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SECRETARY OF THE SENATE

03 FEB 25 PM 3: 07

**LOBBYING REPORT**

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

1. Registrant Name Academy of Managed Care Pharmacy			
2. Address <input type="checkbox"/> Check if different than previously reported 100 North Pitt Street, Suite 400			
3. Principal Place of Business (if different from line 2) City: Alexandria State/Zip (or Country) VA 22314			
4. Contact Name Daniel Fishkin	Telephone (703) 683-8416	E-mail (optional) dfishkin@amcp.org	5. Senate ID # 48793
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # 34506

**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**

<p align="center"><b>12. Lobbying Firms</b></p> <p><b>INCOME</b> 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"/> ⇒ \$ _____ Income (nearest \$20,000)</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 align="center"><b>13. Organizations</b></p> <p><b>EXPENSES</b> 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>100,000</u> Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input checked="" type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>
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Signature



Printed Name and Title William Hermelin, Director of Government Relations

LD-2 (REV. 6/98):

PA

Registrant Name Academy of Managed Care Pharmacy Client Name \_\_\_\_\_

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

Medicare Prescription Drug Coverage  
Medicare Pharmacist Coverage Act of 2001 (S974)  
Part B Drugs Under Medicare

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

United States 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)
William Hermelin	
Ann Curry	

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

Signature *William Hermelin* Date 2/13/03



Registrant Name Academy of Managed Care Pharmacy Client Name \_\_\_\_\_

**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, information as requested. Attach additional page(s) as needed.

15. General issue area code HCR (one per page)

16. Specific lobbying issues

Patient's Bill of Rights (H.R. 526/~~5~~.872)  
Medical Errors  
Pharmacy Education Act of 2001 (H.R. 2173)

17. House(s) of Congress and Federal agencies contacted

Check if None

United States 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)
William Hermelin	
Ann Curry	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature William M. Hermelin Date 2/13/03

Printed Name and Title William Hermelin, Director of Government Relations

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Form LD-2 (Rev. 6/98)

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