active waiting list at the time the funds were distributed.

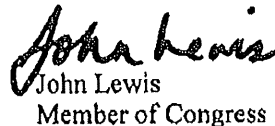
We would like to have information on the methodology used for this distribution and the formula put in place to ensure that states such as Georgia would be treated equitably.

On behalf of our constituents, we are also requesting a copy of the application that was submitted from Georgia along with the score and comments assigned after review.

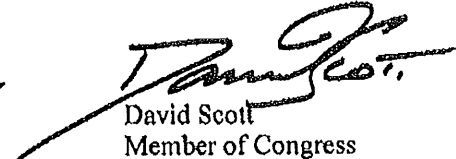
Sincerely



Henry C. "Hank" Johnson
Member of Congress



John Lewis
Member of Congress



David Scott
Member of Congress

Sanford D. Bishop, Jr.
Sanford D. Bishop, Jr.
Member of Congress

Tom Price
Tom Price
Member of Congress

John Linder
John Linder
Member of Congress

Paul Broun
Paul Broun
Member of Congress

John Barrow
John Barrow
Member of Congress

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Oct. 15, 2008 2:20PM

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No. 0711 RECEIVED P. 2
Oct 16, 2008 15:20:41 VWS# 22
OSNUM: 101620081045
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CORRESPONDENCE
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Congress of the United States
Washington, DC 20515

October 7, 2008

The Honorable Mike Leavitt
Secretary
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Mr. Secretary:

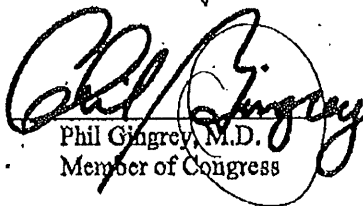
We write to express our concern with the recent recommendation by the U.S. Advisory Committee on Immunization Practices (ACIP) to include the human papillomavirus (HPV) vaccine among the required vaccines for any immigrant seeking adjustment of status to permanent resident. Accordingly, we respectfully ask that the HPV vaccine be removed from this list of required vaccines.

First, while we fully recognize the need to combat the spread of communicable diseases through vaccines, HPV is fundamentally different from the other diseases for which ACIP recommends vaccines. Unlike influenza or hepatitis, HPV cannot be contracted through casual contact, but rather only through sexual contact. Under the ACIP age guidelines, however, girls as young as 11 could be required to receive an HPV vaccine.

Additionally, Judicial Watch, a Washington-based public interest group, recently reported that there have been close to 9,000 health complaints linked to Gardasil – the FDA-approved HPV vaccine. These complaints have surfaced because recipients of the vaccine have experienced symptoms ranging from massive wart outbreaks to paralysis, and – in 18 cases – death. Given the potential risks and possible adverse reactions, women and parents (in the case of minors) should be able to make an informed decision as to whether or not this vaccine should be administered.

In light of these concerns, we firmly believe it is inappropriate to make HPV vaccination mandatory for any young girl or woman – whether a citizen or an immigrant. The decision to receive this vaccine ultimately should rest with the patient or guardian. Again, we respectfully request that you consider reversing this decision by the ACIP.

Sincerely,


Phil Gingrey, M.D.
Member of Congress



Joseph R. Pitts
Member of Congress


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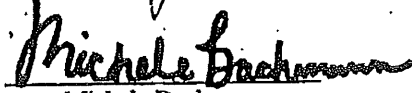
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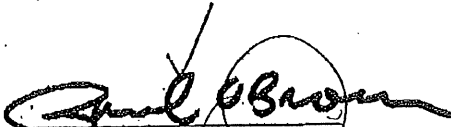
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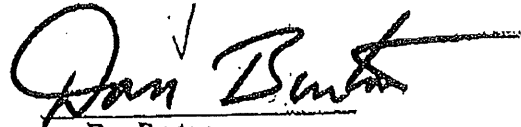

Rodney Alexander
Member of Congress

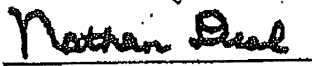

Roscoe Bartlett
Member of Congress



Michele Bachmann
Member of Congress



Marsha Blackburn
Member of Congress

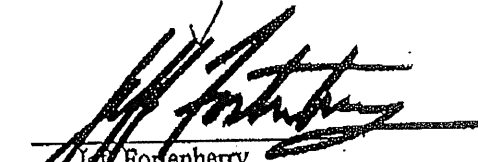

Paul Brown, M.D.
Member of Congress

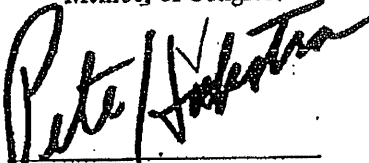

Dan Burton
Member of Congress

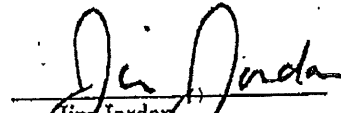

Nathan Deal
Member of Congress



Ann Emerson
Member of Congress

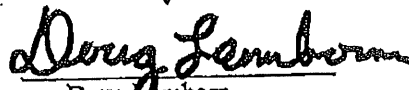

Mary Fallin
Member of Congress


Jeff Fortenberry
Member of Congress

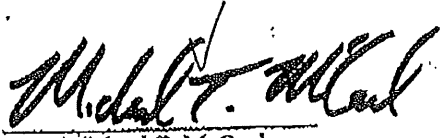

Pete Hoekstra
Member of Congress


Jim Jordan
Member of Congress


Jack Kingston
Member of Congress


Doug Lamborn
Member of Congress

Oct. 15. 2008 2:21PM



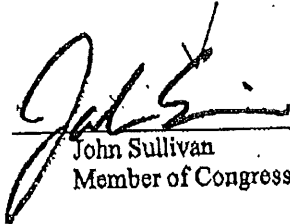
Michael T. McCaul
Member of Congress



Ron Paul M.D.
Member of Congress



Bill Sali
Member of Congress



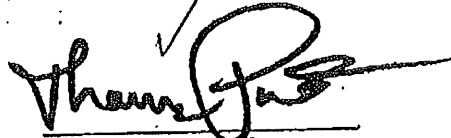
John Sullivan
Member of Congress

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No. 0711 P. 4



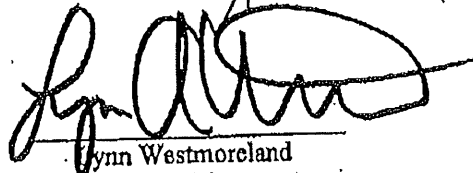
Marilyn Musgrave
Member of Congress



Tom Price, M.D.
Member of Congress



Chris Smith
Member of Congress



Lynn Westmoreland
Member of Congress



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

JAN 12 2009

The Honorable Tom Price
House of Representatives
Washington, D.C. 20515

Dear Mr. Price:

Secretary Leavitt has asked me to thank you for your letter expressing concerns regarding the inclusion of the human papillomavirus (HPV) vaccine as a requirement for immigrants seeking adjustment of status to permanent U.S. resident status. He has asked me to respond directly to you. Please excuse the delay of this response. We appreciate the opportunity to provide you with this information.

The Advisory Committee on Immunization Practices (ACIP) develops written recommendations for the routine administration of vaccines to children and civilian adults in the United States. ACIP recommendations that are adopted by the Centers for Disease Control and Prevention (CDC) — and by extension, the Department of Health and Human Services — serve as standards of medical practice and do not constitute legal requirements for vaccination of U.S. civilians. However, the Immigration and Nationality Act (INA) requires immigrants and individuals seeking permanent residence to the United States to present documentation of having received vaccination against vaccine-preventable diseases, which shall include at least the following diseases: mumps, measles, rubella, polio, tetanus and diphtheria toxoids, pertussis, haemophilus influenzae type b, hepatitis B, and any other vaccinations against vaccine-preventable diseases recommended by ACIP. Based on this statute, all routine immunization recommendations made by ACIP for the U.S. civilian population have been required for immigrant visa applicants. We are currently reviewing the process used for implementing the INA vaccination mandate.

HPV infection is very common; more than 80% of individuals are expected to be exposed to HPV at some point in their lives. While most infections clear, some persist and can cause cervical and other types of cancers. The HPV vaccine is highly effective in preventing infection with four types of HPV; two of these types cause 90% of genital warts and 70% of cervical cancer.

Page 2 – The Honorable Tom Price

Although there have been reports of concerns about the safety of the HPV vaccine in the media, current scientific data do not indicate an increased risk of side effects after vaccination.

On October 22, 2008, CDC presented ACIP with data from the surveillance as well as a post-marketing safety study of the HPV vaccine. Twenty-seven deaths had been reported to the Food and Drug Administration- and CDC-administered Vaccine Adverse Event Reporting System (VAERS) in women who received HPV vaccine. However, no common pattern to these deaths was detected that would suggest they were caused by the vaccine. In cases where autopsy, death certificate, and medical records were available, the cause of death was explained by factors other than the vaccine.

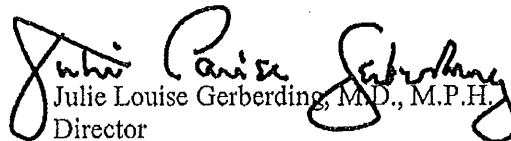
VAERS is an open submission process and may be submitted by anyone, including physicians, nurses, parents, and patients. When evaluating VAERS data, it is important to note that for any reported event, no cause and effect relationship has been established. VAERS is interested in all potential associations between vaccines and adverse events. Therefore, VAERS collects data on any adverse event following vaccination, be it coincidental or truly caused by a vaccine. The report of an adverse event to VAERS is not documentation that a vaccine caused the event.

CDC's Vaccine Safety Datalink (VSD) project was established in 1990 to improve the evaluation of vaccine safety through epidemiologic studies and involves data from several large managed-care organizations. VSD is designed to assess causal relationships between vaccines and potential adverse events. A VSD study assessed selected potential adverse events following the administration of 375,000 doses of the HPV vaccine from August 20, 2006, to July 20, 2008, in girls and women ages 9 to 26 years. Preliminary results from this study found no increased risk of adverse events among vaccine recipients compared to a similar group of patients who did not receive the vaccine.

Vaccine safety is of the utmost concern to CDC as the nation's public health agency. Monitoring side effects, following HPV vaccination, will continue.

We appreciate your interest in and concern for the nation's health and hope this information is helpful. I also will provide this response to the cosigners of your letter.

Sincerely,


Julie Louise Gerberding, M.D., M.P.H.
Director

*** RECEIVED ***
Mar 16, 2011 11:58:17 WS# 20
OSNUM: 031520111055
OFFICE OF THE SECRETARY
CORRESPONDENCE
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210 1816
FYI

Congress of the United States
Washington, DC 20515

RECEIVED
March 10, 2011

Honorable Margaret A. Hamburg, M.D.
Commissioner
Food and Drug Administration
10903 New Hampshire Avenue
Silver Spring, MD, 20993

2011 MAR 15 A 9:51

THE SECRETARY
CORRESPONDENCE
CONTROL CENTER

Dear Dr. Hamburg,

As you may know, on January 31, 2011, the U.S. Department of Agriculture (USDA) and the Department of Health and Human Services (HHS) released the 2010 Dietary Guidelines for Americans (DGAs). The latest DGAs are "[b]ased on the most recent scientific evidence review" and now become the new foundation for federal nutrition policy and education. In light of these new dietary guidelines, we are writing to ask the Food and Drug Administration (FDA) to consider modifications to its 2004 advice about eating seafood for women who are or might become pregnant, nursing mothers and young children, so that they might be consistent with the overall health messages contained in the DGAs.

Seafood contains healthy nutrients like omega-3s and protein with less than a couple hundred calories per 4-ounce serving. In addition to protecting heart health, omega-3s make up a major part of the brain. Recent studies show babies of moms who eat seafood 2-3 times each week during pregnancy and breastfeeding have better eye and brain development than babies of moms who limit or avoid fish.

USDA and HHS state that "the benefits of consuming seafood far outweigh the risks, even for pregnant women." The guidance emphasizes "the nutritional value of seafood is of particular importance during fetal growth and development, as well as in early infancy and childhood" and recommends "that women who are pregnant or breast-feeding consume at least 8 and up to 12 ounces of a variety of seafood per week." The guidance goes on to recommend that obstetricians and pediatricians "provide guidance to women who are pregnant or breastfeeding to help them make healthy food choices that include seafood."

These health benefits are balanced against concerns expressed in the 2004 FDA advice that certain seafood contains higher levels of methyl mercury that pose risks to an unborn baby or a young child's developing nervous system. While weighing these considerations, the new DGAs note a consistent body of evidence that "the health benefits from consuming a variety of seafood in the amounts recommended outweigh the health risks associated with methyl mercury."

We are pleased that in many ways the new Dietary Guidelines track the 2004 EPA/FDA advice. For example, they both note that fish and shellfish are an important part of a healthy diet and women and children should include appropriate amounts of seafood in their diets. The new DGAs and the 2004 advice both caution against eating four certain fish species containing higher

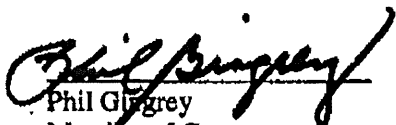
levels of mercury, identify fish low in mercury to include in a healthy diet, and advise women who are pregnant or breast feeding to consume up to 12 ounces of seafood per week.


However, we are concerned that the 2004 FDA advice about eating seafood did not strike the right balance of promoting the benefits of seafood while limiting intake of certain higher-mercury species. Since the FDA advice first came out in 2004, it has been widely misinterpreted as a warning for all Americans, and pregnant women in particular, to simply avoid seafood based on concerns over mercury. As a result, pregnant women have reduced their seafood consumption to an average of only 1.89 oz per week according to a 2008 FDA survey. This is less than one-fourth than the *minimum* amount of seafood now being recommended during pregnancy in the 2010 DGAs.

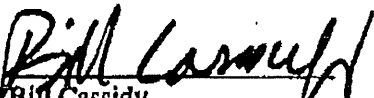
The DGAs emphasize the benefits babies gain when their moms eat at least eight ounces of seafood per week during pregnancy. This is an important health message that was lost in the 2004 advice. We encourage FDA to take the opportunity of the new DGAs to revise its 2004 advice to strike the proper messaging balance and support the findings of the DGAs emphasizing the net or overall health benefits of seafood consumption. When the federal government speaks in different voices about nutrition and food safety, it prevents the DGAs from achieving the full health benefits possible.

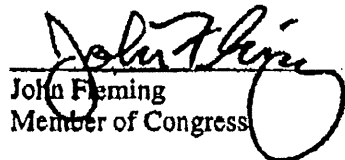
We ask you to create consistency with the current FDA advice on seafood and the DGAs as expeditiously as possible in order that federal agencies can speak in one voice to ensure that mothers and their health care providers receive the best nutrition advice for our next generation.


Sincerely,


Phil Gingrey
Member of Congress



Charles Boustany
Member of Congress


Bill Cassidy
Member of Congress

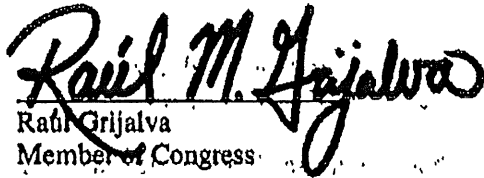

John Fleming
Member of Congress

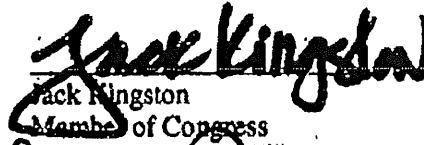

Debbie Wasserman Schultz
Member of Congress

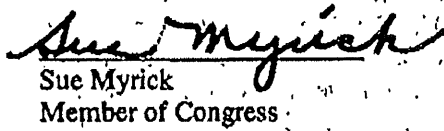

Michael Burgess
Member of Congress

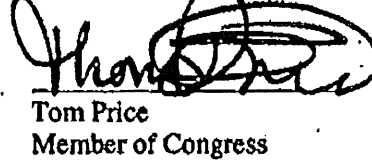

John Dingell
Member of Congress


Barney Frank
Member of Congress

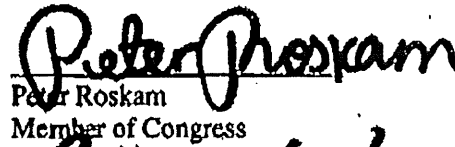

Raul Grijalva
Member of Congress

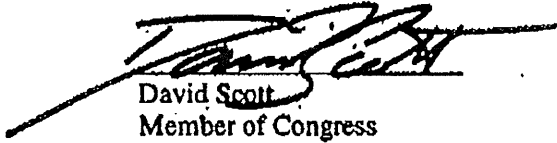

Jack Kingston
Member of Congress

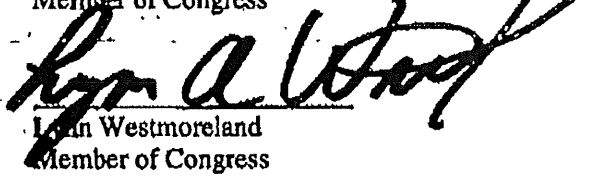

Sue Myrick
Member of Congress


Tom Price
Member of Congress


Laura Richardson
Member of Congress


Peter Roskam
Member of Congress


David Scott
Member of Congress


Lynn Westmoreland
Member of Congress

CC: Honorable Kathleen Sebelius, Secretary of the Health and Human Services
Honorable Tom Vilsack, Secretary of the U.S. Department of Agriculture
Melody Barnes, White House Domestic Policy Council
Julie Moreno, White House Domestic Policy Council
Bruce Reed, Office of the Vice President Joe Biden
Robin Schepper, Office of the First Lady Michelle Obama

HHS took request
over, TF will not
be attending



REP. TOM PRICE, M.D. (R-GA), CHAIRMAN
PAUL TELLER, EXECUTIVE DIRECTOR
424 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515

rsc.pke.house.gov

ph (202) 226-9717 / fax (202) 226-1633

September 8, 2009

Mr. Thomas R. Frieden, M.D., M.P.H.
Director, Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30333

Dear Dr. Frieden:

Commented [11]:

On behalf of the Republican Study Committee (RSC), the of more than 110 social and economic conservatives in the U.S. House of Representatives, I respectfully request an off-the-record meeting with you and various RSC members to discuss issues of mutual concern.

As the House's largest multi-issue caucus, the RSC has become known as a fountain of robust, forward-thinking ideas and bold action. For example, I, along with several dozen of my colleagues, recently introduced the Empowering Patients First Act (H.R. 3400), one solution from the RSC for access to affordable, quality health care for all Americans. Numerous RSC Members have introduced a variety of bills aimed at bolstering the private health insurance market and giving individuals more control and ownership of their insurance.

With health care reform as the leading issue facing Congress and the nation today, and with the impending resurgence of the H1N1 influenza virus, we would appreciate the opportunity to meet with you in person at your earliest convenience about these issues and would greatly value your insight.

We welcome your positive consideration of this request. Please contact RSC Executive Director, Paul Teller, at paul.teller@mail.house.gov or (202) 226-9718 to work out the details. Thank you.

Yours truly,

Rep. Tom Price, M.D.
Chairman, U.S. House of Republican Study Committee

289318

PHIL GINGREY
11TH DISTRICT, GEORGIA
RULES COMMITTEE
POLICY COMMITTEE

119 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-2931 Phone
(202) 225-2941 Fax



Congress of the United States
House of Representatives
Washington, DC 20515

June 26, 2007

DISTRICT OFFICES

219 ROSWELL STREET
MARIEETTA, GA 30050
(770) 423-1776

600 EAST 1ST STREET
ROME, GA 30161
(706) 290-1776

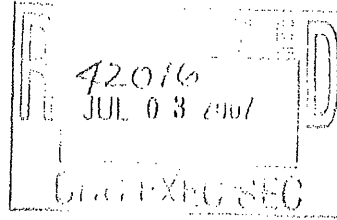
207 NEWMAN STREET, SUITE A
CARROLLTON, GA 30117
(770) 836-8130

LAGRANGE, GA
(706) 812-1776

COLUMBUS, GA
(706) 320-2040

The Honorable Michael Chertoff
Secretary of Homeland Security
Washington, DC 20528

Julie Louise Gerberding, MD, MPH
Director
Centers for Disease Control and Prevention
1600 Clifton Rd
Atlanta, GA 30333



Dear Secretary Chertoff and Director Gerberding,

My colleagues and I write to express serious concern with the spread of illness and disease brought to the United States by illegal immigrants. The federal government and the American people were shocked by the case of Andrew Speaker, an American who traveled to and from the United States while infected with a dangerous strain of tuberculosis ("TB"). At the same time, little is being done about the thousands of illegal immigrants who run across our borders every day – individuals who are not screened for tuberculosis or other communicable diseases.

Immigrants who come to the United States legally are subject to a health examination as part of the process for obtaining a green card. This includes screenings for tuberculosis and other threatening diseases. Unfortunately an estimated 4 million or more illegal border crossings occur each year in the United States. When these illegal border crossers circumvent border ports of entry and the legal immigration process, there is no way to determine if they are infected with potentially dangerous diseases like TB. If we are outraged that one infected U.S. citizen crossed our borders unchecked, shouldn't we be outraged that thousands of persons sneak into the country each day without any health screening at all?

