



AMERICAN OSTEOPATHIC HEALTHCARE ASSOCIATION

5550 Friendship Boulevard • Suite 200 • Chevy Chase, Maryland 20815-7201
Phone: (301) 968-AOHA (2642) • Fax: (301) 968-4193 • Internet: www.aoha.org

OFFICE OF THE CLERK OF THE SENATE

99 DEC 22 PM 4: 58

December 17, 1999

HAND DELIVERED

Senate Office of Public Records
232 Hart Senate Office Building
Washington, DC 20510

RE: 1999 Mid-Year Report
American Osteopathic Healthcare Association
Senate ID Number 3025-12

Dear Sir/Madam:

In response to your letter of December 10, enclosed is a copy of the report we submitted to both the Secretary of the Senate and the Clerk of the House of Representatives on August 5, 1999. A copy of the card acknowledging receipt by the Clerk also is enclosed. Apparently, the copy directed to your office failed to reach you.

Please note that, in accordance with our response to Question 23 on the reporting form, Paul C. Rettig, to whom your letter is addressed, has left the American Osteopathic Healthcare Association. Please send future correspondence to me in his stead.

Yours truly,

Margaret J. Hardy, JD
Director of Government Relations

Enclosures

MJH:rlm

Clerk of the House of Representatives
 Legislative Resource Center
 B-106 Cannon Building
 Washington, DC 20515

Secretary of the Senate
 Office of Public Records
 332 Hart Building
 Washington, DC 20510

SECRETARY OF THE SENATE

99 DEC 22 PM 1:58

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LOBBYING REPORT

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

| | | | |
|---|---------------------------|--|---------------------------|
| 1. Registrant Name American Osteopathic Healthcare Association | | | |
| 2. Address <input type="checkbox"/> Check if different than previously reported 5550 Friendship Blvd., Suite 300 | | | |
| 3. Principal Place of Business (if different from line 2) City: Chevy Chase State/Zip (or Country) MD 20815 | | | |
| 4. Contact Name Margaret J. Hardy, JD | Telephone 301-968-2642 | E-mail (optional) mhardy@osteohdq.org | 5. Senate ID # 3025-12 |
| 7. Client Name <input type="checkbox"/> Self | | | 6. House ID # 32324000 |

TYPE OF REPORT 8. Year 1999 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 Activity

| INCOME OR EXPENSES - Complete Either Line 12 OR Line 13 | |
|--|---|
| <p>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"/> ⇨ \$ _____ <small>Income (nearest \$20,000)</small></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>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"/> ⇨ \$ <u>15,000</u> <small>Expenses (nearest \$20,000)</small></p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p> |

Signature _____

Printed Name and Title _____

Registrant Name American Osteopathic Client Name Self
Healthcare Association

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 MMM (one per page)

16. Specific lobbying issues

Graduate medical education
Healthcare provider reimbursement
False claims act

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

House
Senate
Department of health and Human Services

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

| Name | Covered Official Position (if applicable) | New |
|-----------------------|---|-------------------------------------|
| Paul C. Rettig | | <input type="checkbox"/> |
| Margaret J. Hardy, JD | | <input checked="" type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |

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

Signature _____ Date _____

Printed Name and Title _____

American Osteopathic

Registrant Name Healthcare 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

Paul C. Rettig

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 percentage in client |
|------|---------|--|---|--------------------------------------|
| | | | | |

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

Signature Margaret Hardy Date 8/2/99

Printed Name and Title MARGARET J. HARDY, JD
DIRECTOR OF GOVERNMENT RELATIONS

Form LD-2 (Rev. 6/98)

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Office of the Clerk
Legislative Resource Center
100 House of Representatives
Baltimore, MD 21201-6622

J. P. Trumbull

CLERK, U.S. HOUSE OF REPRESENTATIVES

32324000
AMERICAN OSTEOPATHIC HEALTHCARE ASSN
ATTN: MS. MARGARET J. HARDY
5550 FRIENDSHIP BLVD., #300
CHEVY CHASE, MD 20815-7201

* Lobby Mid-Year 1999 08/10/1999
* Lobby Registration Amendment 08/23/1999

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