

SECRETARY OF THE  
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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
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## LOBBYING REPORT

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

1. Registrant Name <b>Michigan Health &amp; Hospital Association</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>6215 West Saint Joseph Highway</b>			
3. Principal Place of Business (if different from line 2) <b>Lansing MI 48917</b> City: State/zip (or Country)			
4. Contact Name <b>Brian Peters</b>	Telephone <b>(517) 703-8609</b>	E-mail (optional) <b>bpeters@mha.org</b>	5. Senate ID # <b>25168-12</b>
7. Client Name <b>Self</b>	<input checked="" type="checkbox"/> Self		6. House ID # <b>3130000</b>

**TYPE OF REPORT** 8. Year 2004 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 Lobbyin

### INCOME OR EXPENSES Complete Either Line 12 OR Line 13

<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"/> ⇒ \$ <u>                    </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><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"/> ⇒ \$ <u>                    </u> Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate ex accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definiti</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(c Internal Revenue Code</p>
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*[Handwritten Signature]*

Date 7/28/04

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

Brian Peters, Senior Vice President, Advocacy Division

LD-2 (REV. 4/03)

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Registrant Name Michigan Health & Hospital Association Client Name Self

**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

Medicare Prescription Drug, Improvement and Modernization Act  
Federal Matching Assistance Percentage  
Acute Rehabilitation Services 75% Rule  
Hospital wage index classification; one-time appeal process

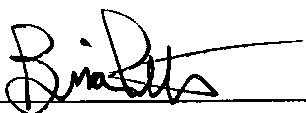
17. House(s) of Congress and Federal agencies contacted  Check if None

US House  
US Senate  
CMS  
HHS

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

Name	Covered Official Position (if applicable)
Brian Peters	
Laura Appel	

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

Signature  Date 7/28/04

Printed Name and Title Brian Peters, Senior Vice President, Advocacy Division

Form LD-2 (Rec. 4/03)

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