Experts at the Centers for Disease Control and Prevention ("CDC") have acknowledged that immigration is linked to the spread of diseases, stating "immigration is a major force that sustains the incidence of tuberculosis" in the United States and other developed countries. In a March 23, 2007 report, the CDC found that "the proportion of TB cases among foreign-born persons has increased each year since 1993." While the rate of TB infections among U.S. born persons is 2.3 cases per 100,000, the rate of infection for foreign born persons is nearly nine times higher, with 21.9 cases per 100,000 individuals. CDC experts also reported that "for the third consecutive year, more TB cases were reported among Hispanics than any other racial/ethnic population."


WHPDC=0
ATTACHED - 07-31
RE: CDC
WHPDC/ATTACHED
CL
05/16
Gladys
MARS

While the CDC and other entities often do not distinguish between illegal and legal immigrants in their studies, we know that illegal immigrants now comprise a significant proportion of the foreign-born population – perhaps one-third or more. It is not a surprise that the rate of TB infections is highest in the states that attract the most illegal immigrants. For example, the highest rates of TB infections are in such states as California, Texas, Florida, New York, and the District of Columbia.


In addition to TB, we should be concerned about the many other diseases thought to be nearly eradicated in the United States that could be brought back through unchecked immigrants, including hepatitis B, polio, and avian flu, just to name a few.

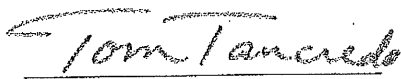
Diseases don't respect borders. Thus illegal immigration is a serious health threat to American citizens. We hope that the incident last week involving Mr. Speaker will serve as a stark reminder to the Department of Homeland Security and Centers for Disease Control and Prevention of the need to ensure that millions of people who lack sufficient health screenings are unable to continue to enter and reside in the United States.

Sincerely,


Rep. Phil Gingrey, MD



Rep. Duncan Hunter

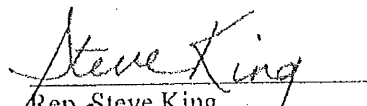

Rep. Tom Price, MD

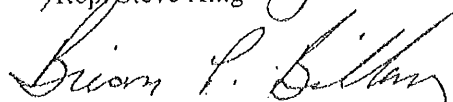

Rep. Tom Tancredo

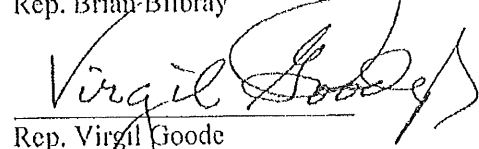

Rep. Sue Myrick

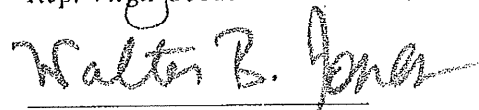

Rep. John Carter


Rep. Lamar Smith


Rep. Steve King


Rep. Brian Bilbray


Rep. Virgil Goode


Rep. Walter Jones


Rep. Candice Miller

Steve Gobot
Mark G

John T. Dalittle

John Klein
Randy Kuhl

Rodney Alexander
Jean Heller

John Bozma

Thaddeus McCowan

Gary Mill

Jeff Miller

John W. Wolf
M. Modest

Price

Scott Monro
[Signature]

Ernie Brown - U.S.A.

Virginia Fox

Virgil Gooden

Anna Hunt

Howard Coble



Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

SEP 18 2007

The Honorable Tom Price, M.D.
House of Representatives
Washington, D.C. 20515

Dear Dr. Price:

Thank you for your letter to Secretary Michael Chertoff, Department of Homeland Security (DHS), and me regarding your concerns about the potential importation of disease into the United States by illegal aliens. I am pleased to respond on behalf of the Centers for Disease Control and Prevention (CDC) and hope that you will please excuse the delay of this response.

CDC works in coordination with other federal, state, local, and international agencies to prevent the importation of infectious diseases into the United States. CDC is responsible for implementing quarantine laws for the United States. CDC has been delegated the statutory authority to take measures that prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the United States. The quarantine regulations addressing the issues that you raise are located in 42 C.F.R. (Code of Federal Regulations), Part 71. These quarantine regulations apply to all persons legally or illegally entering the United States.

Under 42 C.F.R. § 71.32(a), whenever there is reason to believe that a person arriving into the United States is infected with or has been exposed to any of the quarantinable communicable diseases, CDC may isolate, quarantine, or place the person under surveillance. The communicable diseases for which quarantine and isolation are authorized pursuant to section 361(b) of the Public Health Service Act (42 U.S.C. 264(b)), was last revised by Executive Order 13295 on April 4, 2003, as further amended by Executive Order 13375 on April 1, 2005, and includes cholera; diphtheria; infectious tuberculosis; plague; smallpox; yellow fever; viral hemorrhagic fevers (Lassa, Marburg, Ebola, Crimean-Congo, South American, and others not yet isolated or named); severe acute respiratory syndrome (SARS); and influenza viruses that are causing, or have the potential to cause, a pandemic.

CDC has been working closely with DHS component agencies (Customs and Border Protection [CBP] and the Transportation Security Administration) to prevent the importation of disease among all people legally entering the United States. CDC quarantine stations are located at 20 major ports of entry across the United States. Though no staff members are currently located directly at a land-border crossing, CDC staff work closely with CBP at those land border crossings to enforce quarantine regulations. Therefore, CDC staff members have provided ongoing training to our partners in DHS, specifically CBP officials, to identify symptoms of

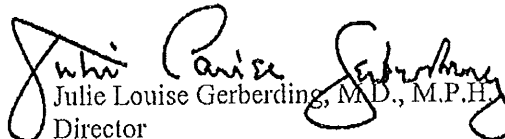
illness through passive screening and to notify the CDC quarantine station in their jurisdiction when a person with a suspected illness is identified. Once notified, Quarantine officers assist in identifying the illness and determining the steps needed to prevent the spread of a communicable disease into the United States.

Individuals who illegally immigrate to the United States elude formal screening processes; however, CDC is developing a partnership with DHS Immigration and Customs Enforcement (ICE) for post-apprehension detection. ICE has the primary responsibility for identifying, apprehending, and deporting illegal aliens. A small percentage of illegal aliens are apprehended by U.S. Border Patrol or ICE officials (not stationed at ports of entry), a fraction of which are sent to ICE detention facilities where they are held for criminal processing and deportation. CDC and ICE are working together to develop continuity of care protocols for illegal aliens who are being treated in ICE detention facilities for active tuberculosis (TB) and will be deported to Mexico.

These protocols would enable CDC to notify Mexican authorities if a patient with active TB is being deported, which may enhance the patient's ability to receive continued care once in Mexico. These discussions are still in the early stages of development and no formal procedure is currently in place.

CDC will continue to work closely with its partners to protect public health. I hope this information is helpful, and I appreciate your interest in this important public health issue. I also will provide this response to the cosigners of your letter.

Sincerely,

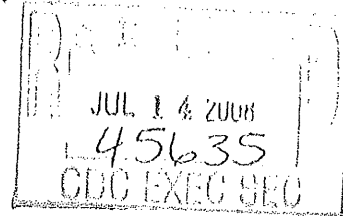

Julie Louise Gerberding, M.D., M.P.H.
Director

303777

Congress of the United States

Washington, DC 20515

July 8, 2008



Dr. Julie Gerberding
Director, Agency for Toxic Substances and Disease Registry
Centers for Disease Control and Prevention
CDC Headquarters
Edward R. Roybal Campus
1600 Clifton Road, Building 21
Floor 12 - Room 12302
MS D14
Atlanta, GA 30333

Dear Dr. Gerberding:

It is our understanding that the Agency for Toxic Substances and Disease Registry (ATSDR) is engaged in a health assessment of the Potomac River Generating Station (PRGS) in Alexandria, Virginia. As you know, PRGS is owned by Mirant Corporation, which is based in Atlanta, Georgia, and has over 380 employees living in our combined districts. As a result, we are very interested in the fact that you are engaged in an analysis of our constituent company because of its direct impact on our constituents' livelihood.

ATSDR is a non-regulatory agency created by Congress to produce toxicological profiles on the 275 substances that are on the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) priority list of hazardous substances, and discern the possible human health effects of these substances. Not only are we concerned that ATSDR is evaluating air pollutants at an exposure level that currently has no standard and a questionable health impact, but we are also concerned that ATSDR may be reaching beyond its Congressional mandate by evaluating a substance, sulfur dioxide, which is not one of the 275 substances on the CERCLA priority list. Nor is the PRGS one of the over 1,200 National Priorities List sites that the EPA has designated as targets for cleanup, and at which ATSDR has a stated mission to determine human health effects.

That being said, as an agency undertaking a scientific review of the environmental air data to evaluate possible health impacts to people in the Alexandria, Virginia, community near PRGS, it is important to ensure that the health assessment is scientifically sound and based on a clear and transparent process that is inclusive of all stakeholders.

While we are pleased to hear that ATSDR has recently begun coordinating with the Environmental Protection Agency (EPA), which has health-based standards in place for air pollutants, we feel it is important that ATSDR and the EPA work together closely to ensure that there is consistency in terms of standards and related levels of concern for

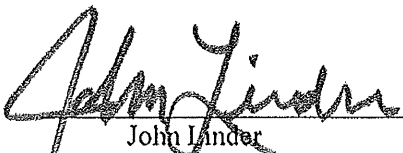
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health impacts. This is especially important given that the EPA is currently engaged in an Integrated Assessment for sulfur dioxide, an area being addressed in the ATSDR health report. Divergent acceptable sulfur dioxide concentration levels would provide contradictory guidance and cause possible delays in implementing necessary health standards – neither are acceptable outcomes.


We hope that ATSDR's report is based on sound data and that it focus on actual monitoring data rather than air dispersion modeling. In addition to monitoring data being collected by ATSDR, it is our understanding that it has also been collected extensively by Mirant with guidance from EPA. As a result, this should be considered in any evaluation of the facility.

We believe that any health reports issued by ATSDR should be based on sound science and actual data. Please send our offices a written update on where ATSDR is in the process. We look forward to following the process as ATSDR moves forward with the development of the health assessment on PRGS, and ask that you keep us informed on a regular basis as this process continues.

Sincerely,



John Linder
Member of Congress
7th District of Georgia



Tom Price
Member of Congress
6th District of Georgia

cc:
Tom Sinks, PhD, Deputy Director, ATSDR
4770 Buford Highway, NE
MS F61
Building 106, Room 108A
Atlanta, GA 30341-3717



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Agency for Toxic Substances
and Disease Registry
Atlanta GA 30333

AUG 15 2003

The Honorable Tom Price
House of Representatives
Washington, D.C. 20515-1006

Dear Mr. Price:

Thank you for your letter regarding the health assessment of the Potomac River Generating Station (PRGS) in Alexandria, Virginia. The Agency for Toxic Substances and Disease Registry (ATSDR) is currently engaged in a public health review of PRGS, owned by the Mirant Corporation. We are performing this review at the request of the Alexandria Health Department.

ATSDR scientists are currently developing our health consultation report for this site. The report will be scientifically sound and based on a clear and transparent process. The report will include monitoring data and air dispersion modeling information, along with other information such as operations information for the site. The monitoring data to be used in the health consultation report have been collected and are being analyzed. Our report will undergo external scientific peer review later this year. It will then be released as a public comment draft available to the community and all other interested stakeholders.


Throughout our work at this site, ATSDR has engaged relevant stakeholders, including Mirant officials. ATSDR has also been coordinating and consulting with Environmental Protection Agency (EPA) colleagues since we began work on this project.

While ATSDR's mandate includes the production of toxicological profiles for substances listed on the priority list of hazardous substances, ATSDR also conducts health assessments and health consultations for all sites proposed for or listed on the National Priorities List (NPL) and in response to petitions (requests) for public health assessments received from the public. ATSDR considers petitions for conducting these evaluations from the public and, occasionally, at the request of Congress. The health consultation for the PRGS is being conducted in response to a petition from public officials of Alexandria, Virginia.

We will keep your offices apprised of developments in our work at PRGS. However, if you would like to discuss this information further, please contact Ms. Barbara A. Rogers in ATSDR's Washington, D.C. office at (202) 245-0590 or BRogers@cdc.gov.

I appreciate your support of this important public health matter and hope this information is helpful. I also will provide this response to Mr. John Linder who cosigned your letter.

Sincerely,


Julie Louise Gerberding, M.D., M.P.H.
Administrator

2185614

Key, Lou Ann (CDC/OD/OCS)

From: Dr. Thomas Frieden (CDC)
Sent: Tuesday, November 01, 2011 1:42 PM
To: thomaspricemc@mail.house.gov
Subject: Information on prescription painkiller overdoses
Attachments: Vital Signs Fact Sheet.pdf

Dear Representative Price:

As follow up to our recent discussions, I thought you would be interested in the attached November issue of CDC's *Vital Signs*. This issue focuses on prescription painkiller overdose, a growing public health problem and the cause of 15,000 deaths in 2008 and almost half a million emergency room visits in 2009.

Overdoses involving prescription painkillers are at epidemic levels and now kill more Americans than heroin and cocaine combined. This death toll will continue to increase unless we take effective action. Improving the way prescription painkillers are prescribed—including more widespread adoption of prescription drug monitoring programs—can reduce the number of people who misuse, abuse, or overdose from these powerful drugs while ensuring that patients who need them have access to safe, effective treatment.

We appreciate your continued support of CDC and your commitment to public health.

Sincerely,

Thomas R. Frieden, M.D., M.P.H.
Director, CDC

Prescription Painkiller Overdoses in the US

15,000



Nearly 15,000 people die every year of overdoses involving prescription painkillers.



1 in 20

In 2010, 1 in 20 people in the US (age 12 or older) reported using prescription painkillers for nonmedical reasons in the past year.



1 Month

Enough prescription painkillers were prescribed in 2010 to medicate every American adult around-the-clock for a month.

Deaths from prescription painkillers* have reached epidemic levels in the past decade. The number of overdose deaths is now greater than those of deaths from heroin and cocaine combined. A big part of the problem is nonmedical use of prescription painkillers—using drugs without a prescription, or using drugs just for the “high” they cause. In 2010, about 12 million Americans (age 12 or older) reported nonmedical use of prescription painkillers in the past year.

Enough prescription painkillers were prescribed in 2010 to medicate every American adult around-the-clock for a month. Although most of these pills were prescribed for a medical purpose, many ended up in the hands of people who misused or abused them.

Improving the way prescription painkillers are prescribed can reduce the number of people who misuse, abuse or overdose from these powerful drugs, while making sure patients have access to safe, effective treatment.

* “Prescription painkillers” refers to opioid or narcotic pain relievers, including drugs such as Vicodin (hydrocodone), OxyContin (oxycodone), Opana (oxymorphone), and methadone.

→ See page 4

Want to learn more? Visit

www.cdc.gov/vitalsigns

Overdose deaths from prescription painkillers have skyrocketed during the past decade.

Problem

Prescription painkiller overdoses are a public health epidemic.

- ◇ Prescription painkiller overdoses killed nearly 15,000 people in the US in 2008. This is more than 3 times the 4,000 people killed by these drugs in 1999.
- ◇ In 2010, about 12 million Americans (age 12 or older) reported nonmedical use of prescription painkillers in the past year.
- ◇ Nearly half a million emergency department visits in 2009 were due to people misusing or abusing prescription painkillers.
- ◇ Nonmedical use of prescription painkillers costs health insurers up to \$72.5 billion annually in direct health care costs.

Certain groups are more likely to abuse or overdose on prescription painkillers.

- ◇ Many more men than women die of overdoses from prescription painkillers.
- ◇ Middle-aged adults have the highest prescription painkiller overdose rates.
- ◇ People in rural counties are about two times as likely to overdose on prescription painkillers as people in big cities.
- ◇ Whites and American Indian or Alaska Natives are more likely to overdose on prescription painkillers.

- ◇ About 1 in 10 American Indian or Alaska Natives age 12 or older used prescription painkillers for nonmedical reasons in the past year, compared to 1 in 20 whites and 1 in 30 blacks.

The supply of prescription painkillers is larger than ever.

- ◇ The quantity of prescription painkillers sold to pharmacies, hospitals, and doctors' offices was 4 times larger in 2010 than in 1999.
- ◇ Many states report problems with "pill mills" where doctors prescribe large quantities of painkillers to people who don't need them medically. Some people also obtain prescriptions from multiple prescribers by "doctor shopping."

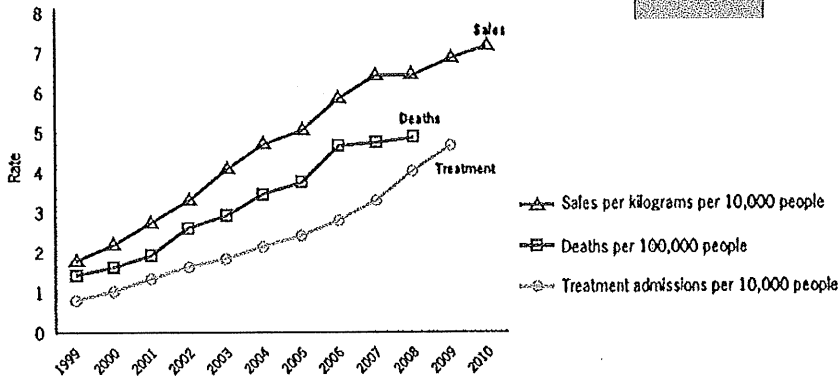
Some states have a bigger problem with prescription painkillers than others.

- ◇ Prescription painkiller sales per person were more than 3 times higher in Florida, which has the highest rate, than in Illinois, which has the lowest.
- ◇ In 2008/2009, nonmedical use of painkillers in the past year ranged from 1 in 12 people (age 12 or older) in Oklahoma to 1 in 30 in Nebraska.
- ◇ States with higher sales per person and more nonmedical use of prescription painkillers tend to have more deaths from drug overdoses.

Real-life stories of the epidemic

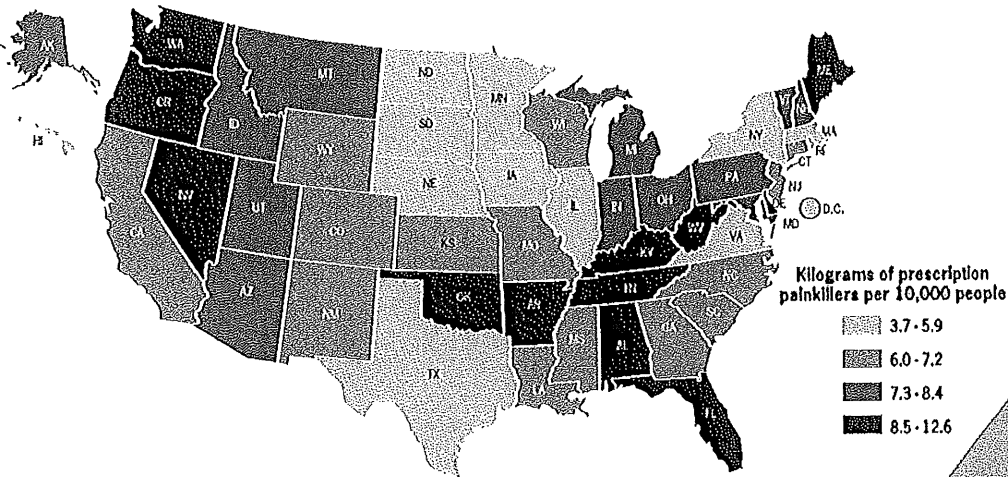
A West Virginia father, age 26, struggling for years with pain and addiction after shattering his elbow in a car crash, died from a prescription painkiller one week after telling his mother he wanted to go to rehab. In New Hampshire, a 20-year-old man overdosed on a prescription painkiller bought from a friend, becoming the 9th person that year to die from drug overdose in his community of 17,000. Stories such as these are all too common.

Rates of prescription painkiller sales, deaths and substance abuse treatment admissions (1999-2010)



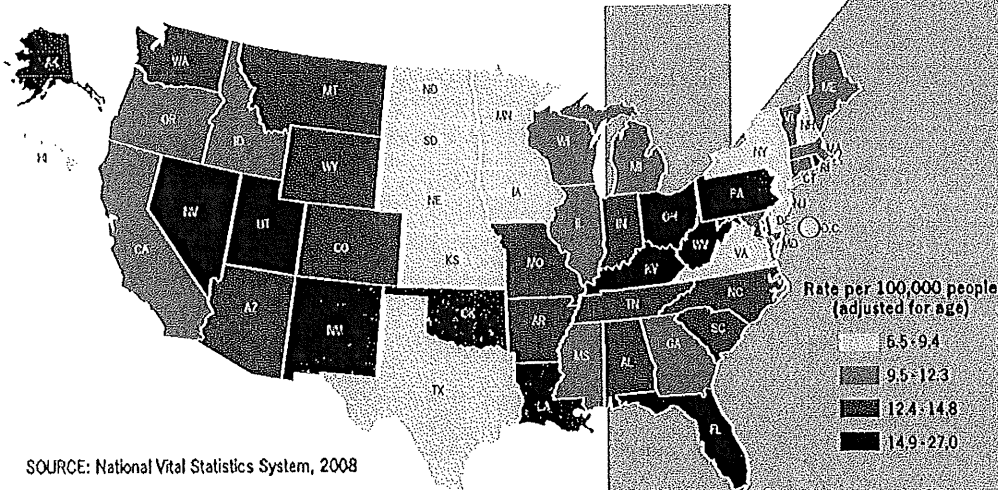
SOURCES: National Vital Statistics System, 1999-2008; Automation of Reports and Consolidated Orders System (ARCOS) of the Drug Enforcement Administration (DEA), 1999-2010; Treatment Episode Data Set, 1999-2009

Amount of prescription painkillers sold by state per 10,000 people (2010)



SOURCE: Automation of Reports and Consolidated Orders System (ARCOS) of the Drug Enforcement Administration (DEA), 2010

Drug overdose death rates by state per 100,000 people (2008)



SOURCE: National Vital Statistics System, 2008

What Can Be Done



The US government is

- ◇ Tracking prescription drug overdose trends to better understand the epidemic.
- ◇ Educating health care providers and the public about prescription drug abuse and overdose.
- ◇ Developing, evaluating and promoting programs and policies shown to prevent and treat prescription drug abuse and overdose, while making sure patients have access to safe, effective pain treatment.



