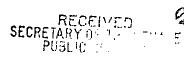
Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510



06 FEB 15 PH 2: 11

## **LOBBYING REPORT**

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

1. Registrant name			
Blue Cross & Blue Shield Assn			
2. Address Check if different than previously reported			
1310 G Street, NW			
Washington D0	C	20005	USA
3. Principal place of business (if different than line 2)			
5			
*	p or Country		
4a. Contact Name b. Telephone number	c. E-mail		5. Senate ID#
	n.breskin@bcbsa.com		6358-12
7. Client Name Self			6. House ID # 31576000
Blue Cross & Blue Shield Assn	1		31376000
TYPE OF REPORT 8. Year 2005 Midyear (January	/ 1-June30)	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		-	11. No Lobbying Activity
INCOME OR EXPENSES - Complete Either Line 12	2 OR Line 13		
12. Lobbying Firms		13. Organi	izations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating were:	to lobbying ac	tivities for this reporting per
Less than \$10,000	Less than \$10,000	3	
\$10,000 or more	\$10,000 or more	ጃ ⇒ \$	3,600,000
Provide a good faith estimate, rounded to the nearest \$20,000,			eck box to indicate expense s for description of options.
of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying	⊠ Method A. F	Reporting amoun	ts using LDA definitions only
activities on behalf of the client).	Method B.		ts under section 6033(b)(8) of th
	· · · · · · · · · · · · · · · · · · ·	Reporting amoun Revenue Code	ts under section 162(e) of the In
			Edit Form >
Signature (p.)	— Date	5	115/06
Printed Name and Title Jack Ericksen, Vice President			Smi

Blue Cross & Blue Shield Assn

Registrant Name

Blue Cross & Blue Shield Assn

Client Name

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

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Page 2 c

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

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ĺ		ׅ֚֚֚֝֝֝֝֜֝֝֜֝֝֜֜֝֝֓֜֝֝֜֝֓֓֓֜֝֜֜֜֝֡֓֓֓֓֩֡֜֜֝֡֓֜֝֡֜֜֝֡֡֓֓֩֡֡֩
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Registrant N	Blue Cross and Blue Shield Association	Blue Cross and Blue Shield Association Client Name
J	<del></del>	HCR
	fic lobbying issues (continued from previou	as page)
Charte Benefi Initiativ Act of	er; FEHBP Buy-in: S637 "Small Employers Hea ts Act of 2005", HR1955 "Small Employers Hea ves: S1716 "Health Care Emergency Relief" a	Modernization and Affordability Act of 2005"; Industrial Loadth Benefits Program Act", S874 "Small Employers Health Benefits Act of 2005"; Hurricane Katrina Health and S1769 "Public Health Insurance Emergency Response tial legislation; FEHBP Health IT - potential legislation; ans.
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E	Blue Cross and Blue Shield Association		Blue Cross and Blue Shield Association	
Registrant Name_		Client Name		

## ADDENDUM for General Lobbying Issue Area HCR

18. Name of each individual who acted as a lobbyist in this issue area (continued from previous page)

First Name	Name Last Name Handelman	Suffix	Covered Official Position (if applicable)
Justine	Hays	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Phillip Mary Neil	Lehnhard	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Joseph	Musker	***************************************	
Christina	Nyquist		
Scott	Serota		
Joel	Slackman		
Stephanie	Smaldore		
Berry	Trimble	***************************************	
Adam J.	Wojciak		
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ADDENDUM for General Lobbying Issue Area	
18. Name of each individual who acted as a lobbyist in	1 2 7
Name First Name Last Name Suffix	Covered Official Position (if applicable)
Adam J. Wojciak	
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Blue Cross and Blue Shield Association

Client Name

Blue Cross and Blue Shield Association

Registrant Name

LD-2DS (Rev. 4.06)

