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LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

1. Registrant Name Healthcare Association of New York State			
2. Address <input type="checkbox"/> Check if different than previously reported 74 North Pearl Street, Albany, New York 12207			
3. Principal Place of Business (If different from line 2) City: State/Zip (or Country):			
4. Contact Name Steven Kroll	Telephone 518/431-7600	E-mail (optional) skroll@hanys.org	5. Senate ID # 17900-12
7. Client Name <input type="checkbox"/> Self	6. House ID # 31271000		

TYPE OF REPORT 8. Year 1999 Midyear (January 1-June 30) ☐ OR Year End (July 1-December 31) ☒

9. Check if this filing amends a previously filed version of this report ☐

10. Check if this is a Termination Report ☐ Termination Date _____

11. No Lobbying Activity ☐

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> \$ _____ Income (nearest \$20,000) Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).	13. Organizations EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> \$ 380,000.00 Expenses (nearest \$20,000) 14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code <input checked="" type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code
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Signature _____

Printed Name and Title _____

Registrant Name Healthcare Assn. of NYS Client Name Same

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code MMM (one per page)

16. Specific lobbying issues

Medicare, Medicaid and SCHIP Balanced Budget Refinement Act of 1999 incorporated in P.L. 106-113.

Inclusion of Medicaid Home Relief days in the DSH formula for Medicare Disproportionate Share Hospital payments.

17. House(s) of Congress and Federal agencies contacted
U.S. House of Representatives
U.S. Senate
Executive Office of the President
Office of the Vice President
Health Care Financing Administration

☐ Check if None

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)	New
Steven Kroll		<input type="checkbox"/>
Joanne Cunningham		<input type="checkbox"/>
Daniel Sisto		<input type="checkbox"/>
Mark Callan		<input type="checkbox"/>
Steven Harwell		<input type="checkbox"/>
Kelly Price		<input type="checkbox"/>
Nora Zelizer		<input type="checkbox"/>
		<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above

☒ Check if None

Signature

Date

Printed Name and Title Steven Kroll, Vice President, Governmental Affairs

Page 2 of 2