States can

- ◇ Start or improve prescription drug monitoring programs (PDMPs), which are electronic databases that track all prescriptions for painkillers in the state.
- ◇ Use PDMP, Medicaid, and workers' compensation data to identify improper prescribing of painkillers.
- ◇ Set up programs for Medicaid, workers' compensation programs, and state-run health plans that identify and address improper patient use of painkillers.
- ◇ Pass, enforce and evaluate pill mill, doctor shopping and other laws to reduce prescription painkiller abuse.
- ◇ Encourage professional licensing boards to take action against inappropriate prescribing.
- ◇ Increase access to substance abuse treatment.



Individuals can

- ◇ Use prescription painkillers only as directed by a health care provider.
- ◇ Make sure they are the only one to use their prescription painkillers. Not selling or sharing them with others helps prevent misuse and abuse.
- ◇ Store prescription painkillers in a secure place and dispose of them properly.*
- ◇ Get help for substance abuse problems if needed (1-800-662-HELP).



Health insurers can

- ◇ Set up prescription claims review programs to identify and address improper prescribing and use of painkillers.
- ◇ Increase coverage for other treatments to reduce pain, such as physical therapy, and for substance abuse treatment.



Health care providers can

- ◇ Follow guidelines for responsible painkiller prescribing, including
 - Screening and monitoring for substance abuse and mental health problems.
 - Prescribing painkillers only when other treatments have not been effective for pain.
 - Prescribing only the quantity of painkillers needed based on the expected length of pain.
 - Using patient-provider agreements combined with urine drug tests for people using prescription painkillers long term.
 - Talking with patients about safely using, storing and disposing of prescription painkillers.*
- ◇ Use PDMPs to identify patients who are improperly using prescription painkillers.

* Information on the proper storage and disposal of medications can be found at www.cdc.gov/HomeandRecreationalSafety/Poisoning/preventiontips.htm.

For more information, please contact
Telephone: 1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348
E-mail: cdcinfo@cdc.gov
Web: www.cdc.gov
Centers for Disease Control and Prevention
1600 Clifton Road NE, Atlanta, GA 30333
Publication date: 11/01/2011

www.cdc.gov/vitalsigns

www.cdc.gov/mmwr



Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

May 10, 2013

The Honorable Tom Price
U.S. House of Representatives
Washington, D.C. 20515

Dear Representative Price:

The Centers for Disease Control and Prevention (CDC), as part of our Autism and Developmental Disabilities Monitoring (ADDM) Network, is partnering with the Autism Society to host a series of events in ADDM Network states titled "Reducing Disparities in Autism Identification: A Community Conversation." The purpose of this letter is to: (1) alert you and your staff that CDC will be soon be participating in this meeting in your community, in case your offices receive inquiries; and (2) invite you and members of your staff to attend the event.

The ADDM Network is a group of programs funded by CDC to estimate the number of children with autism spectrum disorders and other developmental disabilities living in different areas of the United States. In 2012, the ADDM Network released updated estimates of the identified prevalence of autism spectrum disorders, reporting that 1 in 88 children have autism. However, these estimates varied widely by race/ethnicity across and within most ADDM sites. In light of these findings, CDC is working with the Autism Society to conduct a series of state-based community engagement events in ADDM sites with a focus on disparities. The goals of these events are to present the data on the prevalence of autism within different races/ethnicities, discuss the disparities, and gain a state perspective on autism identification from those in the field.

Georgia's Community Conversation will be held at CDC's Tom Harkin Global Communications Center in Atlanta, Georgia, on May 16, 2013, from 1:00-5:00 p.m. A copy of the agenda is enclosed for your reference. To R.S.V.P. for the event, please contact Annina Burns from the CDC Washington Office at (202) 245-0555. We would be honored for you and your staff to attend, and if you are able, we would welcome any remarks that you would like to offer.

Additionally, Amy Pulver, CDC Washington, will contact your office to provide you with more information about the ADDM Network. In the meantime, she can be reached at (202) 245-0600 to answer any questions you or your staff may have.

Thank you for your continued interest in and support of public health.

Sincerely,

Thomas R. Frieden, M.D., M.P.H.
Director, CDC

Enclosure

**Reducing Disparities in Autism Identification:
A Community Conversation
May 16, 2013
1:00pm – 5:00pm**

Tom Harkin Global Communications Center, Auditorium B2
Centers for Disease Control and Prevention
Atlanta, Georgia

- 1:00pm** **Welcome**
Coleen Boyle, PhD, MSHyg, Director, CDC's National Center on Birth Defects and Developmental Disabilities
- 1:10pm** **Disparities in the Identification of Autism: An Overview from the Autism and Developmental Disabilities Monitoring (ADDM) Network**
Jon Baio, EdS, Principal Investigator of the ADDM Network
- 1:20pm** **A Closer Look at Data on Disparities in the Identification of Autism from the Metropolitan Atlanta Developmental Disabilities Surveillance Program (MADDSP)**
Kim Van Naarden Braun, PhD, Principal Investigator of MADDSP
- 1:40pm** **Questions & Answers on ADDM/MADDSP data**
- 2:00pm** **Break**
- 2:15pm** **A Georgia-focused round table discussion on reducing disparities
Moderated by the Autism Society**
- Explore past and current strategies to improve early identification and access to services and to reduce disparities
 - Role of education
 - Role of state/local programs
 - Role of federal programs
 - Role of policy
 - Role of healthcare
 - Role of research
- 3:45pm** **Break**
- 4:00pm** **Discussion Summary and Next Steps**
Autism Society Representative
- 4:45pm** **Closing Remarks**
Autism Society Representative



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta, GA 30333

2235895

February 4, 2013

The Honorable Tom Price
U.S. House of Representatives
Washington, D.C. 20515

Dear Representative Price:

Congratulations on your recent appointment to co-chair the House
Republicans' Congressional Health Care Caucus.

The Centers for Disease Control and Prevention (CDC) appreciates you
and Representative Burgess for your commitment to improving health in
this country. Your energy and expertise will be a great asset in promoting
this issue. As you know, public health is essential to building a sustainable
health care system, and CDC shares your dedication to enhancing the well-
being of all Americans.

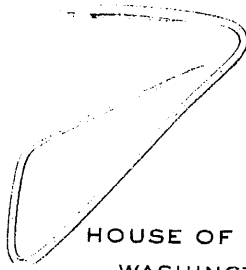
It was a privilege to speak to the Congressional Health Care Caucus in
2011, and it would be an honor to do so again. Additionally, it has been a
pleasure to host you and Dr. Burgess at CDC in the past. Please accept an
open invitation to come back with any of your colleagues to visit our
facilities and see our scientists at work.

If CDC can help inform the work of the Congressional Health Care Caucus
in any way, please know that we stand ready to assist. Thank you again for
your support of CDC, and I look forward to our continued partnership.

Sincerely,

Thomas R. Frieden, M.D., M.P.H.
Director, CDC

Congratulations!
T



HOUSE OF REPRESENTATIVES
WASHINGTON, D.C. 20515

10943

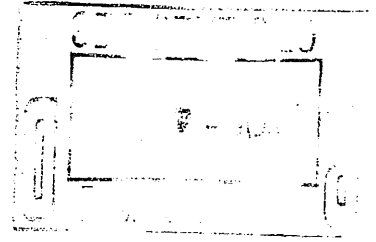
TOM PRICE, M.D.
SIXTH DISTRICT, GEORGIA

Dear Julie:

Thanks so much for taking time to
provide a great tour & update of
the CDC. You have been a wonderful
& dynamic leader! Anything I may
do to assist your efforts, please let
me know.

Tom

10/21



U.S. Representative Tom Price, M.D.
 Sixth Congressional District of Georgia
 3730 Roswell Road, Suite 50
 Marietta, GA 30062
 Phone: (770) 565-4990
 Fax: (770) 565-7570

DATE: 2 Nov 2005 FAX #: 202-1090-7579

TO: CDC - Congressional Unit

FROM: Jeff Hamling _____ Debbie DeLong _____
 Tina McIntosh X _____ Blair Simpson _____

RE: Inquiry from our constituent,
[REDACTED]

Thank you for your help with
this matter
Tina

I can be reached at the above numbers or at tina.mcintosh2@mail.house.gov.

There are 2 pages to this fax.

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11/02/2005 14:05 FAX

002/002

Oct 31 2005 10:36AM REP TOM PRICE

202 225 4656

p.2

10/27/2005 18:18 FAX

JEN

007/008

Oct 25 05 02:34p

770-977-9692

P.1

[REDACTED]

[REDACTED]

October 25, 2005

The Honorable Thomas Price
United States Representative
506 Cannon House Office Building
Washington, DC 20515

Subject: Health

Dear Tom;

I am writing about my personal concerns for the health of possibly hundreds of thousands of Americans, including myself. The problem I've encountered is finding a Doctor willing and knowledgeable to treat Lyme disease. I was diagnosed with ALS 18 years ago. With the encouragement of a lady in Maryland who read a story about me in the March issue of MONEY MAGAZINE. She subsequently told me the story of her husband who was diagnosed with ALS five years ago and after extensive testing he was diagnosed with Lyme disease, is now on antibiotic therapy and is improving.

I was tested by Kennestone hospital lab using the Western Blot IgG test and it was negative. I was subsequently tested by IgeneX Labs using the Western Blot IgG and IgM. I was negative on the IgG but positive on the IgM. After additional research, I decided to be tested by Bowen Research Labs in Tarpon Springs Florida. Their test is patented by Dr. JoAnne Whitaker, who herself was a victim of Lyme disease and I believe her test should be approved by the FDA as a determinant test for Lyme disease unless they can disprove her test. Dr. Lida Mattman has verified this test. I tested positive on this test, but Bowen is a research facility and their test cannot be used for diagnosis. The Lyme Doctor here, Dr. Gloria Gaston said she had never seen a case like mine and after the Bowen results referred me to a Lyme center in New York. I would hope the CDC here in Atlanta could provide some information on this matter. I would like to know IF I have Lyme or NOT, which seems impossible.

Respectfully,

[REDACTED]

DIR SIG
NCID
cc: B. BARRY
34689



FEB 17 2005

The Honorable Tom Price, M.D.
U. S. House of Representatives
Sixth Congressional District of Georgia
3730 Roswell Road, Suite 50
Marietta, Georgia 30062

Dear Dr. Price:

Thank you for your letter on behalf of your constituent, [REDACTED], regarding Lyme disease. Please excuse the delay of this response. Please know that the Centers for Disease Control and Prevention (CDC) shares [REDACTED]'s deep concern and is dedicated to developing improved methods for diagnosing and preventing Lyme disease.

Although I am unable to answer [REDACTED]'s question as to whether or not he has Lyme disease, I would encourage him to read and share with his physician the enclosed *Morbidity and Mortality Weekly Report (MMWR)* Notice to Readers regarding Lyme disease testing. As described in the Notice, many tests being used in the United States and in Europe have not been adequately validated, meaning that a positive result from these tests has not been well-established to be a "true positive." Among these tests is the immunofluorescent staining for cell wall deficient forms of *Borrelia burgdorferi* offered by the Bowen Research Institute. Although reportedly validated by culture method developed by Dr. Linda Mattman, the two tests are not independent methodologies. Both tests rely on the same commercially available goat antibody to detect what the authors refer to as "cell wall-deficient forms." It is therefore not that surprising the two methods gave the same results, with all samples testing positive. Furthermore, independent laboratories, including one at the National Institutes of Health, have published in the peer-reviewed literature that the Mattman culture medium, which includes as a critical reagent "Detroit tap water," does not grow strains of the agent of Lyme disease. With respect to antibody testing in a patient with long standing symptoms, the detection of IgM antibodies in the absence of IgG antibodies is likely to be a false positive result.

Proper diagnosis and treatment of Lyme disease should be based on clinical symptoms and not laboratory results alone. CDC continues to make efforts through the state and local health departments to educate physicians about Lyme disease. We believe that some patients are being misdiagnosed and mistreated as a result of unfounded reliance on some of the tests mentioned in the Notice. In addition to published reports of morbidity and even death attributed to some of the treatments undertaken for Lyme disease, we have received calls from patients diagnosed and treated for Lyme disease based on testing methods whose accuracy and clinical usefulness have not been adequately established and whose results could not be replicated or confirmed at any

Page 2 - The Honorable Tom Price, M.D.

other laboratory. Included in these are patients with Amyotrophic Lateral Sclerosis (ALS) who say they have spent thousands of dollars on ineffectual antibiotic treatment and young children who have received months of intravenous antibiotic therapy for a disease they may not have. Diagnosing Lyme disease in a patient who does not have it can be just as harmful as failing to diagnose it in a patient who does.

I encourage [REDACTED] and others seeking detailed information on Lyme disease as well as educational materials, to visit the CDC website at <http://www.cdc.gov/ncidod/dvbid/lyme/> or to contact CDC's Bacterial Zoonoses Branch, Division of Vector-borne Infectious Diseases, which has primary responsibility for Lyme disease activities, at (970) 221-6400, or by writing to CDC/DVBID, Bacterial Zoonoses Branch, PO Box 2087, Foothills Campus, Fort Collins, CO 80522.

I hope this information is helpful in your response to [REDACTED] and I appreciate your interest in and support of this important public health issue. A copy of this response is being sent to your Washington, D.C. office.

Sincerely,


Julie Louise Gerberding, M.D., M.P.H.
Director

Enclosure

[CDC Home](#)[Search](#)[Health Topics A-Z](#)**MMWR**

Weekly

February 11, 2005 / 54(05);125

Notice to Readers: Caution Regarding Testing for Lyme Disease

CDC and the Food and Drug Administration (FDA) have become aware of commercial laboratories that conduct testing for Lyme disease by using assays whose accuracy and clinical usefulness have not been adequately established. These tests include urine antigen tests, immunofluorescent staining for cell wall--deficient forms of *Borrelia burgdorferi*, and lymphocyte transformation tests. In addition, some laboratories perform polymerase chain reaction tests for *B. burgdorferi* DNA on inappropriate specimens such as blood and urine or interpret Western blots using criteria that have not been validated and published in peer-reviewed scientific literature. These inadequately validated tests and criteria also are being used to evaluate patients in Canada and Europe, according to reports from the National Microbiology Laboratory, Public Health Agency of Canada; the British Columbia Centres for Disease Control, Canada; the German National Reference Center for Borreliae; and the Health Protection Agency Lyme Borreliosis Unit of the United Kingdom.

In the United States, FDA has cleared 70 serologic assays to aid in the diagnosis of Lyme disease. Recommendations for the use and interpretation of serologic tests have been published previously (1). Initial testing should use an enzyme immunoassay (EIA) or immunofluorescent assay (IFA); specimens yielding positive or equivocal results should be tested further by using a standardized Western immunoblot assay. Specimens negative by a sensitive EIA or IFA do not need further testing. Similar assays and recommendations are used in Canada (2). In the European Union, a minimum standard for commercial diagnostic kits is provided by Conformité Européene (CE) marking; application and interpretation guidelines appropriate for Europe have been published (3,4).

Health-care providers are reminded that a diagnosis of Lyme disease should be made after evaluation of a patient's clinical presentation and risk for exposure to infected ticks, and, if indicated, after the use of validated laboratory tests. Patients are encouraged to ask their physicians whether their testing for Lyme disease was performed using validated methods and whether results were interpreted using appropriate guidelines.

References

1. CDC. Recommendations for test performance and interpretation from the Second National Conference on Serologic Diagnosis of Lyme Disease. MMWR 1995;44:590--1.
2. Consensus Conference on Lyme Disease. Can Dis Wkly Rep 1991; 17:63--70.
3. Wilske B, Zöller L, Brade V, et al. MIQ 12 Lyme-Borreliose. Qualitätsstandards in der mikrobiologisch-infektiologischen Diagnostik. Munich, Germany: Urban & Fischer

Verlag; 2000;1--59. Guidelines available in English at <http://nrz-borrelie.nlm.de/miq-lyme/index.html>.

4. Robertson J, Guy E, Andrews N, et al. A European multicenter study of immunoblotting in serodiagnosis of Lyme borreliosis. *J Clin Microbiol* 2000;38:2097--102.

Use of trade names and commercial sources is for identification only and does not imply endorsement by the U.S. Department of Health and Human Services.

References to non-CDC sites on the Internet are provided as a service to *MMWR* readers and do not constitute or imply endorsement of these organizations or their programs by CDC or the U.S. Department of Health and Human Services. CDC is not responsible for the content of pages found at these sites. URL addresses listed in *MMWR* were current as of the date of publication.

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****Questions or messages regarding errors in formatting should be addressed to mmwrq@cdc.gov.**

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SAFER • HEALTHIER • PEOPLE™
 Morbidity and Mortality Weekly Report
 Centers for Disease Control and Prevention
 1600 Clifton Rd, MailStop K-95, Atlanta, GA
 30333, U.S.A



Department of Health
and Human Services

This page last reviewed 2/10/2005



U.S. Representative Tom Price, M.D.
Sixth Congressional District of Georgia
3730 Roswell Road, Suite 50
Marietta, GA 30062
Phone: (770) 565-4990
Fax: (770) 565-7570

DATE: 25 Oct 2005 FAX #: 202-690-7380

TO: HHS - Office of Congressional Affairs

FROM: Jeff Hamling _____ Debbie DeLong _____

Tina McIntosh X _____ Blair Simpson _____

RE: Inquiry from our constituent,

[Redacted Name]

Thank you for your assistance in
this matter.

Tina

I can be reached at the above numbers or at tina.mcintosh2@mail.house.gov.

There are 3 pages to this fax.

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[REDACTED]

Date: 9/5/2005 12:07:48 PM
To: ga06ima@mail.house.gov
Subject: Message for Tom Price - Budget

[REDACTED]

September 5, 2005

The Honorable Tom Price
House of Representatives
506 Cannon House Office Building
Washington, DC 20515-1006

Dear Representative Price:

I work for the Centers for Disease control here in ATLANTA, GA. I am a Systems Accountant and have work-at-home capabilities an authority yet my department Chief won't grant work-at-home as he believes it is a CDC - wide decision.

Wouldn't now be one the best times for Federal government workers to be encouraged - whenever possible - to tele-work?

Why would the Federal Government (HHS/Centers for Disease Control) NOT want to help conserve gasoline?

"Promoting Telework: The Bush Administration, through the Office of Personnel Management and the General Services Administration, has implemented a number of initiatives to promote telework in Federal agencies. Between the first telework survey taken in April 2001 and October 2003, the number of employees teleworking grew from more than 53,000 employees to almost 103,000 employees, an overall increase of 93 percent. In addition, the President's FY 2005 budget includes \$5 million for the Department of Labor to encourage greater use of scheduling flexibility and telework options in the private sector."

Dir Sig
AHRC

Sincerely,

A large, solid black rectangular redaction covering the signature area.

</MSG>
</APP>



Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

JAN 13 2006

The Honorable Tom Price
House of Representatives
Washington, D.C. 20515-1006

Dear Mr. Price:

Thank you for your letter on behalf of your constituent, [REDACTED], concerning teleworking in the Federal Government. Please excuse the delay of this response. The Centers for Disease Control and Prevention (CDC) began a formal telework program in 1996. CDC continues to provide employees the opportunity to telework from their home or other approved work sites during the work week. This component of our Work Life Programs provides many benefits for employees and the agency. Among these benefits are increased productivity, improved quality of work, improved morale, decreased stress due to less commuting, improved air quality and less fuel consumption, and more options to balance work and personal life. Telework is also used to accommodate employees who have temporary or continuing health problems.

CDC supports teleworking by providing online telework training to current supervisors and employees and educating new supervisors on how telework can help them meet their objectives.

In response to the recent hurricanes and the resulting increase in gas prices, an agency-wide announcement was distributed to all staff encouraging the use of telework as an alternative to commuting. This was an effort to conserve energy as requested by the Presidential Directive of September 26th.

[REDACTED] has been a participant in the CDC Telework Program since 1999. He is a senior systems accountant in CDC's Financial Management Office (FMO). The responsibilities of this office include closing out the fiscal year and all associated activities. Mr. Hart has an important part in this process.

On Sunday, September 4, 2005, [REDACTED] requested to work at home based solely on the gas situation. This request was denied at that time by his supervisor for work-related reasons due to fiscal year-end activities. Other than an e-mail request [REDACTED] neither discussed his request with his supervisor nor did he initiate any follow-up discussions with anyone in his management chain.

