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SECRETARY OF THE SENATE

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**LOBBYING REPORT**

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

1. Registrant Name Capital Blue Cross			
2. Address <input type="checkbox"/> Check if different than previously reported 2500 Elmerton Avenue, Harrisburg, PA 17177-2531			
3. Principal Place of Business (if different from line 2) City: Same State/Zip (or Country)			
4. Contact Name Vincent P. Carocci	Telephone (717) 541-6133	E-mail (optional)	5. Senate ID # 8043-12
7. Client Name <input checked="" type="checkbox"/> Self	6. House ID # 32629000		

**TYPE OF REPORT** 8. Year 2000 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 

<b>INCOME OR EXPENSES - Complete Either Line 12 OR Line 13</b>	
<p><b>12. Lobbying Firms</b></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"/> ⇒ \$ _____ 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><b>13. Organizations</b></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"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> 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 \_\_\_\_\_

*Vincent P. Carocci*

Printed Name and Title Vincent P. Carocci, Director, Government Affairs

LD-2 (REV. 6/98)

PAGE 1 of 2

Registrant Name Capital Blue Cross Client Name Vincent P. Carocci

**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
- Health Plan Liability
  - Patients' Bill of Rights
  - MEWAs and AHPs

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

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

Name	Covered Official Position (if applicable)	New
Vincent P. Carocci		<input type="checkbox"/>
		<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: Vincent P. Carocci Date: 2/13/01

Printed Name and Title: Vincent P. Carocci, Director, Government Affairs

**LOBBYING CONTACT/ACTIVITY LOG**  
 USE THIS FORM TO RECORD ALL CONTACTS/ACTIVITY WITH FEDERAL  
 OFFICIALS COVERED UNDER THE LOBBYING DISCLOSURE ACT OF 1995  
 7/1/00 - 12/31/00

Date of Activity/Contact	Name of Contact	Office of Contact	Issue(s) Discussed	Nature/Duration of Contact
9/25/00	U. S. Representative Holden	Harrisburg, PA	Health Insurance Issues	Luncheon with Capital Blue Cross executive staff and: Vince Carocci (1 hour) James Mead (1 hour) Lee Van Vaikenburgh (1 hour)
10/2/00	PA Small Business Community	Harrisburg, PA	Patient Protections	Letter-- Vince Carocci (1 hour)
10/9/00	Governor Tom Ridge's Office Becky Halkias	Washington, DC	MEWAS/AHP's	Michael MacGee (1 hour) Lee Van Vaikenburgh (1 hour) Personal Visit: Vince Carocci (1 hour) James Mead (1 hour)

Name of Person Completing Form

Vincent P. Carocci  
Please Print or Type

Signature of Person Completing Form



Date Form Completed:

2 / 13 / 01

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