

Evelyne Baumrucker, MA, is an Analyst in Healthcare Financing with the Congressional Research Service (CRS). Over her 15 year tenure with CRS, she has provided Congress with policy analysis and legislative support for Medicaid and the State Children's Health Insurance Program (CHIP). Her primary areas of expertise include Medicaid eligibility, ACA Implementation, interactions between Medicaid and the ACA, and the section 1115 waiver authority. In addition, she covers issues related to CHIP including CHIP program design, eligibility, benefit coverage, and cost-sharing requirements. She received BA degrees in French and Political Philosophy from the Pennsylvania State University, and an MA degree in Social Policy from the George Washington University.

Committee on Energy and Commerce U.S. House of Representatives Witness Disclosure Requirement - "Truth in Testimony" Required by House Rule XI, Clause 2(g)

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1.	1. Your Name: Evelyne P. Baumrucker				
2.	Are you testifying on behalf of the Fede government entity?	ral, or a State or local	Yes	No	
3.	Are you testifying on behalf of an entity entity?	that is not a government	Yes	<u>No</u>	
4.	Other than yourself, please list which entity or entities you are representing:				
	The Congressional Research Service				
5.	5. Please list any Federal grants or contracts (including subgrants or subcontracts) that you or the entity you represent have received on or after October 1, 2011:				
6.	If your answer to the question in item 3 in this form is "yes," please describe your position or representational capacity with the entity or entities you are representing:				
7.	If your answer to the question in item 3 disclosed in item 4 have parent organize partnerships that you are not represent	ntions, subsidiaries, or	Yes	No	
8.	8. If the answer to the question in item 3 is "yes," please list any Federal grants or contracts (including subgrants or subcontracts) that were received by the entities listed under the question in item 4 on or after October 1, 2011, that exceed 10 percent of the revenue of the entities in the year received, including the source and amount of each grant or contract to be listed:				
9. Please attach your curriculum vitae to your completed disclosure form.					
Signature:Date:Date:Date:Date:					