

## LOBBYING REPORT

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

1. Registrant Name:

**OHIO HOSPITAL ASSN**

2. Address:

155 East Broad Street, Columbus, OH 43215

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

4. Contact Name: JONATHAN ARCHEY

Telephone: 6142217614

E-mail (optional): jonathana@ohanet.org

Senate ID #: 53004-12

House ID #:

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): 100,000.00

### 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: OHIO HOSPITAL ASSN 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: BUD (one per page)

16. Specific lobbying issues:

Labor/HHS Budget, including funding for Medicare/Medicaid, health insurance assistance, investments in health care services and research, and various budget items affecting hospitals, patients, and other health care providers.

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

HOUSE OF REPRESENTATIVES  
Health & Human Services, Dept of (HHS)  
SENATE

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

Name: ARCHEY, JONATHAN  
Covered Official Position (if applicable): N/A

Name: CALLENDER, JOHN E.  
Covered Official Position (if applicable): N/A

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

Registrant Name: OHIO HOSPITAL ASSN 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: DIS (one per page)

16. Specific lobbying issues:

Hospital preparedness efforts and requirements for mass-casualty disease, disaster, and other emergency events.

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

HOUSE OF REPRESENTATIVES  
Health & Human Services, Dept of (HHS)  
SENATE

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

Name: ARCHEY, JONATHAN  
Covered Official Position (if applicable): N/A  
Name: CALLENDER, JOHN E.  
Covered Official Position (if applicable): N/A

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

Registrant Name: OHIO HOSPITAL ASSN 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: HCR (one per page)

16. Specific lobbying issues:

Medicare and Medicaid; health insurance coverage; hospital legislative and regulatory issues; health care reform; hospital emergency preparedness; health care workforce; quality of health care; charitable health care services; medical education.

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

HOUSE OF REPRESENTATIVES  
SENATE

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

Name: ARCHEY, JONATHAN

Covered Official Position (if applicable): N/A

Name: CALLENDER, JOHN E.

Covered Official Position (if applicable): N/A

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

Registrant Name: OHIO HOSPITAL ASSN 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: INS (one per page)

16. Specific lobbying issues:

Health insurance coverage for the uninsured and under-insured; State Children's Health Insurance Program; tax credits for the purchase of private health insurance; medical liability insurance and tort reform; options and challenges for universal health coverage.

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

HOUSE OF REPRESENTATIVES  
Health & Human Services, Dept of (HHS)  
SENATE

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

Name: ARCHEY, JONATHAN  
Covered Official Position (if applicable): N/A  
Name: CALLENDER, JOHN E.  
Covered Official Position (if applicable): N/A

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

Registrant Name: OHIO HOSPITAL ASSN 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: LBR (one per page)

16. Specific lobbying issues:

Ensuring adequate supply, training, and safety of the health care workforce; legislation affecting the nursing workforce; scope of practice for health care professionals; concerns of labor unions; role of hospitals and the health care industry in promoting economic development and job creation.

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

HOUSE OF REPRESENTATIVES  
Health & Human Services, Dept of (HHS)  
SENATE

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

Name: ARCHEY, JONATHAN  
Covered Official Position (if applicable): N/A  
Name: CALLENDER, JOHN E.  
Covered Official Position (if applicable): N/A

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

Registrant Name: OHIO HOSPITAL ASSN 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:

Improvements for beneficiaries; improvements for hospitals and other health care providers; general sustainability and operational efficiencies of the Medicare and Medicaid programs; regulations promulgated by CMS; medical education issues; State Children's Health Insurance program re-authorization.

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

Centers For Medicare and Medicaid Services (CMS)

HOUSE OF REPRESENTATIVES

Health & Human Services, Dept of (HHS)

SENATE

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

Name: ARCHEY, JONATHAN

Covered Official Position (if applicable): N/A

Name: CALLENDER, JOHN E.

Covered Official Position (if applicable): N/A

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

Registrant Name: OHIO HOSPITAL ASSN 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: TAX (one per page)

16. Specific lobbying issues:

Tax credits for the purchase of private health insurance; tax incentives to encourage businesses and individuals to offer/keep private health insurance coverage; tax-exempt requirements for charitable institutions, including hospitals; tax incentives for health care workforce education and training.

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

Executive Office of the President (EOP)  
HOUSE OF REPRESENTATIVES  
Health & Human Services, Dept of (HHS)  
Internal Revenue Service (IRS)  
SENATE

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

Name: ARCHEY, JONATHAN  
Covered Official Position (if applicable): N/A  
Name: CALLENDER, JOHN E.  
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: Jan 05, 2009

Printed Name and Title: JONATHAN ARCHEY, DIRECTOR, FED -

**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: Jan 05, 2009

Printed Name and Title: -