

SECRETARY
00000011750
05 JAN 12 11 17 50

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
---	--

LOBBYING REPORT

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

1. Registrant Name <u>MEDICAID POLICY, LLC</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>3948 GARRISON ST. NW</u>			
3. Principal Place of Business (if different from line 2) City: <u>WASHINGTON</u> State/Zip (or Country) <u>DC 20016</u>			
4. Contact Name <u>ANDY SCHNEIDER</u>		Telephone <u>(202) 393-6898</u>	E-mail (optional)
7. Client Name <input type="checkbox"/> Self <u>CALIFORNIA RURAL INDIAN HEALTH BOARD</u>		5. Senate ID # <u>5398</u>	
		6. House ID # <u>3497</u>	

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 Lobbying

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" 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 align="center">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 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>

Handwritten signature

Signature ANDREAS G. SCHWEIZER

Printed Name and Title ANDREAS G. SCHWEIZER, PRINCIPAL

LD-2 (REV. 6/98)

PA

Registrant Name MEDICAID POLICY, LLC Client Name CALIFORNIA RURAL INDIAN

00000011751

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.

15. General issue area code MMM (one per page)

16. Specific lobbying issues

MEDICAID ADMINISTRATIVE MATTERS

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

CENTER FOR MEDICARE & MEDICAID SERVICES
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>ANDY SCHNEIDER</u>	

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

Signature [Handwritten Signature] Date JAN. 5, 2

Printed Name and Title ANDREAS G. SCHNEIDER, PRINCIPAL

Form LD-2 (Rev. 6/98)

Page 2