

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

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

03 FEB 25 AM 9

# LOBBYING REPORT

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

1. Registrant Name <b>American Academy of Ophthalmology</b>			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address <b>1101 Vermont Avenue, NW</b> Suite <b>700</b> City <b>Washington</b> State/Zip (or Country) <b>DC 20005</b> <b>US</b>			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name <b>Cathy Cohen</b>	Telephone <b>202.737.6662</b>	E-mail (optional) <b>cgcohen@aaodc.org</b>	5. Senate ID #
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # <b>30330000</b>

**TYPE OF REPORT** 8. Year 2002 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

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> >> \$ _____ Income (nearest \$20,000)	\$10,000 or more <input checked="" type="checkbox"/> >> \$ <u>\$520,000.00</u> 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).	<b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of method.
	<input checked="" type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition
	<input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033 of the Internal Revenue Code
	<input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of the Internal Revenue Code

Signature

*Patricia S. Cohen*

Date 2/15/2003



Registrant Name: American Academy of Ophthalmology

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

- HR 2484/ S 1967, Medicare Rehabilitation Services Act , Medicare coverage of vision rehabilitation services**
- HR 2663/ S 2609, Contact Lens Prescription Release Act, medical safety**
- HR 3061/S 1536, Labor, HHS, ED and Related Agencies Appropriations, NEI Funding**
- HR 3351, 3511/S 1707, Medicare Physician Fairness Act , fee schedule fix**
- HR 5657, Fairness to Contact Lens Consumers Act, patient safety**
- S 1949, Organ Donation and Recovery Improvement Act , organ donation**
- S 2793/ HR 4600, Help Efficient, Accessible, Low Cost, Timely Health Care (HEALTH) Act of 2002, medical**

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

- Centers for Medicare and Medicaid Services**
- Department of Health & Human Services**
- Department of Veterans Affairs**
- Food & Drug Administration**
- House of Representatives**
- United States Senate**

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

Name	Covered Official Position (if applicable)
<b>Bardon, Tricia</b>	
<b>Cohen, Cathy</b>	
<b>Eddington, Patrick</b>	
<b>Fox, Leann</b>	
<b>Nelson, Justin</b>	
<b>Rich, III, MD, William</b>	

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

Signature: 

Date **2/15/2003**



Registrant Name: American Academy of OphthalmologyClient Name: SELF

Item	Description	Data
16	Lobbying Issues	<b>CMS: 1206-P Hospital Outpatient Prospective Payment</b> <b>FDA: Docket 02D-0266</b> <b>CMS: 1204-P Physician Fee Schedule</b> <b>CMS: 1177-P Privacy Regulations</b> <b>HHS OIG: 8-CPG Draft OIG Compliance Program Guidance for Pharmaceu</b> <b>Manufacturers</b>



Registrant Name: American Academy of Ophthalmology

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  
**Kovar, Carrie**

**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 Bu (city and state or cou

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

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

Signature

*Carrie Kovar*

Filing #7860a53c-a866-4e0e-9d55-8e752ab620cc - Page 7 of 8

Date **2/15/2003**

Signature \_\_\_\_\_

Printed Name and Title **Cathy Cohen - Vice President, Governmental Affairs Division** \_\_\_\_\_ P: