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



LOBBYING REPORT

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

I. Registrant name			
Organization Texas Hospital Association			
2. Address Check if different than previously reported Address P. O. Box 15587			
City Austin State TX	X Zip Code 7	' 8761-5587	Country US
O. (v)	X Zip Code 7	78723	Country US
4a. Contact Name b. Telephone number Prefix Full Name	c. E-mail		5. Senate ID#
	iga@tha.org		70973-1
7. Client Name Self			6. House ID#
Texas Hospital Association			3588000
9. Check if this filing amends a previously filed version of this report	_		11 NT T . L.L
10. Check if this is a Termination Report	· · · · · · · · · · · · · · · · · · ·		11. No Lobbying Act
10. Check if this is a Termination Report ☐ ⇒ Termination Date	· · · · · · · · · · · · · · · · · · ·	13. Organi	
10. Check if this is a Termination Report	· · · · · · · · · · · · · · · · · · ·	_	zations
10. Check if this is a Termination Report → Termination Date INCOME OR EXPENSES - Complete Either Line 1 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period	2 OR Line 13 EXPENSES relating to	_	zations
10. Check if this is a Termination Report → Termination Date INCOME OR EXPENSES - Complete Either Line 1 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was:	2 OR Line 13 EXPENSES relating to were:	o lobbying act	zations
INCOME OR EXPENSES - Complete Either Line 1 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 □ \$10,000 or more □ ⇒ \$ Provide a good faith estimate, rounded to the nearest \$20,000,	EXPENSES relating to were: Less than \$10,000	o lobbying act	zations ivities for this reportin 123,000 eck box to indicate exp
10. Check if this is a Termination Report INCOME OR EXPENSES - Complete Either Line 1 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 □ \$10,000 or more □ \$	2 OR Line 13 EXPENSES relating to were: Less than \$10,000 \$10,000 or more 14. REPORTING ME accounting method. So Method A. Re Method B. Re	o lobbying act	zations ivities for this reporting 123,000 ick box to indicate explored for description of opting the suring LDA definitions at sunder section 6033(b).
INCOME OR EXPENSES - Complete Either Line 1 12. Lobbying Firms INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 □ \$10,000 or more □ ⇒ \$ 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	EXPENSES relating to were: Less than \$10,000 \$10,000 or more 14. REPORTING ME accounting method. So Method A. Re Int Method B. Re Int Method C. Re	o lobbying act	zations ivities for this reporting 123,000 ick box to indicate explored for description of opting the suring LDA definitions at sunder section 6033(b).

LD-2DS (Rev. 4/03)

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Registrant Name_	Texas Hospital Assoc	iation	Client Name	Texas Hospital Association
engaged in lobby	CTIMY. Select as ying on behalf of the cequested. Attach additionally and the control of the con	lient during the re	eporting period.	t the general issue areas in which the Using a separate page for each cod
15. General issu	e area code BUD - Bu	udget/Appropriatio	ns	(one per page)
16. Specific lobb	bying issues		Add page to confine	re specific issues description for this issue 🔊
Advocated a in the applica	gainst cuts to Medicare able provisions of the L	e/Medicaid and fo .abor HHS approp	r funding for nursi priations legislation	ing, rural and bioterrorism programs n.
17. House(s) of	Congress and Federal	agencies contact	ted Check if	fNone
House and S	Senate			
18. Name of each	ch individual who act	ed as a lobbyist in	this issue area	Add a page to continue additing lobbyists for
First Name	Name Last Name Knaupe	Suffix J.D.	Covere N/A	d Official Position (if applicable)
Gregg W. Joe A.	DaSilva		N/A	
1,				
,				
19. Interest of e	each foreign entity in	the specific issue	s listed on line 16	6 above 🔀 Check if None