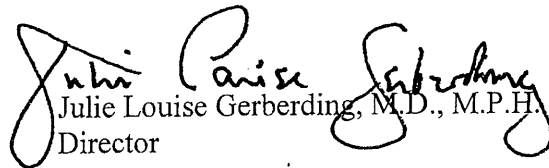
[REDACTED] is permitted to work at home on an as-needed basis due to medical reasons. [REDACTED] has never been denied the work-at-home privilege based on his medical reasons.

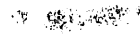
Page 2 - The Honorable Tom Price

I appreciate your support of this issue and hope this information is helpful in your response to



Sincerely,


Julie Louise Gerberding, M.D., M.P.H.
Director



DEC 16 2008
36171

D14



Dr. Julia Gerberding
Director
Centers for Disease Control
Rocky Mountain Campus
Atlanta, GA

~~PERSONAL~~

30333



TOM PRICE, M.D.
MEMBER OF CONGRESS

Dear Dr. Gerberding:

Thanks so much for your wonderful
greeting & tour at the CDC recently. You
may be rightfully proud of the work
& accomplishments of that grand
organization. We are all fortunate to
be the beneficiaries of your expertise.
Keep up the good work - Tom

RED

TOM PRICE, M.D.
6TH DISTRICT, GEORGIA

WASHINGTON, DC OFFICE:
506 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-4501
FAX: (202) 225-4656

DISTRICT OFFICE:
3730 ROSWELL ROAD, SUITE 50
MARIETTA, GA 30062
(770) 565-4990
FAX: (770) 565-7570

www.house.gov/tomprice



Congress of the United States
House of Representatives

COMMITTEE ON
FINANCIAL SERVICES
SUBCOMMITTEES:
OVERSIGHT
FINANCIAL INSTITUTIONS
DOMESTIC AND INTERNATIONAL POLICY

COMMITTEE ON
EDUCATION AND THE WORKFORCE
SUBCOMMITTEES:
WORKFORCE PROTECTION
21ST CENTURY COMPETITIVENESS

ASSISTANT DEPUTY WHIP

May 25, 2006

Mr. Donald Shriber
Associate Director of the Washington Office
Centers for Disease Control and Prevention
200 Independence Ave, SW, Room 746-G
Washington, DC 20201-0004

Dear Mr. Shriber:

My constituent, [REDACTED], has requested that I provide the enclosed information for your review.

Please feel free to contact Tina McIntosh of my staff at 770-565-4990 if we can provide any additional information.

Thank you for your assistance in this matter.

Yours truly,

Tom Price, M.D.
Member of Congress

TP/tm

TOM PRICE, M.D.
6TH DISTRICT, GEORGIA

WASHINGTON, DC OFFICE:
506 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-4501
FAX: (202) 225-4656

DISTRICT OFFICE
3730 ROSWELL ROAD, SUITE 50
MARIETTA, GA 30062
(770) 565-4990
FAX: (770) 565-7570

www.house.gov/tomprice



Congress of the United States
House of Representatives

COMMITTEE ON
FINANCIAL SERVICES
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DOMESTIC AND INTERNATIONAL POLICY

COMMITTEE ON
EDUCATION AND THE WORKFORCE
SUBCOMMITTEES:
WORKFORCE PROTECTION
21ST CENTURY COMPETITIVENESS

ASSISTANT DEPUTY WHIP

July 28, 2006

Mr. Donald Shriber
Associate Director of the Washington Office
Centers for Disease Control and Prevention
200 Independence Ave, SW, Room 746-G
Washington, DC 20201-0004

Dear Mr. Shriber:

A few weeks ago I contacted your office regarding Ms. [REDACTED]. In reviewing my case files, I have discovered that I have not yet heard from your office regarding this particular matter.

I would appreciate it if you would review this case and respond to my constituent's concerns. Attached is a copy of my previous correspondence for your convenience. If my office can provide any additional information, please do not hesitate to contact Tina McIntosh in my District Office at 770-565-4990.

Yours truly,

Tom Price, M.D.
Member of Congress

TP/tm

*FU Letter to
ES 37182*

May 25, 2006

Mr. Donald Shriber
Associate Director of the Washington Office
Centers for Disease Control and Prevention
200 Independence Ave, SW, Room 746-G
Washington, DC 20201-0004

Dear Mr. Shriber:

My constituent, [REDACTED], has requested that I provide the enclosed information for your review.

Please feel free to contact Tina McIntosh of my staff at 770-565-4990 if we can provide any additional information.

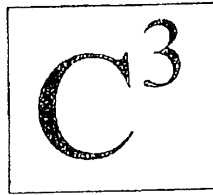
Thank you for your assistance in this matter.

Yours truly,



Tom Price, M.D.
Member of Congress

TP/tm



May 22, 2006

Congressman Tom Price
3730 Roswell Road, Suite 50
Marietta, GA 30062

Dear Congressman Price:

As a constituent, I am writing to you to ask for help in getting a fair appraisal of my application for employment with the Centers for Disease Control in Atlanta, GA.

On January 30, 2006, I responded to a web posting of job number HHS-CDC-T4-2006-0051, Health Education Specialist, GS-1701-13, at CDC in the Center for Chronic Disease Prevention and Health Promotion, Division of Reproductive Health, Applied Sciences Branch. All requested materials were received by the deadline.

The position involves program development and evaluation of unintended and adolescent pregnancy prevention programs. With 20 years of experience in women's health, a BA in reproductive health counseling/education, an MS in organizational communication, and a PhD in human resource development (also called adult education), my education and experience appear to more than meet the job requirements. Eleven of my years of experience were spent at Emory University School of Medicine, Department of Gyn/Ob, Regional Training Center, managing the Region IV Title X training program for reproductive public health professionals in eight southeastern states.

When I followed up with the HR Customer Services department at CDC in early March, I was informed that I did not meet the education requirements for the position (even though the job description only requires a 4-year course of study or the equivalent combination of study and experience). I emailed further clarification and was informed via email on March 22nd that, in fact, my education did meet the educational requirements and that, "The next phase is to review your application for qualifications. I'll keep you informed."

A month later, after again requesting the status of my application via email, I received this response, "Due to the changes in HR, [redacted] application will be forward to Rockville for review. I'll will keep [redacted] in informed of the findings." I cannot imagine that no one in Atlanta is competent to review my application for qualifications. The most recent voice mail message I left has still received no response.

Through contacting former colleagues who are at CDC, I learned that initial interviews for this position have taken place and a second round of interviews were scheduled for the end of last week. My understanding is that standard procedure is to review and classify all accepted applications before composing a list of interview candidates and sending it to the hiring official; and in the case of complications the process is stopped until the classification of applications is complete. This has not happened in my case nor have I been notified of my application's status.

Please help me to find out why my application has not been approved and my name not forwarded to the hiring official for interview; and if it is still possible to be called for an interview. Have there been additional errors in the processing of my application, or are there unwritten criteria that must be met?

Thank you in advance for your help.

Sincerely,

Enclosures: Constituent Request for Service form. Job announcement. On-line application and resume. Copies of relevant emails

[Redacted signature area]

assistance_form

Print Document

**Congressman Tom Price
Constituent Request for Service
Privacy Act Statement**

In accordance with the Privacy Act of 1974 (5 USC 552), I hereby authorize Representative Tom Price and his designated staff to seek disclosure of all records relevant to my case from the federal agency involved. (Under the Privacy Act of 1974, we must have formal authorization from you before seeking disclosure of your records. The authorization must be signed by the person whose case is in question.)

Signature: [Redacted] Date: 5-21-06

Description of Problem: PLEASE SEE ATTACHED.

DETERMINE WHAT HAS HAPPENED TO
MY TOP APPLICATION FOR A POSITION AT
CDC.

Attach additional pages if necessary. Attach photocopies (no originals please) of all relevant documents.

Agency Involved: CDC
Date of Birth: [Redacted]
Social Security #: [Redacted]
Alien Card #: _____
Immigrant Visa #: _____
Veteran #: _____
Service Record #: _____
Claim #: _____

Mr./Mrs./Ms./Miss (please circle one)
First Name: [Redacted]
Last Name: [Redacted]
Address: [Redacted]
City: [Redacted] Zip Code: [Redacted]
Telephone (day): [Redacted]
Telephone (night): SAME
Fax: [Redacted] Email: [Redacted]

Please return this form to:
Congressman Tom Price
3730 Roswell Road, Suite 50
Marietta, GA 30062

TOM PRICE, M.D.
6TH DISTRICT, GEORGIA

WASHINGTON, DC OFFICE:
424 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-4501
FAX: (202) 225-4656

DISTRICT OFFICE:
3730 ROSWELL ROAD, SUITE 50
MARIETTA, GA 30062
(770) 565-4990
FAX: (770) 565-7570

www.house.gov/tomprice



Congress of the United States
House of Representatives

July 28, 2009

COMMITTEE ON
FINANCIAL SERVICES
SUBCOMMITTEES:
FINANCIAL INSTITUTIONS
DEPUTY RANKING MEMBER
DOMESTIC AND INTERNATIONAL POLICY
OVERSIGHT AND INVESTIGATIONS

COMMITTEE ON
EDUCATION AND LABOR
SUBCOMMITTEES:
WORKFORCE PROTECTION
HEALTH, EMPLOYMENT, LABOR AND PENSIONS

POLICY COMMITTEE
DEPUTY WHIP

Ms. Barbara Clark
Acting Assistant Secretary for Legislation
US Department of Health and Human Services
Hubert Humphrey Bldg, Room 416G
200 Independence Ave SW
Washington, DC 20201-0001

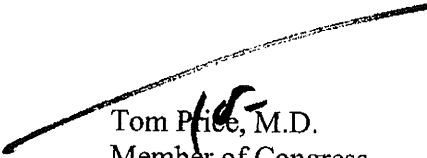
Dear Ms. Clark:

My constituent, [REDACTED], has contacted me regarding a problem she is having. Please find enclosed a copy of her correspondence.

Please verify the status of this situation and provide me with any information that I may use to properly assist my constituent. Please forward all correspondence to the attention of Tina McIntosh in my Marietta District Office at 3730 Roswell Rd., Suite 50, Marietta, GA 30062. You may also contact her by phone at 770-565-4839, by facsimile at 770-565-7570, or by email to tina.mcintosh2@mail.house.gov.

Thank you in advance for your time and assistance in this matter. I look forward to hearing from you soon.

Yours truly,


Tom Price, M.D.
Member of Congress

TP/tm

PRIVACY RELEASE FORM
Congressman Tom Price, M.D.
Sixth Congressional District of Georgia

Date: July 23, 2009

Name: (Mrs.) [REDACTED]

[REDACTED]

[REDACTED]

Street Address

City/State/Zip

[REDACTED]

[REDACTED]

Home phone

Work/Cell Phone

Social Security [REDACTED] and/or A#, VA#, etc. _____

Date of Birth [REDACTED] AGENCY Involved Department of HHS / Centers for Disease Control & Prevention

Spouse/ Other Contact [REDACTED]

Please provide a brief explanation of your situation with the above agency and specify how our office may be of assistance. Continue on another sheet if necessary. Send *photocopies only* of any documents you may have to support your claim. It is important for you to retain the originals for your files.

Letter of explanation and supporting documentation is being faxed to you separately.

Privacy Act Release

I hereby authorize **Congressman Tom Price** and those acting in his behalf, in order to attempt to be of assistance to me, to obtain in accordance with applicable laws and regulations, information pertaining specifically to this matter.

SIGN [REDACTED]
HERE [REDACTED]

DATE [REDACTED]

Once complete, please return it to: **Congressman Tom Price**
3730 Roswell Road, Suite 50
Marietta, GA 30062
770-565-7570 FAX

[REDACTED]
[REDACTED]
July 24, 2009

Ms. Tina McIntosh
Director of Constituent Services
Office of Congressman Tom Price
3730 Roswell Road, Suite 50
Marietta GA 30062

Dear Tina:

Thank you for your willingness to investigate the situation regarding my wife's [REDACTED] application for the position of Assistant Director Human Resources at the Centers for Disease Control and Prevention in Atlanta. As you requested, your *Privacy Release Form* is being faxed along with this letter.

She applied for this position based on an online posting [see *CDC Job Posting* faxed to you along with this letter] on USAJobs.com, the Federal Civil Service web site. After reviewing the Duties and Qualifications for this position we concluded that she would be a very good fit for it [See her *Response to CDC Questionnaire* faxed to you along with this letter]. To corroborate her qualifications, *Susan's resume* is also being faxed along with this letter.

Also faxed with this letter are copies of 3 emails to [REDACTED] from CDC, each in response to a query from Susan:

- 5/8/09 – This email states "This notification has been provided to let you know your application did not score high enough to be considered for this vacancy."
- 5/15/09 – Susan sent an email asking what her score was and got this email response: "Position has been filled."
- 5/20/09 – Susan sent another email asking again what her score was and got this email response: "Based on the self assessment you completed, your application score was 100, however, after reviewing your application, you did not possess the one year of specialized experience required for this position." This is ridiculous. Susan has many years of the specialized experience required as her application and resume corroborate. She could not have achieved a score of 100 from CDC unless she had this experience.

I think you would agree that this series of email responses is an inadequate explanation of the CDC's decision and raises serious questions about the accuracy, fairness and transparency of the hiring process for this position.

We would appreciate your office's help to:

- Find out the truth as to what really happened here.
- Get Susan's application reconsidered either for this position or another senior Human Resources position at CDC.

Thank you,
[REDACTED]

- b6 - - - - -

[REDACTED]

From: [REDACTED]
Sent: Friday, April 10, 2009 3:14 PM
To: 'galen.carver@cdc.hhs.gov'
Subject: Assistant Director, Atlanta Human Resources Center

Dear Mr. Carver –

I applied online for the above position and received confirmation that my application and supporting documents were received.

In the event that my application is one of those forwarded to you for final consideration, I am writing to underscore my strong interest in this position working for you as your Deputy Chief and alter ego, as the job description indicates.

I would consider it an honor if I were selected to fill this important position and become a part of your team. I hold the CDC in the highest regard and think the work of CDC is extremely important to our country and its citizens.

I believe my resume and application document that I have the requisite knowledge, skills and abilities to effectively support and serve you and CDC:

- Demonstrated ability to serve as the alter ego of senior executives.
- Strong background providing strategic and tactical HR advice, direction and support to key senior executives and their leadership teams.
- Successful experience with a global organization and also a regional one.
- Unique combination of operations, customer service and managerial experience moving from front line to division and then headquarters positions throughout my career.
- Managed as many as 13 direct reports with responsibility for 3,000 employees.
- Comprehensive Human Resources technical knowledge demonstrated by earning the SPHR certification in 2007.
- Graduate of Duke Fuqua School of Business Advanced Management Program in 2008.

Global healthcare issues were an integral part of my Duke program. My intersession course work was a global survey of healthcare policy, practices and economies in 5 different democracies around the world plus China. The professor (an M.D. who is a joint faculty member of the Duke Fuqua School and Duke Medical School) was highly complimentary of my work. This experience heightened my interest in healthcare and is one of the reasons I would like to work for CDC.

I note that you have a background serving in civilian executive positions with the U.S. Navy. Two of my fellow classmates at Duke were naval officers. If you think it would be helpful to you, I would be glad to put you in contact with either or both of them, since they had a recent opportunity to see how I think and work in a lot of different situations. (This would be in addition to the references that I have already provided.)

Mr. Carver, I hope that my application does make it to your desk and, if it does, we have the opportunity to meet prior to your making a final selection on this key position on your team.

Sincerely,

[Redacted signature block]

Assistant Director of Human Resources, GS-0201-15

Salary Range: 116,364.00 - 151,275.00 USD
/year

Open Period: Friday, March 13, 2009
to Friday, March 27, 2009

Series & Grade: GS-0201-15/15

Position Information: Full-Time Permanent

Promotion Potential: 15

Duty Locations: 1 vacancy - Atlanta, GA

Who May Be Considered:

This vacancy is open to current federal employees serving under a career or career conditional appointment; former federal employees with reinstatement eligibility; and persons, including veterans, eligible for appointment under special hiring authorities.

Job Summary:



What exciting opportunities await you at CDC?

The Centers for Disease Control & Prevention (CDC) is the agency Americans trust with their lives. As a global leader in public health, CDC is the nation's premier health promotion, prevention, & preparedness agency. Whether we are protecting the American people from public health threats, researching emerging diseases, or mobilizing public health programs with our domestic and international partners, we rely on our employees to make a real difference in

CDC AHRC/Staffing/Employment Ticket SD40213 has been Closed.

Page 1 of 1

[REDACTED]

From: CDC NCPHI ServiceCenter Mailbot [ncphimailbot@cdc.gov]
Sent: Friday, May 08, 2009 9:07 AM
To: [REDACTED]
Subject: CDC AHRC/Staffing/Employment Ticket SD40213 has been Closed.
CDC AHRC/Staffing/Employment Ticket SD40213 has been Closed.

Dear [REDACTED]:

In response to your inquiry, we are providing the following:

This notification has been provided to let you know your application did not score high enough to be considered for this vacancy. This was based on your responses to the position-specific questions in the vacancy announcement. The responses you provided were the basis for the numerical rating calculated by the system, in accordance with the weighting of the questions, which were determined by the selecting official or subject matter expert in consultation with a Human Resources Specialist.

Does not meet minimum qualifications .

Thank you for your inquiry to the Human Resources Customer Service Center.

Brathwaite, Yolanda V. is responsible for the content of this response.

Please provide your feedback on the service you received by completing a brief customer service survey at <https://vovici.com/wsb.dll/s/6f6bg2e522>. Thank You.

Please DO NOT reply to this email, as it is an automated system-generated message.
Please send all requests to HRCS@cdc.gov.

CDC AHRC/Staffing/Employment Ticket SD40559 has been Closed.

Page 1 of 1

[REDACTED]

From: CDC NCPHI ServiceCenter Mailbot [ncphimailbot@cdc.gov]
Sent: Friday, May 15, 2009 8:46 AM
To: susan.nolan@masinc.net
Subject: CDC AHRC/Staffing/Employment Ticket SD40559 has been Closed.
CDC AHRC/Staffing/Employment Ticket SD40559 has been Closed.

Dear [REDACTED]:

Related Incident IM111665 closed.
Position has been filled.

Thanks
Patsy Mitchell
i

*** ** There are no other related records. Interaction closed by Incident IM111665

Mitchell, Patsy J. is responsible for the content of this response.

Please provide your feedback on the service you received by completing a brief customer service survey at <https://vovici.com/wsb.d11/s/6f6bg2e522>. Thank You.

Please DO NOT reply to this email, as it is an automated system-generated message.
Please send all requests to HRCS@cdc.gov.

CDC AHRC/Staffing/Employment Ticket SD40920 has been Closed.

Page 1 of 1

[REDACTED]

From: CDC NCPHI ServiceCenter Mailbot [ncphimailbot@cdc.gov]
Sent: Wednesday, May 20, 2009 4:05 PM
To: susan.nolan@masinc.net
Subject: CDC AHRC/Staffing/Employment Ticket SD40920 has been Closed.
CDC AHRC/Staffing/Employment Ticket SD40920 has been Closed.

Dear [REDACTED]:

Related Incident IM111737 closed.

Based on the self assessment you completed, your application score was 100, however, after reviewing your application, you did not possess the one year of specialized experience required for this position.

*** ** There are no other related records. Interaction closed by Incident IM111737

Mitchell, Patsy J. is responsible for the content of this response.

Please provide your feedback on the service you received by completing a brief customer service survey at https://vovici.com/wsb_d11/s/6f6bg2e522. Thank You.

Please DO NOT reply to this email, as it is an automated system-generated message.
Please send all requests to HRCS@cdc.gov.

7/24/2009



OCT 28 2009

The Honorable Tom Price
Member, U.S. House of Representatives
3730 Roswell Road, Suite 50
Marietta, Georgia 30062

Dear Mr. Price:

I am responding to your letter to Ms. Barbara Clark on behalf of your constituent, Ms. [REDACTED] who applied for the position of Supervisory Human Resources Specialist, GS-0201-15, with the Centers for Disease Control and Prevention (CDC) through vacancy announcement HHS-CDC-2009-0031. Please excuse the delay of this response.

Please be advised that after the vacancy announcement was posted, a decision was made in CDC's Atlanta Human Resources Center (AHRC) that the position would be filled by the reassignment of another current AHRC staff member. The incumbent in this position serves as the Deputy Director of AHRC, which provides human resources (HR) organizational and management services to federal offices in the Atlanta area. The incumbent also serves as a principal advisor to the client's organizational leadership on matters related to federal HR management services provided by AHRC staff. In addition, the incumbent ensures that the services provided by AHRC meet the HR needs of the client and provides the client's subordinate supervisors and staff with direction and advice regarding federal HR policies, procedures, and guidelines.

The specialized requirements for this position include experience in the areas of federal personnel recruitment, placement, classification, and compensation; and experience managing an office workforce responsible for the performance of these duties in advising top management officials and employees on a myriad of federal HR principles and practices.

