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LOBBYING REPORT

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

1. Registrant Name NYU Hospitals Center			
2. Address: <input type="checkbox"/> Check if different than previously reported 3 Park Avenue, 15th Floor			
3. Principal Place of Business (if different from line 2) New York City: New York State/zip (or Country) 10016			
4. Contact Name Gilda Ventresca Ecroyd	Telephone (212) 404-4077	E-mail (optional)	5. Senate ID # 54346-12
7. Client Name <input checked="" type="checkbox"/> Self NYU Hospitals Center			6. House ID # 35045000

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-December)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 Activities **INCOME OR EXPENSES** - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000)	\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>20,000.00</u> Expenses (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).	14. REPORTING METHOD. Check box to indicate proper accounting method. See instructions for description of options
	<input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions
	<input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature _____ Date _____

Signature _____

Printed Name and Title Gilda Ventresca Ecroyd, VP- Office of Gov't Affairs

LD-2 (REV. 4/03)

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Registrant Name NYU Hospitals Center Client Name NYU Hospitals Center

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,** information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

(S.1/H.R.1) - Medicare Prescription Drug and Medicare Improvement Act of 2003 (specifically IME provisions and market basket updates), American Hospital Preservation Act of 2003 (H.R. 1710/S.899), Rules and Regulations pertaining to the Inpatient Prospective Payment System of 2004- 75% rule, outlier payments, transfer policy and dental GME, REHAB bill (S.1222/H.R. 2246), as well as the Assure Access to Mammography Act of 2003 (H.R. 817/S.869).

17. House(s) of Congress and Federal agencies contacted Check if None

U.S. Senate and House of Representatives, U.S. Department of Health and Human Services and Centers for Medicare and Medicaid Services.

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

Name	Covered Official Position (if applicable)
Gilda Ventresca Ecroyd	Vice President, Office of Gov't Affairs
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.....
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.....

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature _____ Date _____

Printed Name and Title Glida Vermeesa Ecloyo, VP- Office of Govt Affairs

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Registrant Name NYU Hospitals Center Client Name NYU Hospitals Center

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, information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

VA/HUD FY04 Appropriations (H.R. 2861) for the NYU Hospitals Comprehensive Stroke Care Center and Labor, HHS FY04 Appropriations (H.R. 2260/S.1356), Department of Homeland Security FY04 Appropriations (H.R. 2555), House and Senate Budget Resolutions concerning Medicare and Medicaid spending levels,

17. House(s) of Congress and Federal agencies contacted Check if None

U.S. Senate and House of Representatives

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

Name	Covered Official Position (if applicable)
Gilda Ventresca Ecroyd	Vice President, Office of Gov't Affairs

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature _____ Date _____

Registrant Name NYU Hospitals Center Client Name NYU Hospitals Center

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

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

16. Specific lobbying issues

Teacher and Nurse Support Act of 2003 (H.R. 934), Poison Control Enhancement and Awareness Act of 2003 (H.R. 686/S.1819), Paul Wellstone Mental Health Treatment and Parity Act of 2003 (H.R. 953/S.486), and Medical Liability Reform (H.R. 5/S.11).

17. House(s) of Congress and Federal agencies contacted Check if None

U.S. Senate and House of Representatives

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

Name	Covered Official Position (if applicable)
Gilda Ventresca Ecroyd	Vice President, Office of Gov't Affairs

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature _____ Date _____

Printed Name and Title

Shua Verónica Llorca, VI - Office of Civil Affairs

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Registrant Name NYU Hospitals Center Client Name NYU Hospitals Center

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

N/A

21. Client new principal place of business (if different from line 20)

City _____ State/Zip (or Country) _____

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

N/A

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

N/A

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)
<u>N/A</u>		

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

N/A

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Other
<u>N/A</u>				

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant, client or affiliated organization

Signature Gilda Ventresca Escayd Date 8/13/03

