

ONE HUNDRED THIRTEENTH CONGRESS  
**Congress of the United States**  
**House of Representatives**  
COMMITTEE ON ENERGY AND COMMERCE  
2125 RAYBURN HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515-6115  
Majority (202) 225-2927  
Minority (202) 225-3641

July 24, 2014

Mr. Andrew Slavitt  
Principle Deputy Administrator  
Centers for Medicare and Medicaid Services  
7500 Security Boulevard  
Baltimore, MD 21244

Dear Mr. Slavitt:

Thank you for agreeing to testify on Thursday, July 31, 2014, at 9:00 a.m. in 2123 Rayburn House Office Building, at the Subcommittee on Oversight and Investigations hearing entitled "PPACA Implementation: Updates from CMS and GAO."

The attached documents provide important details concerning the preparation and presentation of your testimony.

- The first attachment describes the form your testimony must take.
- The second attachment provides you with Electronic Format Guidelines that detail how to file testimony electronically.
- The third attachment provides you the Rules for the Committee on Energy and Commerce.
- The fourth attachment provides you with a Truth-in-Testimony Disclosure form and a Truth-in-Testimony instruction sheet.

Please be aware that, in accordance with the Committee's usual practice:

- (1) Witnesses will be required to provide sworn testimony;
- (2) Witnesses have a right to be represented by counsel, who may advise the witnesses on their Constitutional rights, but cannot testify. If appearing as a witness, the counsel will be sworn in; and,

Mr. Andrew Slavitt  
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- (3) Hearings are open to audio, video, and photographic coverage by accredited press representatives only.

If you have any questions concerning any aspect of your testimony, please contact Sean Hayes of the Energy and Commerce Committee staff at (202) 225-2927.

Sincerely,



Tim Murphy  
Chairman  
Subcommittee on Oversight and Investigations

Enclosures: (1) Form of Testimony  
(2) Electronic Format Guidelines  
(3) Rules for the Committee on Energy and Commerce  
(4) Truth-in-Testimony Disclosure form