

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

SECRETARY OF THE SENATE
02 AUG 21 AM 11:11

LOBBYING REPORT

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

1. Registrant Name <u>Valerie Wilbur, The Wilbur Group</u>			
2. Address <input checked="" type="checkbox"/> Check if different than previously reported <u>403 E. Washington St Charles Town, WV 25414</u>			
3. Principal Place of Business (if different from line 2) City: <u>Washington</u> State/Zip (or Country) <u>DC 20004</u>			
4. Contact Name <u>Valerie Wilbur</u>		Telephone <u>202-258-6379</u>	E-mail (optional) <u>vsWilbur@earthlink.net</u>
7. Client Name <input type="checkbox"/> Self <u>Heather Plang Nevada</u>		5. Senate ID # <u>50216</u>	6. House ID # <u>3467</u>

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July 1-Dec)

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>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"/> ⇒ \$ <u>17,000</u> 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>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 type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature Valerie Wilbur

Printed Name and Title Valerie Wilbur

Registrant Name Valerie Wilbur Client Name Health Plan of Nev

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

Worked with Social HMO sites to obtain legislation to make the Social HMO demonstration a permanent program under Medicare. Sought support for H.R. 2953 for Social HMO permanency. Worked with Senate staff on introduction of S. 2782 and in obtaining cosponsors for this bill. Worked with key Congressional committees to obtain support for fair payment for specialized programs for frail elderly.

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

United States Senate
United States House of Representatives
Center for Medicare and Medicaid Policy
Department of Health & Human Services

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

Name	Covered Official Position (if applicable)
<u>Valerie Wilbur</u>	

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

Signature [Handwritten Signature] Date 8/13/02
Printed Name and Title Valerie Wilbur, Principal

Registrant Name Valerie Wilbur
The Wilbur Group Client Name Health Plan of Nevada

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

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 co)
Elderplan	Brooklyn, NY	New York City,
Scan Healthplan	Bonny Beach, CA	Southern CA, C

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 [Handwritten Signature] Date 8/13/02

