

Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515	Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510
---	--

SECRETARY OF

04 AUG 16 1

**LOBBYING REPORT**

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

1. Registrant Name <b>Patton Boggs LLP</b>	
2. Address ___ Check if different than previously report <b>2550 M Street, NW Washington, DC 20037</b>	
3. Principal Place of Business (if different from line 2) City: State/Zip (or Country)	
4. Contact Name Telephone E-mail (optional) <b>James B. Christian 202-457-6484</b>	5. Senate ID # <b>30906-8251</b>
7. Client Name ___ Self <b>American Association for Homecare</b>	6. House ID # <b>31917588</b>

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 Activit

**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 period were:
Less than \$10,000 ___	Less than \$10,000 _
\$10,000 or more <input checked="" type="checkbox"/> ⇒ <b>\$60,000</b> Income (nearest \$20,000)	\$10,000 or more ⇒ \$ _____ 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 expense accounting method. See instructions for details of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definition <input type="checkbox"/> Method B. Reporting amounts under section 6033 of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162 of the Internal Revenue Code

Signature

Printed Name and Title **James B. Christian, Partner**

<http://ntdcintranet/Lobby/LobbyRep.nsf/PrintCurrentSingle/E49B6409AA75D67585256E8...>

Registrant Name **Patton Boggs LLP**

Client Name **American Association for Homecare**

**LOBBYING ACTIVITY.** Select as many 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 requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

**Home Health Reimbursement Issues**

**PL 108-173 Medicare Drug Improvement and Modernization Act of 2003 Implementation**

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

**House of Representatives**

**U.S. Senate**

**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)	Net
<b>Martha Kendrick</b>		
<b>Sara Traigle</b>		
<b>Kathleen Lester</b>		
<b>Todd Tuten</b>		

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

Signature

Date

Printed Name and Title **James B. Christian, Partner**

<http://ntdcintranet/Lobby/LobbyRep.nsf/PrintCurrentSingle/84C35480654CFB9685256E8B...>

Registrant Name **Patton Boggs LLP**

Client Name **American Association for Homecare**

**LOBBYING ACTIVITY.** Select as many 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 requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

**Home health reimbursement issues.  
PL 108-187 CAN-SPAM Act of 2003**

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 & 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)	Net
<b>Martha Kendrick</b>		
<b>Sara Traigle</b>		
<b>Kathleen Lester</b>		
<b>Todd Tuten</b>		

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

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name and Title **James B. Christian, Partner**

<http://ntdcintranet/Lobby/LobbyRep.nsf/PrintCurrentSingle/4831DCAF155216EA85256E8...>

Registrant Name **Patton Boggs LLP**

Client Name **American Association for Homecare**

**LOBBYING ACTIVITY.** Select as many 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 requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

**Home Health Reimbursement Issues**

**PL 108-173 Medicare Drug Improvement and Modernization Act of 2003 Implementation**

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

- White House**
- U.S. House of Representatives**
- U.S. Senate**
- U.S. Department of Health & 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)	Net
<b>Martha Kendrick</b>		
<b>Sara Traigle</b>		
<b>Kathleen Lester</b>		
<b>Todd Tuten</b>		

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

Signature

Date

Printed Name and Title **James B. Christian, Partner**

<http://ntdcintranet/Lobby/LobbyRep.nsf/PrintCurrentSingle/7A67DE91FA88532385256E8...>

Registrant Name **Patton Boggs LLP**Client Name **American Association for Homecare****Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address City:, Zip:	
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  
**Elizabeth Ring**  
**JoAnn Willis**

**ISSUE UPDATE**

24. General lobbying issues previously reported that no longer pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)

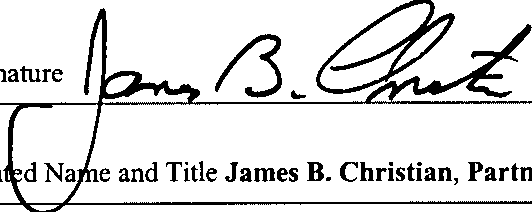
26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

**FOREIGN ENTITIES**

27. Add the following foreign entities

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

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

Signature  Date **8/14/04**

Printed Name and Title **James B. Christian, Partner**

<http://ntdcintranet/Lobby/LobbyRep.nsf/PrintCurrentSingle/EF7A2CB46D0D3B2E85256E...>