

Clerk of the House of Representatives  
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 Washington, DC 20515

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 Office of Public Records  
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 Washington, DC 20510

SECRETARY OF THE SENATE  
 01 JUL 25 AM 11:09

**LOBBYING REPORT**

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

1. Registrant Name American College of Chest Physicians			
2. Address <input type="checkbox"/> Check if different than previously reported 3300 Dundee Road, Northbrook, Illinois 60062			
3. Principal Place of Business (if different from line 2) City: same State/Zip (or Country)			
4. Contact Name Lynne Marcus	Telephone 847-498-8331	E-mail (optional) lmarcus@chestnet.org	5. Senate ID # 1956-12
7. Client Name <input type="checkbox"/> Self Self	6. House ID # 3172000		

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

<p><b>INCOME OR EXPENSES - Complete Either Line 12 OR Line 13</b></p>	
<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"/> ⇒ \$ _____  <small>(Inc. - nearest \$20,000)</small></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 type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>100,000</u>  <small>Expenses (nearest \$20,000)</small></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 checked="" 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 Lynne Marcus  
 Printed Name and Title Lynne Marcus, Vice President, Membership & Public Affairs

Registrant Name Am. College Chest Physicians Client Name Same

**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 MMM (one per page)

16. Specific lobbying issues

- HOPA Final Rule for RBRVS CY2001
- Documentation: Guidelines development
- Critical Care medicine reimbursement guidelines
- National Coverage decisions on Hyperbaric Oxygen treatments
- Pulmonary Rehabilitation coverage decisions

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

U.S. Dept of Health & Human Services - Health Care Financing Administration  
US Senate  
US House

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

Name	Covered Official Position (if applicable)	New
LYNNE MARCUS	N/A	<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 Lynne Marcus Date 2/13/01  
 Printed Name and Title LYNNE MARCUS, VP of MEMBERSHIP & PUBLIC AFFAIRS

Registrant Name American College of Chiropractors Client Name same

**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 TOB (one per page)

16. Specific lobbying issues  
Smoking Cessation Practice Guidelines

17. House(s) of Congress and Federal agencies contacted  Check if None  
US Dep of Health & Human Services, Agency for Health Care Research & Quality

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

Name	Covered Official Position (if applicable)	New
<u>LYNNE MARCUS</u>	<u>N/A</u>	<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 Lynne Marcus Date 2/13/01

Printed Name and Title LYNNE MARCUS, VP MEMBERSHIP & PUBLIC AFFAIRS