Page 8 c

26. Name of each previously reported organization that is <b>no longer</b> affiliated with the registrant or clie  FOREIGN ENTITIES  27. Add the following foreign entities	1. Client new principal plac	ce of business (if different tha	ın line 20)		
LOBBYIST UPDATE  23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the contribution  Stephanie Smaldore  ISSUE UPDATE  24. General lobbying issues that no longer pertain  AFFILIATED ORGANIZATIONS  25. Add the following affiliated organization(s)  Name Address Principal place of (city and state on city and contribution contribution of the following foreign entities  Name Address Principal place of business Amount of contribution contribution	City	Sta	tc/Zip		
23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the c Stephanie Smaldore  ISSUE UPDATE 24. General lobbying issues that no longer pertain  AFFILIATED ORGANIZATIONS 25. Add the following affiliated organization(s)  Name Address Principal place of (city and state or city and city and state or city and city and state or city and ci	2. New general description	of client's business or activit	ies		
ISSUE UPDATE  24. General lobbying issues that no longer pertain  AFFILIATED ORGANIZATIONS  25. Add the following affiliated organization(s)  Name  Address  Principal place of (city and state or clie)  FOREIGN ENTITIES  27. Add the following foreign entities  Name  Address  Principal place of business  Amount of contribution		sly reported individual wh	o is <b>no longer</b> expected to act a	as a lobbyist for the clic	ent
24. General lobbying issues that no longer pertain  AFFILIATED ORGANIZATIONS  25. Add the following affiliated organization(s)  Name  Address  Principal place of (city and state or city and st	Stephanie Sma	aldore			
24. General lobbying issues that no longer pertain  AFFILIATED ORGANIZATIONS  25. Add the following affiliated organization(s)  Name  Address  Principal place of (city and state or city and st	SSUE UPDATE				
25. Add the following affiliated organization(s)  Name Address Principal place of (city and state or city and state or c		es that <b>no longer perta</b> in			
Name Address Principal place of (city and state or city and state or Principal place of (city and state or city and state or Principal place of the previously reported organization that is <b>no longer</b> affiliated with the registrant or cliest Principal place of business Amount of contribution Address Principal place of business Amount of contribution			I		
26. Name of each previously reported organization that is <b>no longer</b> affiliated with the registrant or clie  FOREIGN ENTITIES  27. Add the following foreign entities  Name  Address  Principal place of business  Amount of contribution		liated organization(s)	Address	Principal place of B	ısines
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FOREIGN ENTITIES  27. Add the following foreign entities  Name Address Principal place of business Amount of contribution	***************************************				
FOREIGN ENTITIES  27. Add the following foreign entities  Name Address Principal place of business Amount of contribution					
FOREIGN ENTITIES  27. Add the following foreign entities  Name Address Principal place of business Amount of contribution					
27. Add the following foreign entities  Name Address Principal place of business Amount of contribution					
27. Add the following foreign entities  Name Address Principal place of business Amount of contribution	6. Name of each previou	sly reported organization t	hat is <b>no longer</b> affiliated with	the registrant or client	
Name Address Principal place of business Amount of contribution	.e. Name of each previou	Isly reported organization t	hat is <b>no longer</b> affiliated with	the registrant or client	
	FOREIGN ENTITIES		hat is <b>no longer</b> affiliated with	the registrant or client	
	FOREIGN ENTITIES 27. Add the following fore	eign entities	Principal place of business	Amount of contribution	Owr
	FOREIGN ENTITIES 27. Add the following fore	eign entities	Principal place of business	Amount of contribution	Ow
28. Name of each previously reported foreign entity that <b>no longer</b> owns, <u>or</u> controls, <u>or</u> is affiliated with the reg	FOREIGN ENTITIES 27. Add the following fore	eign entities	Principal place of business	Amount of contribution	Ow
annated organization	FOREIGN ENTITIES 27. Add the following fore Name  28. Name of each previously	eign entities Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Own perc clien
	FOREIGN ENTITIES 27. Add the following fore Name	eign entities Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Own perc clien
ignature Date	FOREIGN ENTITIES 27. Add the following fore Name  28. Name of each previously	eign entities Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ow pero clien

Registrant Name Blue Cross & Blue Shield Assn Client Name Blue Cross & Blue Shield Assn

Information Update Page - Complete ONLY where registration information has changed.