According to [REDACTED]'s application, she served as Vice-President/ Human Resources Client Manager for SunTrust, Inc. and was responsible for the oversight of strategic development and management of human resources programs and services, as well as served as a strategic partner at SunTrust to client groups inclusive of organizational design, business definition, modeling, and retention. In addition, [REDACTED] previously worked for Delta Airlines, Inc. (May 1978 to August 1994) where she performed in a wide range of operational leadership roles, such as

Page 2 - The Honorable Tom Price

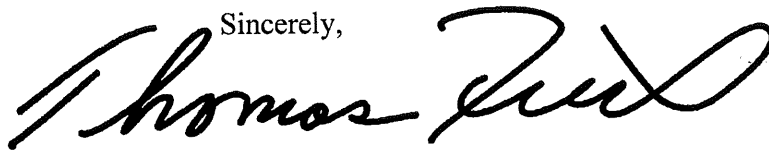
Manager, Division HR Manager, and Corporate Senior HR Manager, and implemented the reorganization of Delta's Atlanta-based division as well as served as team leader on a company merger and subsequent acquisition.

While some of [REDACTED]'s experience is certainly related to human resources activities, it does not reflect the scope and quality of specialized experience in federal human resource management equivalent to the GS-15 level of the position she applied for in the federal service.

After a second review of her application, we sustain our previous determination that your constituent, [REDACTED], does not meet the specialized experience requirements for this position.

I regret that this response is not more favorable and hope this information is helpful in your response to [REDACTED]. A copy of this response is being sent to your Washington, D.C. office.

Sincerely,

A handwritten signature in black ink, appearing to read "Thomas Frieden". The signature is fluid and cursive, written in a professional style.

Thomas R. Frieden, M.D., M.P.H.
Director, CDC, and
Administrator, Agency for Toxic
Substances and Disease Registry

Schattner, Aimee (CDC/OD/CDCWO)

From: Richman, Karyn (CDC/OD/CDCWO)
Sent: Wednesday, January 11, 2017 11:26 AM
To: Klingbeil, Martin (CDC/OD/CDCWO); Schattner, Aimee (CDC/OD/CDCWO)
Subject: FW: Thanks and follow up
Attachments: 2013 Logic Model - Assisting States Address PDO Epidemic - JONES - Revis....pptx

From: Schwarcz, Cristi L. (CDC/OD/CDCWO)
Sent: Tuesday, January 10, 2017 4:20 PM
To: Richman, Karyn (CDC/OD/CDCWO) <ygn7@cdc.gov>
Subject: FW: Thanks and follow up

Follow up email after meeting with Amanda Street in Rep. Price's office on PDO

From: Schwarcz, Cristi L. (CDC/OD/OADP)
Sent: Friday, December 06, 2013 2:55 PM
To: amanda.street@mail.house.gov
Subject: Thanks and follow up

Hi Amanda,

Thanks so much for taking time to meet with myself, Chris Jones and Grant Baldwin earlier this week. We really appreciate Dr. Price's and your support for our work in prescription drug overdose prevention. Below are links to some of the information we discussed. I still owe you all a few pieces of information and will get back to you once I have those.

Thanks and don't hesitate to let me know if you have any questions.

Best,

Cristi

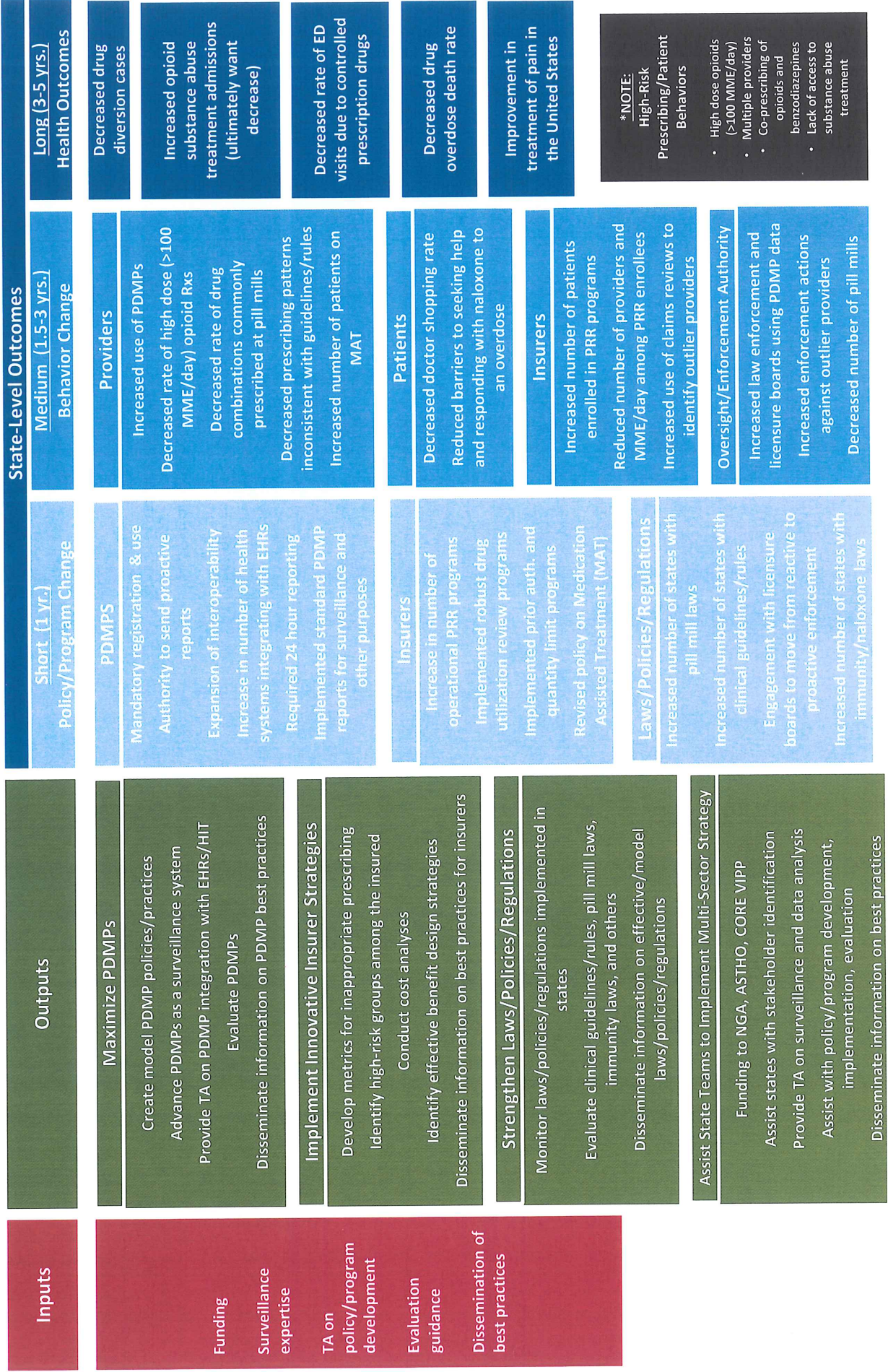
- PDO logic model that we discussed is attached
- General PDO overview materials can be found at: <http://www.cdc.gov/homeandrecreationalafety/overdose/>
- A CDC Vital Signs publication discussing the scope of the problem can be found at: <http://www.cdc.gov/vitalsigns/PainkillerOverdoses/index.html>
- A policy Impact Statement on the issue can be found at: <http://www.cdc.gov/homeandrecreationalafety/rxbrief/>
- A discussion of state laws addressing PDO can be found at: <http://www.cdc.gov/HomeandRecreationalSafety/Poisoning/laws/index.html>

Cristi Schwarcz
CDC Washington Office
395 E Street, SW, Suite 9100



LOGIC MODEL

Assisting States Address the Prescription Drug Overdose Epidemic Targeting High Risk Prescribers and High Risk Patients*



***NOTE:**
High-Risk Prescribing/Patient Behaviors

- High dose opioids (>100 MME/day)
- Multiple providers
- Co-prescribing of opioids and benzodiazepines
- Lack of access to substance abuse treatment

Schattner, Aimee (CDC/OD/CDCWO)

From: Mercadel, Acesa (CDC/OPHSS/CSELS)
Sent: Thursday, March 03, 2016 11:00 AM
To: Huston, Michael Jared (CDC/OD/OCS)
Subject: FW: Ms. Dorimar Rosado/Congressional inquiry
Attachments: Rosado PW.pdf; Price - Dorimar Rosado- 20160301 FINAL.pdf

Importance: High

Good morning,

Note the attached receipt from Congressman Price's office and response. The original has been mailed, an email copy will be forwarded to Karyn Richman at CDC W and to Ms. Poole at Congressman Price's office. Thanks

From: Poole, Jennifer [<mailto:Jennifer.Poole@mail.house.gov>]
Sent: Tuesday, February 09, 2016 12:59 PM
To: constituent.services@opm.gov; Mercadel, Acesa (CDC/OCOO/OD) <ddx0@cdc.gov>
Subject: [REDACTED] Congressional inquiry

I've attached the correct correspondence this time! I'm sorry.

From: Poole, Jennifer
Sent: Tuesday, February 09, 2016 11:39 AM
To: 'constituent.services@opm.gov'; 'CDC (ocoo@cdc.gov)'
Subject: [REDACTED] Congressional inquiry

Dear friends,

One of Congressman Price's constituent's has contacted our office regarding a matter in which we believe you could be helpful. Please find attached the correspondence we received from [REDACTED]

Thank you in advance for your consideration and any assistance you might have to offer our constituent. If you have any questions or need any further documentation, please do not hesitate to let me know.

Sincerely,

Jennifer Poole
Director of Constituent Services
Office of Congressman Tom Price, M.D.
85-C Mill Street, Suite 300
Roswell, GA 30075
770-998-0049
770-998-0050 fax

Confidential Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient (s) and may contain confidential and privileged information. Any unauthorized review; use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

PRIVACY RELEASE FORM
Congressman Tom Price, M.D.
Sixth Congressional District of Georgia

Date: January 28, 2016

Name: [REDACTED]
(Mr./Mrs./Ms.)

[REDACTED]
Street Address City/State/Zip

() [REDACTED] (404) 429.5533
Home phone Work/Cell Phone

Social Security # [REDACTED] and/or A#, VA#, etc. _____

Date of Birth [REDACTED] AGENCY Involved CDC

Spouse/ Other Contact _____

.....
Please provide a brief explanation of your situation with the above agency and specify how our office may be of assistance. Continue on another sheet if necessary. Send *photocopies only* of any documents you may have to support your claim. It is important for you to retain the originals for your files.

See attached

Privacy Act Release

I hereby authorize **Congressman Tom Price** and those acting in his behalf, in order to attempt to be of assistance to me, to obtain in accordance with applicable laws and regulations, information pertaining specifically to this matter.

SIGN [REDACTED] DATE January 28, 2016
HERE

Once complete, please return it to: **Office of Congressman Tom Price, M.D.**
85-C Mill Street, Suite 300
Roswell, GA 30075
770-998-0050 Fax

Honorable Dr. Tom Price

I have been working on the Ebola response since October of 2014. In April 2015 I retired but was asked to return to work on the response. After several weeks of negotiations, it was agreed that I would be rehired as a rehired annuitant and start working again on May 1st, 2015. Somehow my rehire process was not done and I worked 80+ hours in May without pay before any of us realized that I was not on the payroll and that HR never processed my rehire.


Nine months plus later I still have not been paid. Every time I ask I am told something different and even conflicting information about the status of my back pay.

I have included emails dating back to February 2014 where the details of my retirement and rehire are discussed, as well as subsequent emails discussing my back pay.

I kindly request your Office's help in sorting out this issue. It has been long enough and it is certainly unfair. If I owed the government \$5,000+ I would have been expected to pay up way before nine months went by.

I would like to receive my pay with interest and an apology from CDC/HR.

Kind regards,


2495 Cravey Drive NE
Atlanta, GA 30345
DorimarRosado@hotmail.com
404.429.5533



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

March 2, 2016

The Honorable Tom Price
Member, U.S. House of Representatives
85-C Mill Street, Suite 300
Roswell, Georgia 30075

Dear Congressman Price:

I am writing in response to your inquiry on behalf of your constituent, [REDACTED]
[REDACTED] an employee of the Centers for Disease Control and Prevention's (CDC). [REDACTED]
[REDACTED] raised issues concerning back pay.

The Defense Finance and Accounting Service (DFAS) has confirmed payment has been issued to [REDACTED]'s bank account on record.

If you should have any further questions, please contact Sandra DeShields, Director, Client Services Office, Human Resources Office, at SDeShields@cdc.gov or (770) 488-0252.

Sincerely,


Dia Taylor
Director, Human Resource Office

TOM PRICE, M.D.
6TH DISTRICT, GEORGIA

WASHINGTON, DC OFFICE:
100 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-4501
FAX: (202) 225-4656

DISTRICT OFFICE:
85-C MILL STREET, SUITE 300
ROSWELL, GA 30075
(770) 998-0049
FAX: (770) 565-7570

www.house.gov/tomprice



COMMITTEE ON THE BUDGET
CHAIRMAN

COMMITTEE ON WAYS AND MEANS

Congress of the United States
House of Representatives

MAR 04 2016

February 29, 2016

Dr. Thomas R. Frieden M.D.
Director
Center for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30329-4018

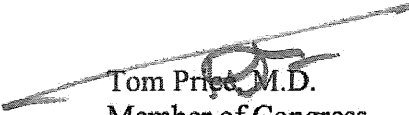
Dear Dr. Frieden:

One of my constituents has contacted me regarding a matter in which I believe you could be helpful.

Please find enclosed a copy the correspondence I received from [REDACTED]. He feels the CDC should update their warning information to include a "black box" warning for malaria drugs. I would appreciate your responding directly to [REDACTED].

Thank you very much for your consideration and assistance in this matter.

Yours truly,


Tom Price, M.D.
Member of Congress

TP/tm

[REDACTED]

*Malaria -
* Ref to FDA*

PRIVACY RELEASE FORM
Congressman Tom Price, M.D.
Sixth Congressional District of Georgia

Date: 9-22-15

Name: [REDACTED]
(Mr./Mrs./Ms.)

Street Address [REDACTED]

City/State/Zip [REDACTED]

Home phone [REDACTED]

Work/Cell Phone [REDACTED]

Social Security # [REDACTED] and/or A#, VA#, etc. [REDACTED]

Date of Birth [REDACTED] AGENCY Involved Boyle Co VA/D/10/10/10

Spouse/ Other Contact N/A

Please provide a brief explanation of your situation with the above agency and specify how our office may be of assistance. Continue on another sheet if necessary. Send photocopies only of any documents you may have to support your claim. It is important for you to retain the originals for your files.

See attached.

I do however do not give permission to
access any of my medical records. Use of
my contact information is acceptable.

Privacy Act Release

I hereby authorize Congressman Tom Price and those acting in his behalf, in order to attempt to be of assistance to me, to obtain information in accordance with applicable laws and regulations, information pertaining specifically to this matter.

SIGN

HERE [REDACTED]

DATE 9/22/15

Once complete, please return it to:

Office of Congressman Tom Price, M.D.
85-C Mill Street, Suite 300
Roswell, GA 30075
770-998-0050 Fax

Meeting with Ryan Brooks of Congressman's Tom Price Office 9/10/15

Education:

- CBS evening news segment on 12/23/2013
US troops given anti-malaria drug despite concern over side effects. [CBS.com](#)
- BBC news segment on 8/17/2015
Call for Army to stop using malaria drug mefloquine [BBC.com](#)
- Lariam website [Lariaminfo.org](#)
- Letter from Drs. Remington Nevin and Elspeth Ritchie to Peace Corp office
- My experiences as a businessman

Requests

- Antimalarial reform at the Peace Corp
- OSHA recommendation letter. Technical Bulletin 02-04-12. Should be a legal requirement!
- FDA "Risk Mitigation Strategies" (RMS) should be emphasized for this drug.
- FDA boxed warning NOT ENOUGH!!!
- CDC warning on website should be enhanced even further



DEPARTMENT OF HEALTH & HUMAN SERVICES

Food and Drug Administration
Silver Spring, MD 20993

The Honorable Tom Price
Member, U.S. House of Representatives
85-C Mill Street, Suite 300
Roswell, GA 30075

DEC 30 2015

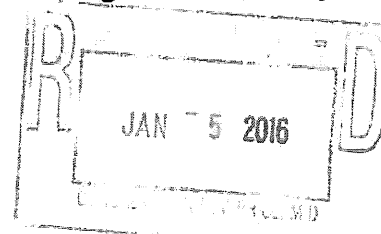
Dear Dr. Price:

Thank you for the letter of September 24, 2015, on behalf of your constituent [REDACTED] of Dunwoody, Georgia, regarding the antimalarial drug mefloquine hydrochloride, previously marketed under the trade name Lariam, but no longer marketed.

Mefloquine hydrochloride is indicated for the treatment of mild to moderate acute malaria caused by specific strains of the organism, including strains that are resistant to other malaria medications. As you are aware, malaria is a serious and potentially life-threatening parasitic infection. The availability of anti-malarial drugs such as mefloquine hydrochloride is an important treatment option for patients who are infected with a resistant strain or cannot tolerate other anti-malarial drugs.

Before approving a new drug product, FDA carefully reviews safety and efficacy data and evaluates whether a drug's benefits outweigh its known risks. Adverse events reported during clinical trials are included in the drug labeling, which advises healthcare professionals and patients on safe and effective use of the product. After drug approval, additional adverse events, including infrequent and rare side effects, may become evident as the drug becomes available to a larger population. FDA requires manufacturers to report adverse experiences in accordance with regulations and tracks such information in the FDA Adverse Event Reporting System (FAERS). Additionally, FDA encourages voluntary reporting from consumers and health professionals to MedWatch, the FDA Safety Information and Adverse Event Reporting Program. FDA accepts MedWatch reports submitted by mail or electronically at: www.fda.gov/medwatch/report.htm.

As noted by [REDACTED], mefloquine hydrochloride is associated with increased risk of neurologic and psychiatric adverse reactions; in July 2013, FDA strengthened warnings about this risk. This included adding a boxed warning -- FDA's strongest warning about adverse reactions -- to the label. The boxed warning states that mefloquine hydrochloride may cause neuropsychiatric adverse reactions that can persist after mefloquine has been discontinued and that it should not be prescribed for prophylaxis in patients with major psychiatric disorders. FDA also revised the Medication Guide dispensed with each prescription and the wallet card to include this new safety information and the possibility that the neurologic side effects may



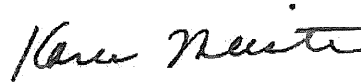
Page 2 - The Honorable Tom Price

persist or become permanent. In addition, FDA issued a Drug Safety Communication to alert patients, caregivers, and health professionals about the risks associated with mefloquine hydrochloride. More information about the Drug Safety Communication can be found at: <http://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm362887.htm>.

FDA considers mitigation and prevention of malaria a top priority and is fully engaged in scientific efforts to address this issue.

Thank you, again, for contacting us concerning this matter. Please let us know if you have further questions.

Sincerely,



Karen G. Meister
Supervisory Congressional
Affairs Specialist

Schattner, Aimee (CDC/OD/CDCWO)

From: Johnson, Rachel (CDC/CGH/DGHP)
Sent: Friday, September 09, 2016 1:26 PM
To: Huston, Michael Jared (CDC/OD/OCS)
Subject: FW: Congressional Letter of Concern - Congressman Tom Price re Contract with Catmedia, Inc.

Attachments: [Redacted]

FYI

Rachel Johnson
Lead Public Health Analyst, Policy & Issues Management Team
Office of Policy, Performance and Communications (OPPC)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCCO)
Centers for Disease Control and Prevention (CDC)
rax3@cdc.gov | 770-488-2904 office | 404-416-7783 cell



From: Thomas, Stephanie (CDC/OCCO/OFR/OPPC)
Sent: Tuesday, August 30, 2016 12:20 PM
To: Johnson, Rachel (CDC/OCCO/OFR/OPPC) <rax3@cdc.gov>
Subject: Congressional Letter of Concern - Congressman Tom Price re Contract with Catmedia, Inc.

Hey Rachel,

As follow-up to Acesa's e-mail below, CDC IMAC forwarded this inquiry to me this morning and requested that OFR draft a response for OCCO's review/signature.

[Redacted] wrote to Congressman Tom Price, MD (R-GA) expressing concerns regarding being forced out of their contract with CDC (Contract # 200-2013-56505) along with other small businesses. [Redacted] also noted that Catmedia, inc. has been ignored, lied to and misled regarding this situation and were made aware by their employees who were contacted by Northrup Grumman, who is now competing for the contract along with ICF.

Bonnie Kennedy is the CO on this award in Dale DeFilippis' branch.

For your awareness, I plan to reach out to Bonnie and Dale for input on our response. Please let me know if you have any concerns or suggestions on this approach.

Best Regards,
Stephanie

Stephanie Thomas
Public Health Analyst, Policy and Issues Management Team
Office of Policy, Performance, and Communications (OPPC)

Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Centers for Disease Control and Prevention (CDC)
sthomas3@cdc.gov | 770-488-1114 office | 404-388-7605 cell



From: Mercadel, Acesa (CDC/OCOO/OD)
Sent: Thursday, August 25, 2016 1:44 PM
To: Johnson, Rachel (CDC/OCOO/OFR/OPPC) <rax3@cdc.gov>; Thomas, Stephanie (CDC/OCOO/OFR/OPPC) <sgt8@cdc.gov>
Subject: [REDACTED] concern

Good afternoon,

I received the attached inquiry which should be coming your way via activator. Sherri would like to review/clear the response once prepared.

From: Poole, Jennifer [<mailto:Jennifer.Poole@mail.house.gov>]
Sent: Thursday, August 25, 2016 12:30 PM
To: Mercadel, Acesa (CDC/OCOO/OD) <ddx0@cdc.gov>
Subject: [REDACTED]

Dear Ms. Mercadel,

One of Congressman Price's constituent's has contacted our office regarding a matter in which we believe you could be helpful. Please find attached the correspondence we received from [REDACTED].

