

LOBBYING REPORT

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

1. Registrant Name:

HEALTHCARE ASSN OF NEW YORK STATE

2. Address:

1 EMPIRE DRIVE, RENSSELAER, NY 12144

3. Principal place of business (if different from line 2):

4. Contact Name: STEVEN A. KROLL

Telephone: 5184317600

E-mail (optional): kbonilla@hanys.org

Senate ID #: 17900-12

House ID #: 31271000

7. Client Name: Self

TYPE OF REPORT

8. Year 2007 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:

\$10,000 or more: => 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:

\$10,000 or more: => Expenses (nearest \$20,000): 500,000.00

14. Reporting Method.

Check box to indicate expense accounting method. See instructions for description of options.

- Method A.** Reporting amounts using LDA definitions only
 Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code
 Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Registrant Name: HEALTHCARE ASSN OF NEW YORK STATE Client Name: Self

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:

S.558 Mental Health Parity Act of 2007 S.860 Early Treatment for HIV Act S.1604 Nursing Education and Quality of Health Care Act of 2007 S.1693 Health Information Exchange

17. House(s) of Congress and Federal agencies contacted:

Agency for Health Care Policy & Research
Centers For Medicare and Medicaid Services (CMS)
Executive Office of the President (EOP)
HOUSE OF REPRESENTATIVES
Health & Human Services, Dept of (HHS)
Health Resources & Services Administration (HRSA)
Internal Revenue Service (IRS)
Labor, Dept of (DOL)
Office of Management & Budget (OMB)
SENATE

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

Name: CICCONE, KATHLEEN
Covered Official Position (if applicable): N/A
Name: HARWELL, STEPHEN
Covered Official Position (if applicable): N/A
Name: KROLL, STEVEN
Covered Official Position (if applicable): N/A
Name: SISTO, DANIEL
Covered Official Position (if applicable): N/A
Name: SWEENEY, RAYMOND
Covered Official Position (if applicable): N/A
Name: VAN METER, SUSAN
Covered Official Position (if applicable): N/A
Name: ZINKE, ANASTASSIA
Covered Official Position (if applicable): N/A

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

Signature: ON FILE Date: Feb 14, 2008

Printed Name and Title: STEVEN A. KROLL, VICE PRESIDEN -

Information Update Page:

Complete ONLY where registration information has changed.

LOBBYIST UPDATE

23. Name of each previously reported individual who is NO LONGER expected to act as a lobbyist for the client

ISSUE UPDATE

24. General lobbying issues previously reported that NO LONGER pertain

AFFILIATED ORGANIZATIONS

25. Add the following organization(s)

26. Name of each previously reported organization that is NO LONGER affiliated with the registrant or client

FOREIGN ENTITIES

27. Add the following foreign entities

28. Name of each previously reported foreign entity the NO LONGER owns, OR controls, OR is affiliated with the registrant, client or affiliated organization

Signature: ON FILE Date: Feb 14, 2008

Printed Name and Title: -