Registrant Name	Texas Hospital Associ	ation	Client Name	Texas Hospital Association
engaged in lobb	ACTIVITY. Select as bying on behalf of the crequested. Attach additionally	lient during the i	eporting period. \	t the general issue areas in which the Using a separate page for each cod
15. General issu	ie area code	nsumer Issues/S	Safety/Protection	(one per page)
16. Specific lob	bying issues	·	Add page to continu	e specific issues description for this issue
Advocated fi all provision		tion. S.544, the	Patient Safety and	Quality Improvement Act of 2005,
17. House(s) of	Congress and Federal	agencies contac	ted Check if	None
House and S	Senate	ed as a lohbvist i	n this issue area	, Add a page to continue additing lobbylists for
First Name	Name Last Name	Suffix		d Official Position (if applicable)
Gregg W.	Knaupe	J.D.	N/A	
Joe A.	DaSilva		N/A	
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19. Interest of	each foreign entity in t	he specific issue	es listed on line 16	above Check if None

Registrant Name_	Texas Hospital Assoc	lation	Client Name Texas Hospital Association
engaged in lobby	CTIVITY. Select as ying on behalf of the cequested. Attach addi	lient during the	necessary to reflect the general issue areas in which the reporting period. Using a separate page for each cod a needed.
15. General issu	e area code DIS - Dis	aster Planning/E	mergencies (one per page)
16. Specific lobl	bying issues		Add page to continue specific issues description for this issue
Advocated for appropriation	or funding for hospital p ns legislation.	oreparedness in t	he applicable provisions of the Labor HHS
17. House(s) of	Congress and Federal	agencies contac	ted Check if None
House and S	Senate 	ed as a lobbyist i	n this issue area Add a page to continue additing liabbyists for
First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Gregg W.	Knaupe	J.D.	N/A
Joe A.	DaSilva		N/A
,			
19. Interest of e	each foreign entity in t	the specific issue	es listed on line 16 above 🔀 Check if None

Registrant Name_	Texas Hospital Assoc	iation	Client Name Texas Hospital Association
engaged in lobby	CTIVITY. Select as ying on behalf of the cequested. Attach add	lient during the	necessary to reflect the general issue areas in which the reporting period. Using a separate page for each cod s needed.
15. General issu	e area code	lucation	(one per page)
16. Specific lob	bying issues		Add page to continue specific issues description for this issue
Advocated for legislation.	or nursing education fu	nding in the appl	licable provisions of the Labor HHS appropriations
17. House(s) of	Congress and Federal	agencies contac	cted Check if None
18. Name of ea	ch individual who acto	ed as a lobbyist	in this issue area Ackt a page to continue additing tobbyists for
First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Gregg W.	Knaupe	J.D.	N/A
Joe A.	DaSilva		N/A
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19. Interest of e	each foreign entity in t	the specific issu	es listed on line 16 above 🔀 Check if None

LD-2DS (RJ)

Page _5

Registrant Name	Texas Hospital Associ	ation	Client Name Texas Hospital Association			
LOBBYING ACTIMY. Select as many codes as necessing aged in lobbying on behalf of the client during the report of the client and page (s) as necessition as requested. Attach additional page (s) as necessition as requested.		lient during the r	necessary to reflect the general issue areas in which the reporting period. Using a separate page for each considered.			
15. General issue	area code HCR - He	ealth Issues	(one per page)			
16. Specific lobby	ying issues		Add page to continue specific issues description for this issue			
3.1002, the 1	air Competition Act of	2000, all provide				
17. House(s) of (Congress and Federal	agencies contac	cted Check if None			
10 N	h individual who acte	ad as a lobbyist i	n this issue area			
First Name	Name Last Name Knaupe	Suffix J.D.	n this issue area Add a page to continue additing lobbyists for a Covered Official Position (if applicable) N/A			
Joe A.	DaSilva		N/A			
19. Interest of ea	ach foreign entity in t	the specific issue	es listed on line 16 above \(\overline{\times} \) Check if None			

Registrant Name _	Texas Hospital Associ	ation	Client Name Texas Hospital Ass	ociation
engaged in lobby	CTIVTY. Select as ying on behalf of the cequested. Attach addi	lient during the i	necessary to reflect the general issue are eporting period. Using a separate pa needed.	eas in which the
15. General issue	e area code	migration	(one per page)	
16. Specific lobb	oying issues		Add page to continue specific issues descript	on for this issue 🦻
Medicare Imp	provement and Moderr	nization Act.	m treatment of illegal immigrants autho Physicians in Medically Underserved Ar	
	Congress and Federal	agencies contac	ted Check if None	
10 Name of one	ch individual who acte	ed as a labbyist i	n this issue area	1 the sinds Sou
First Name	Name Last Name	Suffix	Covered Official Position (if a	
Gregg W.	Knaupe	J.D.	N/A	
Joe A.	DaSilva		N/A	
,				
19. Interest of e	each foreign entity in t	he specific issue	es listed on line 16 above 🔀 Check if	None