Thank you in advance for your consideration and any assistance you might have to offer our constituent.

Sincerely,

Jennifer Poole
Director of Constituent Services
Office of Congressman Tom Price, M.D.
85-C Mill Street, Suite 300
Roswell, GA 30075
770-998-0049
770-998-0050 fax

Confidential Notice: This e-mail message, including any attachments, is for the sole use of the intended recipient (s) and may contain confidential and privileged information. Any unauthorized review; use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

2 of 3

PRIVACY RELEASE FORM
Congressman Tom Price, M.D.
Sixth Congressional District of Georgia

Date: August 15, 2016

Name: _____
(Mr./Mrs./Ms.) _____
Street Address _____
City/State/Zip _____

Home phone _____
Work/Cell Phone _____

Social Security # _____
FED TAX ID # _____
and/or A#, VA#, etc. 54-1886005

Date of Birth _____ AGENCY Involved CDC

Spouse/ Other Contact _____

.....
Please provide a brief explanation of your situation with the above agency and specify how our office may be of assistance. Continue on another sheet if necessary. Send *photocopies only* of any documents you may have to support your claim. It is important for you to retain the originals for your files.

Please see page 2 -

Contract # 200-2013-56505

Privacy Act Release

I hereby authorize Congressman Tom Price and those acting in his behalf, in order to attempt to be of assistance to me, to obtain in accordance with applicable laws and regulations, information pertaining specifically to this matter.

SIGN
HERE [Signature]

DATE 8-15-2016

Once complete, please return it to: **Office of Congressman Tom Price, M.D.**
85-C Mill Street, Suite 300
Roswell, GA 30075
770-998-0050 Fax

3 of 3

Monday, August 15, 2016 at 4:44:46 PM Eastern Daylight Time

Subject: CDC business practices

Date: Friday, August 12, 2016 at 1:28:58 PM Eastern Daylight Time

From: [REDACTED]

To: Cassius Butts, Terri Denison

BCC: Scott Dixon, Ronetta L Andrus

Dear Cassius and Terri,

I am writing you, not just as the CEO of CATMEDIA, but as the Georgia Small Business Person of the Year. My company, as well as several other small businesses are being forced out of our contracts at the CDC, and those contracts are being competed between Northrup Grumman and ICF...two very large businesses. We have been ignored, misled and lied to regarding this situation and the only way we found out about it was that our employees told us what was going on as they were contacted by Northrup.

We have received good feedback on our performance and in fact the CDC recruited and has hired 3 of our employees. That is another issue.

Scott Dixon, our president, informally met with Gwen Miles yesterday and she said she was aware of what was going on and that she couldn't do anything about it. She said program is calling the shots and that the CDC does not care about small business.

This is outrageous. To say that the CDC is one of the most closed agencies to do business with is an understatement.

I have always fought my own battles but it took me 11 years to get work from that agency. How many small businesses would or could be that persistent. If you are not a past employee or a BFF it is nearly impossible.

I feel a duty to use whatever influence I have, to impact this attack on small business. I am considering contacting my congressmen and senator and asking for a congressional investigation.

Your council and help in this matter would be greatly appreciated

Please advise,

[REDACTED]



CATMEDIA is honored to be listed as #94 of Inc. 500's Fastest Growing Companies in 2015.

[REDACTED]



This message, and any attachment(s) included, is intended exclusively for the individual or entity to whom it is addressed. This message may contain information that is proprietary, privileged or confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify the sender immediately by email and delete all copies of this message, and any attachment(s) included.

Schattner, Aimee (CDC/OD/CDCWO)

From: Thomas, Stephanie (CDC/OCOO/OFR/OPPC) on behalf of OFR Policy (CDC)
Sent: Wednesday, September 14, 2016 10:16 AM
To: Jennifer.Poole@mail.house.gov
Cc: Mercadel, Acesa (CDC/OPHSS/CSELS)
Subject: FW: Catherine Downey concern
Attachments: Letter of Concern - Congressman Tom Price re CatVideo Contract # 200-2013-56505 - FINAL pdf.pdf

Good Morning Jennifer,

As follow-up to your inquiry below, please find attached the official response to [REDACTED] concern regarding contract number 200-2013-56505.

This response will be mailed to [REDACTED] via US Mail today.

Best Regards,
Stephanie

Stephanie Thomas

Public Health Analyst, Policy and Issues Management Team
Office of Policy, Performance, and Communications (OPPC)
Office of Financial Resources (OFR)
Office of the Chief Operating Officer (OCOO)
Centers for Disease Control and Prevention (CDC)
stthomas3@cdc.gov | 770-488-1114 office | 404-388-7605 cell



From: Poole, Jennifer [<mailto:Jennifer.Poole@mail.house.gov>]
Sent: Thursday, August 25, 2016 12:30 PM
To: Mercadel, Acesa (CDC/OCOO/OD) <ddx0@cdc.gov>
Subject: Catherine Downey concern

Dear Ms. Mercadel,

One of Congressman Price's constituent's has contacted our office regarding a matter in which we believe you could be helpful. Please find attached the correspondence we received from [REDACTED]

Thank you in advance for your consideration and any assistance you might have to offer our constituent.

Sincerely,

Jennifer Poole

Director of Constituent Services
Office of Congressman Tom Price, M.D.
85-C Mill Street, Suite 300
Roswell, GA 30075
770-998-0049
770-998-0050 fax

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Centers for Disease Control
and Prevention (CDC)
Atlanta GA 30333

September 14, 2016

[REDACTED]
[REDACTED]
[REDACTED] 200
[REDACTED] 10904

Dear [REDACTED]

Thank you for your letter to Congressman Tom Price expressing concerns regarding [REDACTED]'s contract with the Centers for Disease Control and Prevention (CDC). Your message was shared with the appropriate CDC subject matter experts for review and forwarded to my office for a response.

CDC awarded contract number 200-2013-56505 to CatVideo Inc. (doing business as CatMedia, Inc.) non-competitively, on August 19, 2013, under the terms and conditions of the Small Business Administration's 8(a) business development program. The contract required CatVideo Inc. to provide public affairs services to CDC for a 12-month base period, plus two 12-month option periods. The two 12-month option periods were exercised and a two-week option was executed to extend the services through September 9, 2016.

In 2015, CDC determined that it would be in the best interest of the Government to award multiple Blanket Purchase Agreements (BPAs) to existing General Services Administration (GSA) schedule holders capable of providing health communications services. This approach was established to ensure ongoing competition for CDC health communications requirements and also to preserve opportunities for small businesses. At the end of a competitive process, sixteen (16) awards were made, six (6) of which are small businesses. The proposal submitted by CatVideo, Inc. did not receive a high enough technical rating for an award under this mechanism.

We appreciate your partnership and encourage you to periodically check www.grants.gov and www.fedbizopps.gov to review the grant and contract opportunities offered and determine if your services are responsive to any of the posted announcements. If you determine your services are responsive to any of the posted announcements, please be assured that you will be given every consideration allowable by law during the application review.

Thank you again for your letter and support of CDC's public health mission.

Sincerely,

Christa Capozzola
Director, Office of Financial Resources
Centers for Disease Control and Prevention

Schattner, Aimee (CDC/OD/CDCWO)

From: Bigham, Jane E. (CDC/OD/CDCWO)
Sent: Thursday, January 22, 2015 5:21 PM
To: 'DiBlasio, Carla'
Subject: RE: IDSA Briefing today

Hi Carla,

Not a problem! I had to leave right at 4:30 from the Capitol yesterday, but I will likely be back over there in the near future – and will keep you posted! It would be great to meet you in person. In the meantime, if you need anything on CDC's work on food safety, worker safety and health and/or global health – feel free to email/call me!

Regards,
Jane

From: DiBlasio, Carla [mailto:Carla.Diblasio@mail.house.gov]
Sent: Wednesday, January 21, 2015 4:20 PM
To: Bigham, Jane E. (CDC/OD/CDCWO)
Subject: RE: IDSA Briefing today

Hi Jane,

My sincere apologies, but I was unable to make it to the briefing this afternoon. I got held up in the office with various meetings that took longer than expected. I only started working for Dr. Price last week, so it's been a little bit of a whirlwind (but an exciting one nonetheless)! I need to join the Congressman for another meeting at 4:30 pm this afternoon. I would still love the opportunity to introduce myself to you. Will you still be around at 5:00/5:15 pm or any other time this week?

Thanks for your understanding.

Best,
Carla

Carla DiBlasio, Esq.
Congressman Tom Price, M.D. (GA-06)
100 Cannon House Office Building
Washington, DC 20515 | 202.225.4501



From: Diblasio, Carla
Sent: Wednesday, January 21, 2015 12:57 PM
To: 'Bigham, Jane E. (CDC/OD/CDCWO)'
Subject: RE: IDSA Briefing today

Thanks Jane,

I really appreciate you reaching out. I would be delighted to meet you today. It's an exceptionally busy day, so I'm worried I won't be able stay for the entire hour, but I'll be sure to introduce myself. I'm wearing a purple pencil skirt and black jacket today. I look forward to meeting you!

Best,
Carla

Carla DiBlasio, Esq.
Congressman Tom Price, M.D. (GA-06)
100 Cannon House Office Building
Washington, DC 20515 | 202.225.4501



From: Bigham, Jane E. (CDC/OD/CDCWO) [<mailto:vsy0@cdc.gov>]
Sent: Wednesday, January 21, 2015 11:46 AM
To: Diblasio, Carla
Subject: RE: IDSA Briefing today

Hi Carla,

I work with CDC Washington and will be attending the IDSA briefing today on rapid diagnostic testing. Dr. Beth Bell from CDC is one of the presenters – and she had the opportunity to meet with Rep. Price in September of last year when he toured the CDC Atlanta facility. If you are still planning to attend, please come by and say hello if you have a moment – it'd be great to meet you in person. I have on a polka-dotted top and will be milling about the presenter's table.

Regards,
Jane

Jane Bigham, MPH
CDC Washington Office
Tel: 202-245-0600
jbigham@cdc.gov

Schattner, Aimee (CDC/OD/CDCWO)

From: Bigham, Jane E. (CDC/OD/CDCWO)
Sent: Friday, October 07, 2016 2:44 PM
To: Bigham, Jane E. (CDC/OD/CDCWO)
Cc: Tourk, Nancy R. (CDC/OD/CDCWO)
Subject: CDC Update: CDC funds 34 innovative projects to combat antibiotic resistance

Good afternoon,

I am writing to let you know that the Centers for Disease Control and Prevention (CDC) has recently awarded more than \$14 million to support new approaches to combat antibiotic resistance, and three institutions in your state are recipients of this funding:

Institution Name	State	Funding
The Georgia Institute of Technology	GA	\$253,242
Emory University	GA	\$160,000
University of Georgia	GA	\$266,072

The awards support the CDC’s Antibiotic Resistance Solutions Initiative. As part of the \$160 million that Congress appropriated to CDC in FY 2016 to combat antibiotic resistance, the initiative implements the tracking, prevention, and antibiotic stewardship activities outlined in the National Action Plan for Combating Antibiotic-Resistant Bacteria.

Many of the grant awards announced will fund research projects to better understand:

- How antibiotics disrupt a healthy microbiome (microorganisms naturally present in the body)
- How a disrupted microbiome puts people at risk
- How antibiotic stewardship can be improved to better protect the microbiome

The body’s microbiome is a community of naturally occurring microbes in and on our bodies. Bacteria and other microbes live on our skin and in our gut, mouth, and respiratory and urinary tract. Antibiotics are life-saving medicines, but they also can disrupt the microbiome by changing the balance of good and bad bacteria. With a disrupted microbiome, resistant bacteria can take over (or colonize) and the body is less able to defend against infection, putting people at risk for potentially untreatable illnesses. Patients with microbiomes disrupted by antibiotics are vulnerable to infections by tough-to-kill germs such as Methicillin-resistant *Staphylococcus aureus* (MRSA), Carbapenem-resistant Enterobacteriaceae (CRE) and *Clostridium difficile* (*C. difficile*). These patients can then carry drug-resistant bacteria, which can easily spread to other people, especially those who also have a disrupted microbiome.

Please let us know if you have any questions or would like to learn more about CDC’s work in this area.

Thank you,
Jane

Jane Bigham, MPH
CDC Washington Office
Tel: 202-245-0600
Jbigham@cdc.gov



**Centers for Disease Control and Prevention
Welcomes
Rep. Tom Price
Mr. Kyle McGowan**



AGENDA: FRIDAY, MARCH 16, 2012

TIME	SESSION	SPEAKER/PROGRAM EXPERT	LOCATION
	<i>Arrive CDC Chamblee Campus 4770 Buford Highway Entrance</i>	<i>Security checkpoint guards will direct Rep. Price and Mr. McGowan to park at the Visitors Center and then to the Visitors Center Conference Room. Group will meet at the Conference Room and walk to Building 110.</i>	Visitors Center Bldg 162
10:00-10:05 a.m.	<i>Greet Rep. Price and Mr. McGowan and walk to Building 110</i>	Tom Frieden, Sherri Berger, Robin Ikeda, Jim Pirkle, Ali Khan	Visitors Center Conference Room
10:05-10:20 a.m.	Chamblee Overview and Discussion	Tom Frieden, Sherri Berger	Building 110 Room 5111
10:20-11:00 a.m.	CDC Labs in Action – Lab Tour	Jim Pirkle, Ali Khan	Building 110
11:00 a.m.	<i>Walk back to parking garage</i>		Visitors Center
11:05 a.m.	<i>Depart</i>		

Logistics specialist: Gayle Hickman, 404-639-7158 (direct); 678-910-3328 (mobile)

Schattner, Aimee (CDC/OD/CDCWO)

From: Puchalla (Creitz), Charlene <Charlene.Puchalla@mail.house.gov>
Sent: Monday, March 05, 2012 11:57 AM
To: Brand, Anstice M. (CDC/OD/CDCWO)
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Good morning Anstice,

I hope you are doing well!

I wanted to follow up with you to reconfirm the Congressman's visit to the CDC facility located at 3005 Chamblee Tucker Road, 4th Floor, Atlanta, GA 30341.

I also need to get the following details:

ATTENDEES: If the Congressman will be meeting with specific individuals from the CDC, please provide a list of the names.

PRESS: Will you be inviting any outside press? You are welcome to, we just need to know prior to the visit.

AGENDA: Could you please provide the agenda for the tour?

REMARKS/TOPIC: Would you like the Congressman to deliver any formal remarks to the employees/management during the tour?

PARKING: Any specific parking instructions?

CONTACT: You are our main contact- Anstice Brand, 202-245-0622; atb6@cdc.gov . Is there an onsite contact, also?

Thanks!!
Charlene

From: Brand, Anstice M. (CDC/OD/OADP) [<mailto:atb6@cdc.gov>]
Sent: Thursday, January 26, 2012 4:34 PM
To: Puchalla (Creitz), Charlene
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

That works for us too. I will get back to you with logistics information. Thanks so much! We will look forward to it!

Anstice

From: Puchalla (Creitz), Charlene [<mailto:Charlene.Puchalla@mail.house.gov>]
Sent: Thursday, January 26, 2012 11:37 AM
To: Brand, Anstice M. (CDC/OD/OADP)
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Good morning Anstice,

March 16th would be the best date for Congressman Price's schedule. He will be available from 10:00-11:00 AM.

Because the Congressman's new district will encompass the Chamblee/Doraville area, he would love to visit the office located on Chamblee Tucker Road. Also, he will be in the Chamblee area for previously scheduled events on March 16th so this would correspond with his schedule nicely.

Thank you,
Charlene

From: Brand, Anstice M. (CDC/OD/OADP) [<mailto:atb6@cdc.gov>]
Sent: Wednesday, January 25, 2012 5:16 PM
To: Puchalla (Creitz), Charlene
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Thanks so much Charlene! I will check on the 16th, and will wait to hear from you on the 15th. Thanks again!

From: Puchalla (Creitz), Charlene [<mailto:Charlene.Puchalla@mail.house.gov>]
Sent: Wednesday, January 25, 2012 5:13 PM
To: Brand, Anstice M. (CDC/OD/OADP)
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Hi Anstice,

Thank you for getting back to me so quickly with your available dates!

Based on what you have listed, it look as if March 16th may work the best. I may be able to offer you Wednesday, March 15th but can't confirm today. I will be in touch tomorrow to let you know.

Thanks again,
Charlene

From: Brand, Anstice M. (CDC/OD/OADP) [<mailto:atb6@cdc.gov>]
Sent: Wednesday, January 25, 2012 11:14 AM
To: Puchalla (Creitz), Charlene
Cc: Haughey, Rachel
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Charlene, unfortunately March 2nd doesn't work for Dr. Frieden. I know the 9th doesn't work on your end. On our end, we could do 2/17 any time after 2pm, or 3/16 between 9am and 12noon. Would either of those work for you?

From: Puchalla (Creitz), Charlene [<mailto:Charlene.Puchalla@mail.house.gov>]
Sent: Tuesday, January 24, 2012 2:45 PM
To: Brand, Anstice M. (CDC/OD/OADP)
Cc: Haughey, Rachel
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Hi Anstice,

As Rachel mentioned, I am happy to help with scheduling and working out the details for the Congressman to visit the CDC headquarters.

Unfortunately, he will not able to visit on February 22nd, due to a conflict with another appointment on his calendar. I would be happy to find a different date for a visit.

Thanks,
Charlene

From: Haughey, Rachel
Sent: Tuesday, January 24, 2012 2:34 PM
To: 'Brand, Anstice M. (CDC/OD/OADP)'
Cc: Puchalla (Creitz), Charlene
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Anstice,

That sounds good. I am looping in Charlene, our district scheduler, she will handle the details from here on.

Thanks!

Rachel Haughey
Executive Assistant
Congressman Tom Price, M.D.

From: Brand, Anstice M. (CDC/OD/OADP) [<mailto:atb6@cdc.gov>]
Sent: Tuesday, January 24, 2012 2:32 PM
To: Haughey, Rachel
Subject: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Rachel, per our discussion, just confirming the scheduled time 3pm – 5pm on 2/22 for a visit to CDC's Headquarters. Do you know if Dr. Price will likely bring any staff with him? We will be in touch with logistics information and an agenda asap. Thanks so much, we will look forward to it!

Anstice

Anstice Brand
CDC Washington Office
(202) 245-0622
www.cdc.gov/washington

Schattner, Aimee (CDC/OD/CDCWO)

From: Brand, Anstice M. (CDC/OD/CDCWO)
Sent: Monday, March 05, 2012 1:46 PM
To: 'Puchalla (Creitz), Charlene'
Cc: Hickman, Gayle J. (CDC/OD/OCS)
Subject: Confirming 3/16 10 am - 11 am.

Thanks so much Charlene! Yes, we are confirmed for March 16th from 10am – 11am at the Chamblee campus.

He will be meeting with Dr. Thomas Frieden, the CDC Director, Dr. Jim Pirkle, Director of CDC's Division of Laboratory Sciences at our National Center for Environmental Health and likely Dr. Ali Khan, Director of CDC's Office of Public Health Preparedness and Response and possibly a few others. See below for more specific responses in red.

Does the Congressman plan to bring any staff with him?

I hope this helps! Please let me know if you have other questions. Thanks so much!

Anstice

From: Puchalla (Creitz), Charlene [mailto:Charlene.Puchalla@mail.house.gov]
Sent: Monday, March 05, 2012 11:57 AM
To: Brand, Anstice M. (CDC/OD/OADP)
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Good morning Anstice,

I hope you are doing well!

I wanted to follow up with you to reconfirm the Congressman's visit to the CDC facility located at 3005 Chamblee Tucker Road, 4th Floor, Atlanta, GA 30341.

I also need to get the following details:

ATTENDEES: If the Congressman will be meeting with specific individuals from the CDC, please provide a list of the names.

Thomas Frieden, CDC Director
Sheri Berger, Chief Management Official
Jim Pirkle, Director of Laboratory Sciences, National Center for Environmental Health
Ali Khan, Director of CDC's Office of Public Health Preparedness and Response

Possibly:

Robin Ikeda, Director Office of Non-communicable Diseases, Injury and Environmental Health (ONDIEH)
Sandy Bonzo, Principal Advisor, ONDIEH

PRESS: Will you be inviting any outside press? You are welcome to, we just need to know prior to the visit.
Not planning to invite press.

AGENDA: Could you please provide the agenda for the tour?

I will send a more formal agenda. It will likely include a 20 minute conversation with Dr. Frieden and then a tour of several labs.

REMARKS/TOPIC: Would you like the Congressman to deliver any formal remarks to the employees/management during the tour?

Given the shorter timeframe, we had planned only on an informal discussion followed by a tour (wanted to fit in as much of a tour as possible), but please let me know if the Congressman like to do that? Possibly at a future date?

PARKING: Any specific parking instructions?

I have cced Gayle Hickman who is working on logistics for the visit. She can provide parking information.

CONTACT: You are our main contact- Anstice Brand, 202-245-0622; atb6@cdc.gov . Is there an onsite contact, also? Onsite contact is Gayle Hickman (cced).

Thanks again for your help!

Thanks!!

