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05 FEB -8 AM 9:15
LOBBYING REPORT

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

1. Registrant name American Association for Geriatric Psychiatry			
2. Address <input type="checkbox"/> Check if different than previously reported 7910 Woodmont Avenue, Suite 1050 Bethesda MD 20814			
3. Principal place of business (if different than line 2) City State/Zip or Country			
4a. Contact Name	b. Telephone number	c. E-mail	5. Senate ID #
Ms. Marjorie Vanderbilt	301-654-7850	mvanderbilt@aagponline.org	59251
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID #
American Association for Geriatric Psychiatry			353061

TYPE OF REPORT 8. Year 2004 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 Activities

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p>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).</p>	<p align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ _____ 60,000</p> <p>14. REPORTING METHOD. Check box to indicate reporting method. See instructions for description of each method.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>

Signature _____

Date _____

2-8-05

Printed Name and Title Christine M. deVries, CEO

Registrant Name American Association for Geriatric Psychi Client Name American Association for Geriatric I

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

15. General issue area code MMM - Medicare/Medicaid (one per page)

16. Specific lobbying issues

1. H.R. 1340/S. 646: "Medicare Mental Health Modernization Act of 2003":
 Title 1: Parity of Mental Health Services/Medicare copayment for mental health services (repealing the 50 percent copayment required by Medicare for mental health services, repealing the 190-day lifetime cap on inpatient services in psychiatric hospitals)
 Title 2: Expanding coverage of community-based mental health services, such as psychiatric rehabilitation and substance abuse treatment centers

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

U.S. House of Representatives
 U.S. Senate
 U.S. Department of Health and Human Services
 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)
Marjorie	Vanderbilt	
Christine	deVries	
Stephanie	Reed	
Tim	Perrin	

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

Signature _____ Date _____

Printed Name and Title Christine M. deVries, CEO

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Registrant Name American Association for Geriatric Psychia Client Name American Association for Geriatric

ADDENDUM for General Lobbying Issue Area MMM

16. Specific lobbying issues (continued from previous page)

2. H.R. 102/S. 387: "Geriatric Care Act of 2003": all provisions: to permit expansion of medical residency training programs in geriatric medicine and psychiatry; provide for Medicare reimbursement of care coordination and assessment services; and clarify that geriatric training programs are eligible for two years of fellowship support.
3. S. 853/H.R. 2787: "Medicare Mental Health Copayment Equity Act of 2003": all provisions: the bill would amend Section 1833(c) of the Social Security Act, eliminating the 50 percent copayment required by Medicare for health services.
4. H.R. 3355: "Nursing Home Staffing Act of 2003": to establish minimum requirements for nurse staffing in nursing facilities receiving payments under Medicare and Medicaid.
5. Medicare physician payment formula (no specific bill): to avoid future reimbursement cuts.
6. S. 2593/H.R. 4689: "Geriatric and Chronic Care Management Act": to authorize Medicare coverage of geriatric assessment and care management for eligible Medicare beneficiaries.
7. Discussed neuroimaging in the diagnosis of Alzheimer's disease and other dementias with CMS and NIH.
8. Provided comments to CMS regarding management of prescription drugs for mental illness under the new Medicare prescription drug benefit. In addition, urged CMS to require plans to provide an alternative formulary to assure full access to the prescription drugs needed by older adults with mental disorders.
9. Provided comments to CMS on proposed limited Medicare coverage of PET scans for patients with suspected dementia.
10. Provided comments on CMS' 2005 Medicare physician fee schedule, noting particularly that services by geriatric subspecialties are undervalued under the current system.
11. Provided comments to CMS on the physician fee schedule five-year refinement of work relative value. Requested that nursing facility services and domiciliary services be included among the services whose values will be re-examined.
12. Contacted CMS regarding the status of efforts to clarify coding problems related to dementia treatment.

