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LOBBYING REPORT

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

1. Registrant Name <u>Blue Cross Blue Shield of Oklahoma</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>1215 S. Boulder, Tulsa, OK 74119</u>			
3. Principal Place of Business (if different from line 2) <u>3401 NW 63rd</u>			
City: <u>Oklahoma City</u>		State/Zip (or Country) <u>OK 73116</u>	
4. Contact Name <u>Dick Howard</u>	Telephone <u>405-841-9736</u>	E-mail (optional) <u>dhoward@</u>	5. Senate ID # <u>4607</u>
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # <u>3436</u>

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

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 Lobbyi

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<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"/> ⇒ \$ _____ 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>EXPENSES relating to lobbying activities for this r period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indic accounting method. See instructions for description</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA defi</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1 Internal Revenue Code</p>

Signature Dick Howard

Printed Name and Title DICK HOWARD, Vice President, Public Affairs

LD-2 (REV. 6/98)

Registrant Name Blue Cross Blue Shield of OK Client Name _____

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

General issue area code BUD (one per page)

Specific lobbying issues

Medicare Contractor Funding

House(s) of Congress and Federal agencies contacted

Check if None

House, Senate, CMS

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

Name

Covered Official Position (if applicable)

Dick Howard

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

Check if None

Signature

Dick Howard

Date _____

Printed Name and Title Dick Howard, VP Public Affairs

m.L.D-2 (Rev. 1/98)

Registrant Name Blue Cross Blue Shield of OK Client Name _____

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

General issue area code HCR (one per page)

Specific lobbying issues

- "Administrative Simplification Compliance Act" (HR 3323) bill, Administrative Simplification.
- HIPAA Privacy Rule, Privacy
- TAX credits for the purchase of health insurance (no bill); credits for purchase of long-term care insurance (no bill)
- "Eliminate Colorectal Cancer Act of 2001 (S710) entire"
- "On line Personal Privacy Act" (S2201)

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

Refer to House(s) and Federal agencies listed on page 3.

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

Name	Covered Official Position (if applicable)
Duke Howard	

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

Signature: Duke Howard Date: _____

Printed Name and Title Dick Howard, VP Public Affairs

FD-2 (Rev 6/2008)

Registrant Name Blue Cross Blue Shield of OK Client Name _____

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

General issue area code LBR (one per page)

1. Specific lobbying issues

Antitrust, physician collective bargaining, no bill

House(s) of Congress and Federal agencies contacted

House, Senate, White House

Check if None

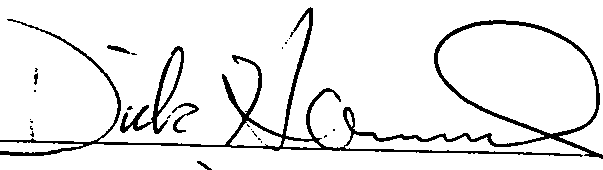
Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
<u>Dick Howard</u>	

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

Check if None

Signature



Date

Printed Name and Title Dick Howard, VP Public Affairs

m 1.D-2 (Rev. 7/98)

Registrant Name Blue Cross Blue Shield of OK Client Name _____

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

General issue area code MMM (one per page)

Specific lobbying issues

- Medicare Reform Act / S. 1135 (Graham) entire bill.
- Medicare Appeals, Regulatory and Contracting Improvement Act (Kerry) entire bill.
- Medicare Regulatory and Contracting Reform Act / H.R. 3391
- Medicare Reform, Medigap reform, Medicare + Choice, Medicare Contractor Reform
- Medicare Contractor Liability

House(s) of Congress and Federal agencies contacted Check if None
House, Senate, HHS, CMS, OMB, CBO, DOJ, White House

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

Name	Covered Official Position (if applicable)
<u>Dick Howard</u>	

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

Signature Dick Howard Date _____

Printed Name and Title Dick Howard, VP Public Affairs

n.L.O-2 (Rev. 1/98)

Registrant Name Blue Cross Blue Shield of OK 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. Provide information as requested. Attach additional page(s) as needed.

General issue area code PHA (one per page)

Specific lobbying issues

- "Greater Access to Affordable Pharmaceuticals Act of 2001" (S.812)
- "Access to Pharmaceuticals/ Generic Act" (HR 1862), Generics
- Pharmaceuticals costs
- Prescription Drugs
- "Prescription Drug User Fee Act Reauthorization" (HR 3448)

House(s) of Congress and Federal agencies contacted

House, Senate, FDA

Check if None

Name of each individual who acted as a lobbyist in this issue-area _____

Name	Covered Official Position (if applicable)
Dick Howard	

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

Check if None

Signature  Date _____

Printed Name and Title Dick Howard, JP Public Affairs

FD-2 (Rev. 6/98)

Office of the Clerk
Legislative Resource Center
Lobby Disclosure Act
Request for Notification of Receipt by E-mail

Please complete the following information if you would like to receive an e-mail confirming receipt of your original filing.

Registrant's Name: Dick Howard

House Identification Number: 34361000

Contact Name: Barbara Azar

Contact Title: Exec. Secretary

Contact E-mail Address: bazar@bcbsok.com

Contact's Daytime Phone Number: 405-841-9597

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