Charlene

From: Brand, Anstice M. (CDC/OD/OADP) [<mailto:atb6@cdc.gov>]
Sent: Thursday, January 26, 2012 4:34 PM
To: Puchalla (Creitz), Charlene
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

That works for us too. I will get back to you with logistics information. Thanks so much! We will look forward to it!

Anstice

From: Puchalla (Creitz), Charlene [<mailto:Charlene.Puchalla@mail.house.gov>]
Sent: Thursday, January 26, 2012 11:37 AM
To: Brand, Anstice M. (CDC/OD/OADP)
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Good morning Anstice,

March 16th would be the best date for Congressman Price's schedule. He will be available from 10:00-11:00 AM.

Because the Congressman's new district will encompass the Chamblee/Doraville area, he would love to visit the office located on Chamblee Tucker Road. Also, he will be in the Chamblee area for previously scheduled events on March 16th so this would correspond with his schedule nicely.

Thank you,
Charlene

From: Brand, Anstice M. (CDC/OD/OADP) [<mailto:atb6@cdc.gov>]
Sent: Wednesday, January 25, 2012 5:16 PM
To: Puchalla (Creitz), Charlene
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Thanks so much Charlene! I will check on the 16th, and will wait to hear from you on the 15th. Thanks again!

From: Puchalla (Creitz), Charlene [<mailto:Charlene.Puchalla@mail.house.gov>]
Sent: Wednesday, January 25, 2012 5:13 PM
To: Brand, Anstice M. (CDC/OD/OADP)
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Hi Anstice,

Thank you for getting back to me so quickly with your available dates!

Based on what you have listed, it look as if March 16th may work the best. I may be able to offer you Wednesday, March 15th but can't confirm today. I will be in touch tomorrow to let you know.

Thanks again,
Charlene

From: Brand, Anstice M. (CDC/OD/OADP) [<mailto:atb6@cdc.gov>]
Sent: Wednesday, January 25, 2012 11:14 AM
To: Puchalla (Creitz), Charlene
Cc: Haughey, Rachel
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Charlene, unfortunately March 2nd doesn't work for Dr. Frieden. I know the 9th doesn't work on your end. On our end, we could do 2/17 any time after 2pm, or 3/16 between 9am and 12noon. Would either of those work for you?

From: Puchalla (Creitz), Charlene [<mailto:Charlene.Puchalla@mail.house.gov>]
Sent: Tuesday, January 24, 2012 2:45 PM
To: Brand, Anstice M. (CDC/OD/OADP)
Cc: Haughey, Rachel
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Hi Anstice,

As Rachel mentioned, I am happy to help with scheduling and working out the details for the Congressman to visit the CDC headquarters.

Unfortunately, he will not able to visit on February 22nd, due to a conflict with another appointment on his calendar. I would be happy to find a different date for a visit.

Thanks,
Charlene

From: Haughey, Rachel
Sent: Tuesday, January 24, 2012 2:34 PM
To: 'Brand, Anstice M. (CDC/OD/OADP)'
Cc: Puchalla (Creitz), Charlene
Subject: RE: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Anstice,

That sounds good. I am looping in Charlene, our district scheduler, she will handle the details from here on.

Thanks!

Rachel Haughey
Executive Assistant
Congressman Tom Price, M.D.

From: Brand, Anstice M. (CDC/OD/OADP) [<mailto:atb6@cdc.gov>]
Sent: Tuesday, January 24, 2012 2:32 PM
To: Haughey, Rachel
Subject: Confirming 2/22 visit to CDC Headquarters 3pm - 5pm.

Rachel, per our discussion, just confirming the scheduled time 3pm – 5pm on 2/22 for a visit to CDC’s Headquarters. Do you know if Dr. Price will likely bring any staff with him? We will be in touch with logistics information and an agenda asap. Thanks so much, we will look forward to it!

Anstice

Anstice Brand
CDC Washington Office
(202) 245-0622
www.cdc.gov/washington

Schattner, Aimee (CDC/OD/CDCWO)

From: Street, Amanda <Amanda.Street@mail.house.gov>
Sent: Friday, July 12, 2013 5:02 PM
To: Brand, Anstice M. (CDC/OD/CDCWO)
Cc: Menard, Barbara (CDC/OD/OADP); Brumsted, Lauren K. (CDC/OD/OADP)
Subject: Re: CDC Visit Sample Agendas

Hi Everyone,

I've looked over the agendas and also talked to Dr. Price. We both agree that it would be a good idea to visit the Chamblee campus, especially given your description of the guy who gives tours of the Environmental Health Lab. I will let you decide this, but I believe that it might be best if we start out at the Chamblee campus in the morning and then move to the main campus. I also think its important to see the location since it is in Dr. Price's district.

We are open to what you think is best, however, as far as the rest of the schedule goes. If you want to try to incorporate some of the other members' interests, we are fine with that.

I hope this gives you all the leeway you need to create an educational and memorable trip for the members. If you need anything else at all, please let me know.

Thanks for all your hard work! Congressman Price is very appreciative!

Have a great weekend!

Amanda Street
Congressman Tom Price, MD
100 Cannon House Office Building
Washington, DC 20515
202-225-4501

From: <Brand>, "Anstice M. (CDC/OD/OADP)" <atb6@cdc.gov>
Date: Thursday, July 11, 2013 1:31 PM
To: Rep Tom Price <Amanda.Street@mail.house.gov>
Cc: "Menard, Barbara (CDC/OD/OADP)" <vqe7@cdc.gov>, "Brumsted, Lauren K. (CDC/OD/OADP)" <jzi1@cdc.gov>
Subject: CDC Visit Sample Agendas

Hi Amanda,

Thanks again for taking time to talk to us about a potential visit to CDC. As promised, attached are a couple of sample agendas from previous visits including a range of lengths and specific interests - one from your boss's visit to Chamblee, the McCarthy visit in April of this year on a specific topic (Valley Fever) and a visit we did for a large group of Congressional staff in 2011. As we said, we are happy to tailor a visit in any way.

As Barb mentioned, I will be away from tomorrow until July 29th. I am ccing Barb and Lauren Brumsted who can answer questions while I am gone.

Thanks again so much for your interest. We look forward to working with you!

Anstice Brand
CDC Washington Office
(202) 245-0622
www.cdc.gov/washington

Schattner, Aimee (CDC/OD/CDCWO)

From: Brand, Anstice M. (CDC/OD/CDCWO)
Sent: Monday, August 12, 2013 12:59 PM
To: 'Karl Moeller'; 'Street, Amanda'
Cc: Menard, Barbara (CDC/OD/OADP)
Subject: RE: Fall Tours

Hi Amanda,

I hope you had a nice vacation. Just checked in with our scheduling staff. Would October 21st or November 8th work for Rep. Price?

Thanks so much!

Anstice

Anstice Brand
CDC Washington Office
(202) 245-0622
www.cdc.gov/washington

From: Karl Moeller [mailto:KarlM@CPHFoundation.org]
Sent: Monday, August 12, 2013 11:06 AM
To: Street, Amanda
Cc: Menard, Barbara (CDC/OD/OADP); Brand, Anstice M. (CDC/OD/OADP)
Subject: Re: Fall Tours

Hi Amanda,

I'm glad we were able to catch up now that we are both back from our respective vacations - and I hope you are well rested.

As we discussed this morning, our first order of business will be to find a travel date that would enable us to complete ethics forms (which must be turned in a month in advance) and to then work together to ensure the MOC's our organization would like to invite actually hear of this great opportunity. While CPHF will gladly send along invites once a date is found (I've CC'd the CDC for help with that), I'd love your help afterwards with a little follow up, if you are OK with that.

In addition to yourself and the other members of the GA deligation, some of the names I'm considering extending invitations to include: Rodney Alexander (R-LA), Bill Cassidy (R-LA), Kay Granger (R-TX), Tim Murphy (R-PA), Hal Rogers (R-KY), Mike Rogers (R-MI), Ed Royce (R-CA), Mike Simpson (R-ID), John Shimkus (R-IL), Fred Upton (R-MI) and David Joyce (R-OH).

Once a date is firm, I'll deliver letters to the offices listed above – and any others I may think of between now and then.

Feel free to call and check in at any time!

KBM

Karl B. Moeller, MPA
Executive Director
The CPH Foundation

202.898.0435

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From: Karl Moeller <KarlM@CPHFoundation.org>
Date: Monday, July 29, 2013 4:09 PM
To: "Street, Amanda" <Amanda.Street@mail.house.gov>
Subject: Re: Fall Tours

Is there a time we can talk tomorrow to plan out next steps?

Best,
KBM

Karl B. Moeller, MPA
Executive Director
The CPH Foundation
202.898.0435

CPHF [Website](#) | [Blog](#) | [Facebook](#) | [Twitter](#) | [YouTube](#)

From: "Street, Amanda" <Amanda.Street@mail.house.gov>
Date: Monday, July 29, 2013 3:28 PM
To: Karl Moeller <KarlM@CPHFoundation.org>
Subject: Re: Fall Tours

Hi Karl,

Thank you so much for reaching out. I know Dr. Price would be very interested in such a tour. Please let me know what I can do to be helpful so we can get a plan in motion.

Many thanks,

Amanda Street
Congressman Tom Price, MD
100 Cannon House Office Building
Washington, DC 20515
202-225-4501

From: Karl Moeller <KarlM@CPHFoundation.org>
Date: Monday, July 29, 2013 2:39 PM
To: Rep Tom Price <Amanda.Street@mail.house.gov>
Cc: Anstice Brand <atb6@cdc.gov>
Subject: Fall Tours

Dear Amanda,

As both a Doctor and a member of Congress from Georgia who serves on the Ways and Means Health Subcommittee, I wonder if your boss might be willing to participate in a second CDC Tour similar to the one listed below. Knowing of Congressman Price's long-standing support of the agency, your office struck me as a natural partner in this effort.

As you can see from my note below, I am currently working to plan a small tour for Freshman members of the House. I hope I might also be able to organize a separate tour for another small group of interested House members. I'd welcome your ideas and feedback regarding who among your House colleagues might benefit the most from an inside look at the CDC. I'll also reach out to other offices separately.

Please feel free to call with questions. As with the tour below, I do not have a firm date in mind but again would work with you and other offices to find a date that works best for the largest number of participants.

Thanks for any help you may provide,
KBM

Karl B. Moeller, MPA
Executive Director
The CPH Foundation
202.898.0435

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From: Karl Moeller <KarlM@CPHFoundation.org>
Date: Monday, July 29, 2013 1:59 PM
To: "Weaver, Courtney" <Courtney.L.Weaver@mail.house.gov>
Cc: Anstice Brand <atb6@cdc.gov>
Subject: FW: Fall Tours

Hi Courtney,

Perhaps you've already seen the note I sent out today to all R and D freshman members of Congress in the House. I hope you'll feel free to mention this members-only Tour to any of your freshman colleagues who you think might have an interest. We don't have a date set yet, but I'm open to ideas and suggestions.

Anstice, FYI.

Best,
KBM

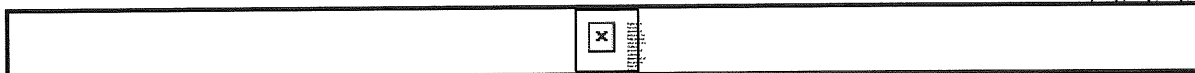
Karl B. Moeller, MPA
Executive Director
The CPH Foundation
202.898.0435

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From: "Karl Moeller, The CPH Foundation" <info@CPHFoundation.org>
Date: Monday, July 29, 2013 1:45 PM
To: Karl Moeller <KarlM@CPHFoundation.org>
Subject: Fall Tours

If you're having trouble viewing this email, you may [see it online](#).

Share This: 



Dear Karl,

Earlier this year, The Campaign for Public Health Foundation reached out to several of our nonprofit organizations in an effort to build support for a congressional tour of CDC's Atlanta headquarters. We are pleased to have several supporting groups* involved and today would like to invite Freshman members of the House of Representatives to take part in a member-only tour of the agency's Atlanta, Georgia facilities this Fall.

Since 2006, the CPH Foundation's staff has led more than 200 policy leaders on public health tours of the CDC. Participants have visited the CDC's Georgia and Colorado facilities. These tours serve as an excellent teaching tool, highlighting our nation's federal disease control and prevention efforts.

There are limited openings. If your Representative is interested in participating, please contact us soon with dates he or she is available. We will strive to accommodate as many members as possible and expect to plan a single tour on a date that works best for the largest number of participants. Note that we will need to submit travel plans for members of Congress to the Ethics Committee a full month in advance of the trip, so time is of the essence.

Thank you for your interest. For more information, please contact me with any questions or comments.

Karl B. Moeller
Executive Director
The CPH Foundation

**Those already sponsoring this tour include the following: the Association of American Veterinary Medical Colleges, the American Public Health Association, the National Association of County and City Health Officials, the National Alliance of State and Territorial AIDS Directors, the March of Dimes, and others.*

VISIT US ON THE WEB

The CPH Foundation is working to disseminate our messages to readers in ways that are most helpful to them. We post on Facebook and Twitter and have a number of videos on YouTube. We will continue working to reach an ever-expanding audience.

- Stop by our Blog: <http://cphfoundation.tumblr.com/>
- Friend us on Facebook at www.Facebook.com/CPHFoundation.
- Follow our Tweets under the handle [@CPHFoundation](https://twitter.com/CPHFoundation).
- You can also check out our videos at "[TheCPHFoundation](https://www.youtube.com/channel/UC...)" on YouTube.

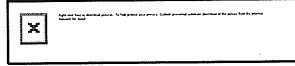
Or just pick up a phone and call us at 202-898-0435.

PO Box 15305 | Washington, DC 20003 US

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**Centers for Disease Control and Prevention
Welcomes:
Rep. Michelle Lujan Grisham
Rep. Andy Harris
Rep. Tom Price
Mr. Chris Crawford
Mr. Kyle McGowan**



AGENDA: FRIDAY, NOVEMBER 8, 2013.

TIME	SESSION	PARTICIPANTS	LOCATION
10:50am	<i>Reps. Harris and Price, Kyle McGowan and Chris Crawford arrive CDC</i>	Tom Frieden and Ed Hunter will greet visitors	Arlen Specter Headquarters Bldg. 21 entrance
10:55am	<i>Walk to Bldg. 18</i>		
11:00am-12:00noon	Reps. Harris and Price, and Kyle McGowan Tour Bio Safety Level-4 Lab and Infectious Diseases Pathology Branch	Steve Monroe Sherif Zaki Chris Paddock	Bldg. 18
12:00noon	<i>Rep. Lujan-Grisham and Karl Moeller arrive CDC</i>	Tom Frieden, Sherri Berger and Ed Hunter will greet visitors	Arlen Specter Headquarters Bldg. 21 entrance
12:00noon-12:10pm	<i>Elevators to 12th Floor</i>		
12:10pm-12:50pm	Welcome and CDC Overview: Connecting Your Communities with Cutting Edge Science	Tom Frieden Sherri Berger Ed Hunter	12302 Bldg. 21
12:50pm-1:20pm	Stories from the States	Judy Monroe Lauri Hicks Chris Jones	12302 Bldg. 21
1:20pm-1:30pm	<i>Walk to EOC</i>		
1:30pm-1:45pm	Tour EOC - Public Health Preparedness and Response	Ali Khan	EOC
1:45pm-2:30pm	Global Health Security – Stories from the Field	Anne Schuchat Tom Kenyon	EOC Conference Room
2:30pm-2:45pm	<i>Walk to Building 17 and Discussion of CDC Labs</i>	Beth Bell	
2:45pm-3:15pm	CDC Labs in Action	Mike Bell Beth Bell	Building 17
3:15pm-3:30pm	<i>Walk to Arlen Specter Headquarters Bldg. 21</i>	Tom Frieden Sherri Berger Ed Hunter	
3:30pm	<i>Depart</i>		Arlen Specter Headquarters Bldg.21 Entrance

Schattner, Aimee (CDC/OD/CDCWO)

From: Puchalla (Creitz), Charlene <Charlene.Puchalla@mail.house.gov>
Sent: Thursday, October 24, 2013 11:33 AM
To: 'Karl Moeller'
Cc: Hunter, Edward L. (CDC/OD/CDCWO); Brand, Anstice M. (CDC/OD/CDCWO)
Subject: RE: CDC Visit-November 8th

Thank you very much for your understanding!

From: Karl Moeller [mailto:KarlM@CPHFoundation.org]
Sent: Thursday, October 24, 2013 10:47 AM
To: Puchalla (Creitz), Charlene
Cc: Edward Hunter; Anstice Brand
Subject: Re: CDC Visit-November 8th

Thanks for the heads up.

KBM

Karl B. Moeller, MPA
Executive Director
The CPH Foundation
202.898.0435

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From: "Puchalla (Creitz), Charlene" <Charlene.Puchalla@mail.house.gov>
Date: Thursday, October 24, 2013 9:34 AM
To: Karl Moeller <KarlM@CPHFoundation.org>
Cc: Edward Hunter <elh1@CDC.GOV>
Subject: RE: CDC Visit-November 8th

Good morning Karl,

Thank you very much for the update. Unfortunately, due to recent changes to the Congressman's schedule, he will be unable to attend the CDC Visit on November 8th.

I am very sorry and hope this doesn't cause too much of an inconvenience.

Please let me know if I may be of assistance with anything in the future.

Thank you,
Charlene

From: Karl Moeller [mailto:KarlM@CPHFoundation.org]
Sent: Wednesday, October 23, 2013 10:34 AM
To: Puchalla (Creitz), Charlene
Cc: Edward Hunter
Subject: Re: CDC Visit-November 8th

Hello Charlene,

As of now both Rep Harris of MD (R) and Rep. Lujan Grisham of NM (D) are confirmed. I believe they should have received their Ethics approvals yesterday and was hoping to get that conformation before I wrote back. Still, ethics has told me it is all in order, so I'd be surprised to hear differently at this point. One other member is tentative, but I've not heard from anything new regarding their attendance.

I certainly hope Dr. Price can still participate and champion the agency with his House colleagues.

Best,
KBM

Karl B. Moeller, MPA
Executive Director
The CPH Foundation
202.898.0435

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From: "Puchalla (Creitz), Charlene" <Charlene.Puchalla@mail.house.gov>
Date: Wednesday, October 23, 2013 10:23 AM
To: Karl Moeller <KarlM@CPHFoundation.org>
Cc: "Street, Amanda" <Amanda.Street@mail.house.gov>
Subject: RE: CDC Visit-November 8th

Good morning Karl,

I wanted to follow up to see if you had any further information regarding the CDC Member visit on Friday, November 8th.

Please let me know as soon as you can.

Thank you!!
Charlene

From: Puchalla (Creitz), Charlene
Sent: Monday, October 21, 2013 3:19 PM
To: 'KarlM@CPHFoundation.org'
Subject: CDC Visit-November 8th

Hi Karl,

I hope you're doing well! I am Congressman Price's district scheduler. Amanda Street forwarded me your contact information regarding CDC visit on Friday, November 8th. I wanted to see if I could get the list of confirmed attendees for the visit.

Currently there is a potential conflict with the date, so I am doing all I can work it out and try to get the logistics to line up.

Thank you very much for your help! I look forward to working with you!

Charlene Puchalla

Field Representative / District Scheduler

Congressman Tom Price (GA-6)

85-C Mill Street

Suite 300

Roswell, GA 30075

Phone-(770) 998-0049



Centers for Disease Control and Prevention Welcomes Rep. Tom Price and Staff



AGENDA: TUESDAY, SEPTEMBER 2, 2014

TIME	SESSION	SPEAKER/PROGRAM EXPERT	LOCATION
1:30pm	<i>Arrive – Bldg. 21</i>	Charles Shepherd and Cherie Gray to greet Rep. Price and staff	Bldg. 21 Entrance
1:30pm – 1:35pm	<i>Walk to EOC</i>		
1:35pm – 1:50pm	Tour EOC	Bob Ruiz, Peter Rzeszotarski, Tom Frieden	EOC, Bldg. 21
1:50pm – 2:20pm	Discussion with Tom Frieden	Tom Frieden	CR 12302, Bldg. 21
2:20pm – 2:30pm	<i>Walk to Insectary</i>		
2:30pm – 2:55pm	Tour Insectary	Larry Slutsker, Namita Joshi	Bldg. 23
2:55pm – 3:00pm	<i>Walk to Bldg. 17</i>		
3:00pm – 3:25pm	CDC Labs in Action: Healthcare Associated Infections and Antibiotic Resistance	Beth Bell, Denise Cardo, Arjun Srinivasan and Brandi Limbago	Bldg. 17
3:25pm – 3:30pm	<i>Walk Back to David J. Sencer Museum</i>		Bldg. 19
3:30pm	<i>Visit David J. Sencer Museum if time allows – Depart</i>		Bldg. 19 Entrance

Schattner, Aimee (CDC/OD/CDCWO)

From: Puchalla (Creitz), Charlene <Charlene.Puchalla@mail.house.gov>
Sent: Thursday, July 17, 2014 11:40 AM
To: Brand, Anstice M. (CDC/OD/CDCWO)
Subject: Congressman Price's Staff Tour of CDC-September 2nd

Hi Anstice,

Thank you so much for your call this morning! We're looking forward to the tour on September 2nd!

