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LOBBYING REPORT

05 AUG 17

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

1. Registrant Name New Jersey Hospital Association			
2. Address <input type="checkbox"/> Check if different than previously reported 605 Upland Place Alexandria, Va 22301			
3. Principal Place of Business (if different from line 2) Princeton City: Princeton New Jersey 08543 State/zip (or Country)			
4. Contact Name Kimberly Champi Krenik	Telephone (202) 365-8342	E-mail (optional) kkrenik@njha.com	5. Senate ID # 29128-12
7. Client Name self	<input checked="" type="checkbox"/> Self		6. House ID # 31221000

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June 30) OR Year End (July 1-December)

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 Act

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: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇔ \$ _____ <div style="text-align: center;">Income (nearest \$20,000)</div>	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> ⇔ \$ <u>100,000.00</u> <div style="text-align: center;">Expenses (nearest \$20,000)</div>
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 description of option: <input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions of <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code

Signature *Kimberly C. Krenik* Date **August 8, 2005**
 Printed Name and Title Kimberly Champi Krenik, Director of Federal Relations

0000402095

Registrant Name New Jersey Hospital Association Client Name self

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 MMM (one per page)

16. Specific lobbying issues

Rehabilitation/75 Percent Rule: Lobbied Congress to maintain 50% threshold used to determine whether a hospital or hospital unit qualifies as an inpatient rehabilitation facility under Medicare. Asked support for H.R. 3373/S.1405, Preserving Patient Access to Inpatient Rehabilitation Hospitals Act of 2005; Niche Providers/Specialty hospitals: Lobbied Congress for permanent moratorium of specialty hospitals and to close the self-referral loophole. Asked for support for S. 1002, Hospital Fair Competition Act of 2005; Physician payment rates: support Congressional efforts to boost payments to doctors; Transfer provision: Asked Congress to stop expansion of transfer provision that was included in the FY06 Inpatient PPS rule; Medicaid Commission: Asked Congress to support creation of Medicaid Commission

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

New Jersey Congressional Delegation (House and Senate).
Department of Health and Human Services
Centers for Medicaid and Medicare Services

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

Name	Covered Official Position (if applicable)
Kimberly Champi Krenik	

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

Signature *Kimberly C. Krenik* Date 8/8/05
Printed Name and Title Kimberly Champi Krenik, Director of Federal Relations

0000402096

Registrant Name New Jersey Hospital Association Client Name self

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 BUD (one per page)

16. Specific lobbying issues

Urged Congress to oppose any cuts to Medicaid/Medicare in FY06 Budget and to hold hospitals harmless in the budget process.

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

New Jersey Congressional Delegation (House and Senate).

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

Name	Covered Official Position (if applicable)
Kimberly Champi Krenik	

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

Signature *Kimberly C. Krenik* Date 8/8/05
Printed Name and Title Kimberly Champi Krenik, Director of Federal Relations

0000402097



Registrant Name New Jersey Hospital Association Client Name self

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is 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

Patient Safety Legislation: Lobbied for support of S.544, the Patient Safety and Quality Improvement Act of 2005 to reduce medical errors and encourage the reporting of health care mistakes to patient safety organizations.

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

New Jersey Congressional Delegation (House and Senate).

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

Name	Covered Official Position (if applicable)
Kimberly Champi Krenik	

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

Signature *Kimberly C. Krenik* Date 8/8/05
Printed Name and Title Kimberly Champi Krenik, Director of Federal Relations

3000402098

Registrant Name New Jersey Hospital Association Client Name self

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 TOR (one per page)

16. Specific lobbying issues

Urge for Medical Liability Reform: Asked for support of H.R. 5, the Help Efficient, Accessible, Low-cost, Timely Healthcare Act of 2005.

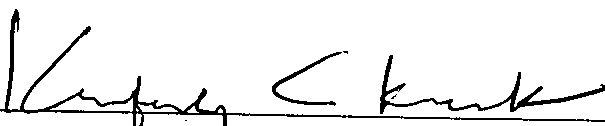
17. House(s) of Congress and Federal agencies contacted Check if None

New Jersey Congressional Delegation (House and Senate).

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

Name	Covered Official Position (if applicable)
Kimberly Champi Krenik	

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

Signature  Date 8/8/05

Printed Name and Title Kimberly Champi Krenik, Director of Federal Relations

0000402099

Registrant Name New Jersey Hospital Association Client Name self

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

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

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	Own perc clien

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

Signature *Kimberly C. Krenik* Date 8/8/05

Printed Name and Title Kimberly Champi Krenik, Director of Federal Relations

0000402100

