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LOBBYING REPORT

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

1. Registrant Name <i>Association of Professors of Medicine</i>			
2. Address <input type="checkbox"/> Check if different than previously reported <i>2501 M Street, NW, Suite 550, Washington, DC 20037-1308</i>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country): _____			
4. Contact Name <i>Jeffrey R. Coughlin</i>	Telephone <i>(202) 861-7700</i>	E-mail (optional) <i>Coughlin@im.org</i>	5. Senate ID# <i>4686-12</i>
7. Client Name <input checked="" type="checkbox"/> Self	6. House ID# <i>3388 2000</i>		

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 checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ <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 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 *Ted Flasher*
 Printed Name and Title *Ted Flasher Executive Director*

Registrant Name Association of Professors of Medicine 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

Graduate and undergraduate medical education; Health Professions Workforce issues.

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

House of Representatives, Senate, Health Resources and Services Administration (HRSA), Medicare Payment Advisory Commission, Office of Management and Budget, National Bipartisan Commission on the future of Medicare.

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

Name	Covered Official Position (if applicable)	New
<u>Tad Ibrahim</u>		<input type="checkbox"/>
<u>Jeff Coughlin</u>		<input 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 [Signature] Date 7/27/99
Printed Name and Title Executive Director Tad Ibrahim

Registrant Name Association of Professors of Medicine 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 MED (one per page)

16. Specific lobbying issues

National Institutes of Health (NIH) funding and research priority setting, Health Services Research funding, Veterans' Health Administration Medical Care and Health Research, Agency for Health Care Policy and Research (AHCPR).

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

House of Representatives, Senate, NIH, Department of Veterans' Affairs, Office of Management and Budget.

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

Name	Covered Official Position (if applicable)	New
Tad Ibrahim		<input type="checkbox"/>
Jeff Coughlin		<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 [Signature] Date 7/27/99
 Printed Name and Title Tad Ibrahim Executive Director

Registrant Name Association of Professors of Medicine 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 BVO (one per page)

16. Specific lobbying issues
Appropriations for: Veterans Health Administration Medical Care and Health Research, Title VIII Health Programs of the Public Health Services Act, NIH, HRSA, AHCPR, Food and Drug Administration, Centers for Disease Control and Prevention.

17. House(s) of Congress and Federal agencies contacted Check if None
House of Representatives, Senate, Office of Management and Budget, 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
Tod Ibrahim		<input type="checkbox"/>
Jeff Coughlin		<input 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 [Signature] Date 7/27/99
 Printed Name and Title Tod Ibrahim Executive Director

Registrant Name Association of Professors of Medicine 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 MMM (one per page)

16. Specific lobbying issues

Medicare funding of Graduate Medical education, Disproportionate Share Hospital payments, Medicare payments for physician services

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

House of Representatives, Senate, Medicare Payment Advisory Commission, Health Care Financing Administration, National Bipartisan Commission on the future of Medicare.

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

Name	Covered Official Position (if applicable)	New
Tod Ibrahim		<input type="checkbox"/>
Jeff Coughlin		<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 *Tod Ibrahim* Date 7/27/99
 Printed Name and Title Tod Ibrahim Executive Director

Registrant Name Association of Professors of Medicine 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 SCI (one per page)

16. Specific lobbying issues

funding for clinical research, funding for medical and health research, support for clinical investigators.

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

House of Representatives, Senate, National Institutes of Health, Office of Management and Budget.

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

Name	Covered Official Position (if applicable)	New
<u>Tod Ibrahim</u>		<input type="checkbox"/>
<u>Jeff Coughlin</u>		<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 *Tod Ibrahim* Date 2/27/99

Printed Name and Title Tod IBRAHIM Executive Director

Association of Professors of Medicine
Registrant Name _____ 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 VET (one per page)

16. Specific lobbying issues
Funding and activities of the Department of Veterans Affairs, Veterans' Health Administration Medical Care and Health Research.

17. House(s) of Congress and Federal agencies contacted Check if None
House of Representatives, Senate, Department of Veterans Affairs, Office of Management and Budget.

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

Name	Covered Official Position (if applicable)	New
<u>Tod Ibrahim</u>		<input type="checkbox"/>
<u>Jeff Coughlin</u>		<input 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 [Signature] Date 7/27/99
Printed Name and Title Tod Ibrahim Executive Director