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LOBBYING REPORT

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

1. Registrant Name <u>Blue Cross AND Blue Shield of Oklahoma</u>	
2. Address <input type="checkbox"/> Check if different than previously reported <u>1215 S. Boulder, Tulsa, Oklahoma 74119</u>	
3. Principal Place of Business (if different from line 2) <u>3401 N.W. 63rd.</u> City: <u>OKLAHOMA City</u> State/Zip (or Country) <u>OKLAHOMA 73116</u>	
4. Contact Name <u>DICK HOWARD</u>	Telephone <u>405-841-9597</u>
E-mail (optional) <u>bazar@bcbsok.com</u>	5. Senate ID # <u>46073</u>
7. Client Name <input checked="" type="checkbox"/> Self	6. House ID # <u>3436</u>

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July 1-D

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 Lobby

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for descriptive</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA de</p> <p><input type="checkbox"/> Method B. Reporting amounts under section Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Signature Dick Howard

Printed Name and Title DICK HOWARD, Vice President, Public Affairs

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Registrant Name Blue Cross Blue Shield of OK Client Name _____

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.

5. General issue area code BUD (one per page)

6. Specific lobbying issues

Medicare Contractor Funding
Labor HHS Appropriations Bills - Medicare
Contractor Funding only.

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

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

Name	Covered Official Position (if applicable)
<u>Dick Howard</u>	

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

[Handwritten marks]

Signature Dick Howard Date _____

Printed Name and Title Dick Howard, VP Public Affairs

Signature *Dick Howard* Date _____

Printed Name and Title Dick Howard, VP Public Affairs

Registrant Name Blue Cross Blue Shield of OK Client Name _____

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.

5. General issue area code LBR (one per page)

6. Specific lobbying issues
Antitrust, physician collective bargaining, no bill.

7. House(s) of Congress and Federal agencies contacted Check if None
House, Senate, White House

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

Name	Covered Official Position (if applicable)
<u>Dick Howard</u>	

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

[Handwritten marks]

Signature: Dick Howard Date: _____

Printed Name and Title: Dick Howard, VP Public Affairs

Registrant Name Blue Cross Blue Shield of OK Client Name _____

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.

5. General issue area code MMH (one per page)

6. Specific lobbying issues

"Medicare Reform Act"/S 1135 (Graham) entire bill.
"Medicare Appeals, Regulatory, and Contracting Improvement Act" (Kerry) entire bill.
"Medicare Regulatory and Contracting Reform Act"/H.R. 3391 (Johnston) Medicare Reform, Medigap reform, Medicare + Choice, Medicare Reform, Medicare Contractor Liability, Medicare Prescription Benefit, "Medicare Prescription Drug Benefit Act" (S 2729) "Modernization and Prescription Drug Benefit Act" (HR 4954) Medicare Secondary Payer

17. House(s) of Congress and Federal agencies contacted Check if None
House, Senate, HHS, CMS, CBO, DOJ, White House

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

Name	Covered Official Position (if applicable)
<u>Dick Howard</u>	

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

[Handwritten scribbles]

Signature *Dick Howard* Date _____

Printed Name and Title Dick Howard, VP Public Affairs

Signature Dick Howard Date _____

Printed Name and Title Dick Howard, VP Public Affairs

Registrant Name Blue Cross Blue Shield of Oklahoma Client Name _____

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

20. Client new address 1409 Brixton Rd.
Edmond, OK 73034

21. Client new principal place of business (if different from line 20)

City NA State/Zip (or Country) _____

22. New general description of client's business or activities

RETIRED FROM BCBSOK ON JAN. 3, 2003

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

Dick Howard

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

Blue Cross AND Blue Shield of Oklahoma

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant or affiliated organization

Signature

L. Dick Howard

Date

12/12/10

Printed Name and Title

L. Dick Howard, VP, Public Affairs.