I was able to briefly speak with our District Director about some of the details, and here's what we've come up with:

- Tour at the main CDC campus
- Length: 2 hours
- Target time: 1:30-3:30 PM
- Content: We're open to whatever you can offer but definitely a lab and the Emergency Ops center.
- Total Number of Attendees: 17 maximum

As I get more details, I'll be sure to let you know. If you have any questions for me, please feel free to call or email.

Have a great weekend!

Charlene Puchalla

District Scheduler/Field Representative
Office of Congressman Tom Price, M.D.
85-C Mill Street, Suite 300
Roswell, GA 30075
770-998-0049
770-998-0050 fax

Schattner, Aimee (CDC/OD/CDCWO)

From: Puchalla (Creitz), Charlene <Charlene.Puchalla@mail.house.gov>
Sent: Friday, August 15, 2014 10:52 AM
To: Hickman, Gayle J. (CDC/OD/OCS)
Cc: Boyd, Sharon (CDC/OD/CDCWO); Brand, Anstice M. (CDC/OD/CDCWO)
Subject: RE: September 2 Congressman Price's Staff Tour of CDC

Hi Gayle,

I hope you're doing great! We are VERY excited for the tour. I don't believe any of our staff has been to the CDC, so we're all buzzing around about it!

Here is a list of the attendees for the tour:

1. Congressman Tom Price
2. Dr. Elizabeth (Betty) Price
3. Kris Skrzycki, Chief of Staff, DC
4. Ryan Murphy, Director of Communications, DC
5. Kelle Long, Communications, DC
6. Cheyenne Foster, Scheduler, DC
7. Kyle Cormney, Legislative Director, DC
8. Kyle Zebley, Senior Policy Advisor, DC
9. Amanda Street, Healthcare Policy Advisor, DC
10. Meghan Graf, Staff Assistant, DC
11. Kyle McGowan, District Director, Roswell
12. Charlene Puchalla, Scheduler, Roswell
13. Tina McIntosh, Director of Constituent Services, Roswell
14. Jennifer Poole, Director of Constituent Services, Roswell
15. Ryan Brooks, Field Representative, Roswell
16. Hayley McCloud, Field Representative, Roswell
17. Diana Kincaid

The logistics for getting to the CDC are still up in the air. I know we will definitely have a large SUV, along with 3 additional cars. However, depending on Mrs. Price's schedule, she may drive separately, so we could have 4 cars.

I explained to Anstice that we'll be coming from the Grant Park area prior to (lunch at Six Feet Under), so we are on track to be there at 1:30 PM sharp. However, I am worried we may run a few minutes late. I will be sure to keep you in the loop and call you when we leave the restaurant.

Thank you so much for all your help!
Charlene

From: Hickman, Gayle J. (CDC/OD/OCS) [mailto:gfh6@cdc.gov]
Sent: Thursday, August 14, 2014 8:10 PM
To: Puchalla (Creitz), Charlene
Cc: Boyd, Sharon (CDC/OD/CDCWO); Brand, Anstice M. (CDC/OD/CDCWO)
Subject: September 2 Congressman Price's Staff Tour of CDC

Good evening, Charlene,

Hope this note finds you well. We are all excited about the upcoming visit by Congressman Price and his staffers. Can you please provide me with a list of names of all the staffers who plan to come to CDC? Will they be coming via mini-bus, van, or via their individual POVs so that we can be prepared and alert our Security Staff? Many thanks and have a great weekend!

Gayle J. Hickman
Advance Team
Office of the Chief of Staff
Centers for Disease Control and Prevention (CDC)
Building 21, 12th Floor, Cube 12111.1
1600 Clifton Road, NE, MS D14
Atlanta, Georgia 30333
Telephone: (404) 639-7158
Cell Phone: (678) 910-3328
Facsimile: (404) 639-7212

From: Puchalla (Creitz), Charlene [<mailto:Charlene.Puchalla@mail.house.gov>]
Sent: Wednesday, July 02, 2014 4:03 PM
To: Hickman, Gayle J. (CDC/OD/OCS)
Cc: McCallister, Jeremy (CDC/OD/OCS); Scales, Scott L. (CDC/OD/OCS)
Subject: RE: Congressman Price-Staff Tour of CDC-September

Thanks Gayle! I am sure you work with a lot of people, so I wasn't sure if you'd remember not. I'm glad you did ☺

Great, I'll let my boss know you are all working on it. I can get you whatever details you may need. We are in the beginning stages of planning the trip, but Congressman Price made it a point to put this on our agenda.

Thanks again and happy 4th!
Charlene

From: Hickman, Gayle J. (CDC/OD/OCS) [<mailto:gfh6@cdc.gov>]
Sent: Wednesday, July 02, 2014 3:42 PM
To: Puchalla (Creitz), Charlene
Cc: McCallister, Jeremy (CDC/OD/OCS); Scales, Scott L. (CDC/OD/OCS)
Subject: RE: Congressman Price-Staff Tour of CDC-September

Of course I remember you, Charlene, and I am delighted you have reached out to me for a tour of CDC. I am ccing my supervisors so they will know of your request and we will be back in touch. We are excited that Congressman Price is interested in bringing his staff to CDC. Take care and have a great 4th!

Gayle J. Hickman
Advance Team
Office of the Chief of Staff
Centers for Disease Control and Prevention (CDC)
Building 21, 12th Floor, Cube 12111.1
1600 Clifton Road, NE, MS D14
Atlanta, Georgia 30333
Telephone: (404) 639-7158
Cell Phone: (678) 910-3328
Facsimile: (404) 639-7212

From: Puchalla (Creitz), Charlene [<mailto:Charlene.Puchalla@mail.house.gov>]
Sent: Wednesday, July 02, 2014 3:38 PM
To: Hickman, Gayle J. (CDC/OD/OCS)
Subject: Congressman Price-Staff Tour of CDC-September

Hi Gayle,

I hope you're doing well! I am not sure if you remember me, but we worked together for the Member visit to the CDC for Congressman Price last November.

I wanted to follow up to ask you a favor/question. We are in the midst of planning our annual staff retreat. This year, the DC staff will be coming to the district. Congressman Price suggested a tour of the CDC, as a great way for the staffers to see a great asset in our district and learn more about what goes on at the CDC.

He mentioned doing something very general, as we have a variety of staffer and backgrounds, not all targeted at the health & human services area. He thought a tour, perhaps to some of the labs and the "command center" would be great!

We have 13 staffers (7 in DC and 6 in the District). Congressman Price will also attend, so the total would be 14 people. We would love to do the tour of the CDC as our first, kickoff event on Tuesday, September 2nd, in the early afternoon.

Please let me know what you think.

Thank you so much!

Charlene Puchalla
District Scheduler/Field Representative
Office of Congressman Tom Price, M.D.
85-C Mill Street, Suite 300
Roswell, GA 30075
770-998-0049
770-998-0050 fax

Schattner, Aimee (CDC/OD/CDCWO)

From: Street, Amanda <Amanda.Street@mail.house.gov>
Sent: Wednesday, November 19, 2014 4:31 PM
To: Brand, Anstice M. (CDC/OD/CDCWO)
Cc: Foster, Cheyenne
Subject: Re: Meeting with CDC Director Dr. Tom Frieden.

Hi Anstice,

Thank you for getting in touch! I'm going to loop in our scheduler, Cheyenne Foster, so that she can work with you to hopefully find a time that works for both of the doctors.

Thank you again!

Amanda Street
Congressman Tom Price, MD
100 Cannon House Office Building
Washington, DC 20515
202-225-4501

From: <Brand>, "Anstice M. (CDC/OD/CDCWO)" <atb6@cdc.gov>
Date: Wednesday, November 19, 2014 4:25 PM
To: Rep Tom Price <Amanda.Street@mail.house.gov>
Subject: Meeting with CDC Director Dr. Tom Frieden.

Hi Amanda,

I hope you are well! Dr. Frieden is going to be in town on December 2nd and 3rd and wondered if Rep. Price would have some availability to meet.

Dr. Frieden has availability at the following times:

12/2 10:30 - 11:30 am and 1:30-5 pm.

12/3 9:30-11 am and 1:30-4pm

Let me know if you prefer that I work with your scheduler. Thanks so much! I look forward to hearing from you!

Anstice

Anstice Brand
CDC Washington Office
(202) 245-0622
www.cdc.gov/washington

Schattner, Aimee (CDC/OD/CDCWO)

From: Street, Amanda <Amanda.Street@mail.house.gov>
Sent: Friday, January 09, 2015 6:12 PM
To: Brand, Anstice M. (CDC/OD/CDCWO)
Cc: DiBlasio, Carla; Foster, Cheyenne
Subject: Re: Possible GA delegation visit to CDC.

Hi Anstice,

Happy New Year to you too! We would love to work with you on trying to schedule a visit to CDC with our new GA delegation members. I have cc'd our scheduler, Cheyenne Foster, who will help us with dates. I have also cc'd my replacement in the personal office, Carla DiBlasio. We are so excited for her to join our team beginning next week. I know you'll enjoy working with her too!

I will defer to Cheyenne on the President's Day Weekend option, though I have a sneaking suspicion that Dr. Price may have a conflict. We may need to look further into next year, perhaps even April or May, to find a suitable date.

Thank you again for reaching out and hope you have a wonderful weekend!

Amanda Street
House Budget Committee
207 Cannon House Office Building
Washington, DC 20515
Main: 202-226-2720
Direct: 202-226-1994

From: <Brand>, "Anstice M. (CDC/OD/CDCWO)" <atb6@cdc.gov>
Date: Friday, January 9, 2015 11:56 AM
To: Rep Tom Price <amanda.street@mail.house.gov>
Subject: Possible GA delegation visit to CDC.

Hi Amanda,

Happy New Year! I hope you had some time off over the holidays! I heard you are moving to the Budget Committee...Congratulations!

I understand your boss and Dr. Frieden along with you and Ed Hunter discussed a potential visit of the newly minted Georgia delegation to CDC sometime in the near future. I was VERY happy to hear that the discussion to try to have it in January was quickly nipped in the bud. ☺ That would have been an undertaking! I wanted to start trying to get the visit on the books possibly for the President's day recess in February (week of February 17th) since I figure members will be at home in Georgia then anyway. Can you check on your end to see if that might work and then we can start figuring out about reaching out to other members.

If in your new Budget Committee position you are no longer the correct person to send this to, please let me know to whom I should address this question. Thanks again, as always for your help and support!

Anstice

Schattner, Aimee (CDC/OD/CDCWO)

From: Brand, Anstice M. (CDC/OD/CDCWO)
Sent: Tuesday, February 03, 2015 8:52 PM
To: 'DiBlasio, Carla'
Subject: RE: CDC FY2016 Budget Request

My pleasure! Please let me know if you have any questions!

Anstice

From: DiBlasio, Carla [mailto:Carla.Diblasio@mail.house.gov]
Sent: Tuesday, February 03, 2015 7:59 PM
To: Brand, Anstice M. (CDC/OD/CDCWO)
Subject: RE: CDC FY2016 Budget Request

Thanks Anstice!

Carla DiBlasio, Esq.
Congressman Tom Price, M.D. (GA-06)
100 Cannon House Office Building
Washington, DC 20515 | 202.225.4501



From: Brand, Anstice M. (CDC/OD/CDCWO) [mailto:atb6@cdc.gov]
Sent: Monday, February 02, 2015 4:50 PM
To: DiBlasio, Carla; Street, Amanda
Subject: CDC FY2016 Budget Request

Dear Carla and Amanda,

I hope you are both well! Knowing of your interest in the Centers for Disease Control and Prevention (CDC), I am sending some information below on our detailed FY 2016 budget proposal, which was released today ([you can find it in full here](#)). [Here is a link to the Overview](#). I've also included a few additional links to resources where you can find information on funding and data specific to your state.

Inside the full CDC FY 2016 Congressional Justification:

- The program-level request of \$7.0 billion for CDC is an increase of \$110.7 million compared to the FY 2015 Enacted level.
- The FY 2016 budget request builds on priorities set forth in CDC's FY 2015 President's budget, proposing strategic new investments and identifying targeted reductions that will allow CDC to advance its core public health mission.
- The request includes two new initiatives:
 - Combatting Antibiotic-Resistant (AR) Bacteria (\$264.3 million) ([see a fact sheet on the AR initiative here](#))
 - Drug Overdose Prevention (\$53.6 million) ([see a fact sheet on this initiative here](#))

You also will find these and other [CDC budget fact sheets here](#).

For future reference, you also can look up [CDC funding to your state here](#) and [health statistics about your state here](#).

Please feel free to email or call me if you have questions about the budget proposal or about any CDC programs.

Thanks,
Anstice

Anstice Brand
CDC Washington Office
(202) 245-0622
www.cdc.gov/washington



Centers for Disease Control and Prevention Welcomes



Georgia Congressional Delegation

AGENDA: TUESDAY, SEPTEMBER 1, 2015

TIME	SESSION	SPEAKER/PROGRAM EXPERT	LOCATION
10:00 am	<i>Arrive – CDC Visitors' Center</i>	Greet Delegation	Visitor's Center
10:00 – 10:10 am	<i>Security Screening</i>		Visitor's Center
10:10 – 10:15 am	<i>Walk to Building 21</i>		
10:15 – 10:45 am	Meeting with CDC Director and COO CDC Overview	Tom Frieden Sherri Berger	CR 12302
10:45 – 10: 50 am	<i>Walk to EOC</i>		
10:50 – 11:05 am	Visit EOC	Steve Redd	EOC, Bldg. 21
11:05 – 11:40 am	Discussion: Global Health Security	Kashef Ijaz Julie Fishman	Plans Team Room
11:40 – 11:45	<i>Walk to Conference Room</i>		
11:45 – 1:00 pm	<i>Lunch/ Discussion: CDC Foundation – PPP CDC -GA-University Connections</i>	Sherri Berger Charlie Stokes Mim Kelly Harold Jaffe	CR 12302
1:00 – 1:40 pm	Discussion: Prescription Drug Overdose	Grant Baldwin	CR 12302
1:40 – 1: 50 pm	<i>Walk to Building 23</i>		
1:50 – 2:20pm	Visit Insectary	Namita Joshi Monica Parise Bill Hawley	Bldg. 23
2:20 – 2:30 pm	<i>Walk to Building 17</i>		
2:30 – 3:10 pm	Discussion: Stories from the Field	Michael Iademarco Patricia Simone Josh Mott Romeo Galang Brittani Harmon Sarah Pallas	Bldg. 17, CR 4271
3:10 – 3:20 pm	Break		
3:20 – 3:50 pm	Visit Division of Healthcare Quality Promotion (DHQP) Lab	Rita Helfand Denise Cardo Mike Bell Brandi Limbago Michael Craig	Bldg. 17
3:50 – 4:00 pm	<i>Walk back to Visitor's Center - Depart</i>		Visitor's Center

Schattner, Aimee (CDC/OD/CDCWO)

From: DiBlasio, Carla <Carla.Diblasio@mail.house.gov>
Sent: Monday, August 17, 2015 3:15 PM
To: Brand, Anstice M. (CDC/OD/CDCWO)
Subject: Re: CDC Visit Sep. 1st
Attachments: image002.png; image004.png

Thanks! I'm really excited!

Carla DiBlasio, Esq.
Policy Advisor
Congressman Tom Price, M.D. (GA-06)
100 Cannon House Office Building
Washington, DC 20515 | 202.225.4501



On Aug 17, 2015, at 3:08 PM, Brand, Anstice M. (CDC/OD/CDCWO) <atb6@cdc.gov> wrote:

Thanks so much Carla! So glad you can join! Your boss has been so supportive!

From: DiBlasio, Carla [<mailto:Carla.Diblasio@mail.house.gov>]
Sent: Monday, August 17, 2015 2:50 PM
To: 'Bartolomeo, Jordan (Isakson)' <Jordan_Bartolomeo@isakson.senate.gov>; Brand, Anstice M. (CDC/OD/CDCWO) <atb6@cdc.gov>
Cc: Riley, Mary Christina <MaryChristina.Riley@mail.house.gov>; Phifer, Victoria (CDC/OD/CDCWO) <kui3@cdc.gov>; Eunice, John (Perdue) <John_Eunice@perdue.senate.gov>
Subject: RE: CDC Visit Sep. 1st

Thanks so much! Looking forward to joining!

Carla DiBlasio, Esq.
Policy Advisor
Congressman Tom Price, M.D. (GA-06)
100 Cannon House Office Building
Washington, DC 20515 | 202.225.4501

<image001.png>  <image003.png>  <image005.png>

From: Bartolomeo, Jordan (Isakson) [mailto:Jordan_Bartolomeo@isakson.senate.gov]
Sent: Monday, August 17, 2015 2:49 PM
To: Brand, Anstice M. (CDC/OD/CDCWO)
Cc: DiBlasio, Carla; Riley, Mary Christina; Phifer, Victoria (CDC/OD/CDCWO); Eunice, John (Perdue)
Subject: RE: CDC Visit Sep. 1st

Thank you, Anstice! John Eunice with Sen. Perdue and Carla Diblasio from Rep. Price's office are both cc'd on this email.

From: Brand, Anstice M. (CDC/OD/CDCWO) [atb6@cdc.gov]
Sent: Monday, August 17, 2015 2:33 PM
To: Bartolomeo, Jordan (Isakson)
Cc: john.eunice@perdue.senate.gov; DiBlasio, Carla; Riley, Mary Christina; Phifer, Victoria (CDC/OD/CDCWO)
Subject: RE: CDC Visit Sep. 1st

Hi Jordan! Thanks for reaching out! We are definitely all set for September 1st and are looking forward to your visit!

I am just back in the office today after being out for an extended period. I am ccing Victoria Phifer who has been working on the agenda, and we hope to send you a draft shortly.

Just to confirm, the people we have as confirmed to attend include: you; Mary Christina Riley; Janet Rossi; Tripp Cofield; Craig Anderson; Mary Dee Beal; and Tim Reitz.

Let me know if there are others you've heard from. This list does not include someone from Senator Perdue's office, but I see John Eunice is cced here...John, are you coming? We'd love to have you!

Thanks so much for your help in putting this together!

I look forward to seeing you in Atlanta!

Anstice

From: Bartolomeo, Jordan (Isakson) [mailto:Jordan_Bartolomeo@isakson.senate.gov]
Sent: Monday, August 17, 2015 1:53 PM
To: Brand, Anstice M. (CDC/OD/CDCWO) <atb6@cdc.gov>
Cc: john.eunice@perdue.senate.gov; DiBlasio, Carla <Carla.Diblasio@mail.house.gov>; Riley, Mary Christina <MaryChristina.Riley@mail.house.gov>
Subject: CDC Visit Sep. 1st

Hi Anstice,

Hope you are well. I just wanted to confirm that we are all set for a visit on September 1st and what other information you might need. Thanks!

Jordan

Schattner, Aimee (CDC/OD/CDCWO)

From: Brand, Anstice M. (CDC/OD/CDCWO)
Sent: Friday, September 04, 2015 4:52 PM
To: 'DiBlasio, Carla'; 'Riley, Mary Christina'; 'Eunice, John (Perdue)'; 'Reitz, Tim'; 'Anderson, Craig'; 'Rossi, Janet'; 'Beal, Mary Dee'; Jordan_Bartolomeo@isakson.senate.gov
Cc: Cain, Tiffany L. (CDC/OD/CDCWO); Phifer, Victoria (CDC/OPHSS/CSELS)
Subject: RE: Thank you for visiting CDC!
Attachments: CODEL2015_VNE0173_1.jpg

Whoops! Forgot to attach the more fun picture (what could be more fun than a logic model of prescription drug overdose programs you might ask?!) from our meeting with Dr. Frieden.

A

From: Brand, Anstice M. (CDC/OD/CDCWO)
Sent: Friday, September 04, 2015 4:48 PM
To: 'DiBlasio, Carla' <Carla.Diblasio@mail.house.gov>; 'Riley, Mary Christina' <MaryChristina.Riley@mail.house.gov>; 'Eunice, John (Perdue)' <John_Eunice@perdue.senate.gov>; 'Reitz, Tim' <Tim.Reitz@mail.house.gov>; 'Anderson, Craig' <Craig.Anderson@mail.house.gov>; 'Rossi, Janet' <Janet.Rossi@mail.house.gov>; 'Beal, Mary Dee' <MaryDee.Beal@mail.house.gov>; Jordan_Bartolomeo@isakson.senate.gov
Cc: Cain, Tiffany L. (CDC/ONDIEH/NCIPC) <hsz4@cdc.gov>; Phifer, Victoria (CDC/OD/CDCWO) <kui3@cdc.gov>
Subject: Thank you for visiting CDC!

THANK YOU for spending your day touring CDC's Atlanta headquarters! We were honored to host you and really appreciate that you took the time to visit, learn about CDC, see some of our world class facilities and meet some of our world class scientists.

During your visit, you saw the tip of the iceberg for CDC's public health work. We are always happy to share more of our work and hope you will call on us for follow-up briefings on specific public health programs that interest you and your Boss.

CDC's Georgia location makes it unique among federal agencies, and the Georgia Congressional delegation has been a critical partner for the agency. We appreciate your support and are always happy to host you at CDC's headquarters. If you are interested, please let us know when you are visiting the Atlanta area next and have time for more!

Thanks again, and hope you have a wonderful holiday weekend!

Anstice

PS: In follow up to the briefing on our Prescription Drug Overdose work, I attached a slide that shows better detail on the PDO Logic Model...the slide was in your packet but was too small to be legible.

Anstice Brand
CDC Washington Office
(202) 245-0622
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