Page __7

Registrant Name _	Texas Hospital Assoc	iation	Client Name Texas Hospital Association
	CTIVTY. Select as ying on behalf of the cequested. Attach add	lient during the	necessary to reflect the general issue areas in which the reporting period. Using a separate page for each cod s needed.
15. General issu	e area code MED - M	edical/Disease F	Research/Clinical Labs (one per page)
16. Specific lobb	oying issues		Add page to continue specific issues description for this issue 🕏
Advocated fo	or rural health care res	earch grants in t	ne HHS Appropriations provisions.
17. House(s) of	Congress and Federa	agencies conta	cted Check if None
House and S	Senate ch individual who act	ed as a lobbyist	in this issue area Add a page to continue additing lobbyists for
First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Gregg W.	Knaupe	J.D.	N/A
Joe A.	DaSilva		N/A
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19. Interest of e	each foreign entity in	the specific issu	es listed on line 16 above \(\sum \) Check if None

Registrant Name _	Texas Hospital Assoc	iation	Client Name _	Texas Hospital Association
engaged in lobby	CTIMY. Select as ying on behalf of the cequested. Attach add	lient during the	reporting period. U	the general issue areas in which the Ising a separate page for each cod
15. General issue	e area code MMM - N	ledicare/Medicai	d 	(one per page)
16. Specific lobb	oying issues		Add page to continue	e specific issues description for this issue 🔊
Advocated fo legislation.	or preservation of Med	care/Medicaid fu	unding in the applica	able provisions of appropriations
17. House(s) of	Congress and Federal	agencies conta	cted Check if	None
House and S	enate			
18. Name of each	ch individual who act	ed as a lobbyist	in this issue area	Add a page to continue additing lobbyists for
First Name	Name Last Name	Suffix	Covered	Official Position (if applicable)
Gregg W.	Knaupe	J.D.	N/A	
Joe A.	DaSilva		N/A	
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19. Interest of e	ach foreign entity in	the specific issu	es listed on line 16	above Check if None

Registrant Name Texa					spital Association	4
Information Up 20. Client new addres		Complete UNI	_Y where regis	stration inform	nation has changed	
Address	SS					
			State	Zip Code	Country	у
City · 21. Client new princi	ipal place of busi	ness (if different th	,,,			
Citv	• •		State	Zip Code	Country	у
22. New general des	cription of client'	's business or activi	ties			
LOBBYIST UPD 23. Name of each p	OATE previously repor	rted individual wh	no is no longer 6	expected to act a	s a lobbyist for the cl	ient
First Name	Last Name	Suffix	·	First Name	Last Name	S
1			3			
2			4			
ISSUE UPDATE	•		F	ind the code to	select below.	
24. General lobbying	ng issues that n o	o longer pertain	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		LONG.	<u> </u>			
AFFILIATED O						
25. Add the follow		ganization(s)	Address		Principal place of E	Busine
Na	me		Authess		(city and state or	
		Address			City	
		C/S/Z			State Cou	ntry
		Address			City	
		C/S/Z			State	
26. Name of each p	previously repo	rted organization	that is no longe	r affiliated with	the registrant or clien	t
1		2		3		
FOREIGN ENT	TITIES					
27. Add the follow	ing foreign enti				Amount of contribution	Ov
Name	Street Address	Address s State/Province ((city and	place of business I state or country)	for lobbying activities	per clii
		·····	City			
			State	Country		
28. Name of each pr	eviously reported	d foreign entity that	t no longer owns,	or controls, or is	affiliated with the regis	strant
affiliated organiz					-	
		[3]		<u>[5</u>	_	
2		[4]		6	<u>'</u>	

Add a page for mure