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# LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration  1. Effective Date of Registration 2/1/2004  
2. House Identification Number \_\_\_\_\_ Senate Identification Number \_\_\_\_\_

## REGISTRANT

3. Registrant name Alston & Bird LLP

Address 601 Pennsylvania Avenue, NW - North Building, 10th Floor

City Washington State DC Zip 20004-2601

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

City Atlanta State/Zip (or Country) GA 30309

5. Telephone number and contact name

(202) 756-3342 Contact Jonathan M. Winer E-mail (optional) jwiner@

6. General description of registrant's business or activities

Law firm

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check labeled "Self" and proceed to line 10.*  *Self*

7. Client name Heritage Provider Networks

Address 3115 Ocean Front Walk, Suite 301

City Marina Del Ray State CA Zip 90292

8. Principal place of business (if different from line 7)

City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities

Health care services provider

## LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any in this section has served as a "covered executive branch official" or "covered legislative branch official" within two acting as a lobbyist for the client, *state the executive and/or legislative position(s) in which the person served.*

Name	Covered Official Position (if applicable)
<u>Thomas A. Scully</u>	<u>Centers for Medicare &amp; Medicaid Services-Ac</u>
<u>Colin Roskey</u>	<u>Senate Finance Comm.-Health Policy Advisor</u>
<u>Lynn Sykes, Jennifer Butler, Erin Darling</u>	

Form LD-1 (Rev. 04/03)

Registrant Name Alston & Bird LLP Client Name Heritage Provider Networks

**LOBBYING ISSUES**

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, p

MMM HCR

12. Specific lobbying issues (current and anticipated)

Issues related to implementation of the Medicare Modernization Act of 2003-Public Law 108-173; and Med Chronic Care Demonstration.

**AFFILIATED ORGANIZATIONS**

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the regis a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activiti

No ⇨ Go to line 14.

Yes ⇩ Complete the rest of this section for each entity matchir criteria above, then proceed to line 14.

Name	Address	Principal Place of Busi (city and state or count

**FOREIGN ENTITIES**

14. Is there any foreign entity that:

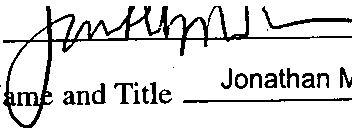
- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsi activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the ou of the lobbying activity?

No ⇨ Sign and date the registration.

Yes ⇩ Complete the rest of this section for eac matching the criteria above, then sign a registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

*Alston*

Signature  Date 0/15/2017  
Printed Name and Title Jonathan M. Winer, Partner

Form LD-1 (Rev. 04/03)