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LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the 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 - Health Issues (one per page)

16. Specific lobbying issues

1. H.R. 2241/S. 1456: "Positive Aging Act of 2003": all provisions: this bill would amend the Public Health Service Act to provide for grants to integrate mental health services of older patients into primary care settings and grants to community-based providers of geriatric mental health services for multi-disciplinary health outreach teams; and would provide structural changes to improve the administration of mental health services for older adults

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

U.S. House of Representatives
 U.S. Senate
 U.S. Department of Health and Human Services
 National Institutes of Health
 Substance Abuse and Mental Health Services Administration

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

	Name	Covered Official Position (if applicable)
Marjorie	Vanderbilt	
Christine	deVries	
Stephanie	Reed	
Tim	Perrin	

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ADDENDUM for General Lobbying Issue Area HCR

16. Specific lobbying issues (continued from previous page)

2. H.R. 953/S. 486: "Senator Paul Wellstone Mental Health Equitable Treatment Act": all provisions: this bill ensure that private health insurance plans do not treat mental health benefits differently from all other medical surgical benefits
3. H.R. 660: "Small Business Health Fairness Act of 2003": to amend the Employee Retirement Income Security Act of 1974 (ERISA) to provide for the establishment and governance of association health plans (AHPs)
4. S. 538: "Lifespan Respite Care Act of 2003": to amend the Public Health Service Act to provide for grant cooperative agreements to an agency or organization capable of operating on a statewide basis (an eligible recipient) to develop coordinated respite care programs, defined as planned or emergency care provided to a child or adult with a special need in order to provide temporary relief to the family caregiver of such child or adult
5. S. 2572/H.R. 4694: "Positive Aging Act of 2004": (all provisions) through programs administered by the Administration on Aging and the Substance Abuse and Mental Health Services Administration, this legislation would integrate mental health services with other primary care services in community settings that are easily accessible to the elderly
6. S. 2075: "Geriatricians' Loan Forgiveness Act of 2004": to amend the Public Health Service Act to include a year of fellowship training in geriatric medicine or geriatric psychiatry as a year of obligated service under the National Health Service Corps Loan Repayment Program
7. S. 333: "Elder Justice Act": (all provisions) to establish dual Offices of Elder Justice in the Department of Health and Human Services (HHS)/Administration on Aging and Department of Justice to coordinate elder abuse prevention efforts nationally; require a criminal background check of long term care nursing aides and better training for workers in the detection of elder abuse; establish an Office of Adult Protective Services within the Administration for Children and Families; and enhance law enforcement response. Particular emphasis on loan forgiveness provision.
8. Discussed issues pertaining to funding for research on the mental health of older adults with the National Institute of Mental Health and the National Institute on Aging at NIH.
9. Inclusion of geriatric mental health issues in agenda of the 2005 White House Conference on Aging.
10. Provided comments to SAMHSA on a suicide prevention initiative intended to advance the National Strategy for Suicide Prevention.

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15. General issue area code BUD - Budget/Appropriations (one per page)

16. Specific lobbying issues

1. "Labor-HHS-Education Appropriations for Fiscal Year 2005" (H.R. 5006/S. 2810): funding for the National Institutes of Health, the Substance Abuse and Mental Health Services Administration, and the Agency for Healthcare Research and Quality – funding for research and/or services and screening programs impacting the mental health of all individuals with particular emphasis on older adults.

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

U.S. House of Representatives
U.S. Senate

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

	Name	Covered Official Position (if applicable)
Marjorie	Vanderbilt	
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ADDENDUM for General Lobbying Issue Area BUD

16. Specific lobbying issues (continued from previous page)

2. "Veterans Administration (VA) Appropriations for Fiscal Year 2005" (H.R. 5041/S. 2825): funding for mer health research and services within the VA for older veterans; including funding for VA mental health servic training and research, and funding for MIRECCs (Mental Illness Research, Education and Clinical Centers; long-term care funding.
3. "Omnibus Appropriations package for Fiscal Year 2005" (H.R. 4818): funding for programs impacting th mental health of older adults, particularly at the Substance Abuse and Mental Health Services Administrati NIH.

