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SECRETARY OF THE SENATE
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LOBBYING REPORT

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

1. Registrant Name CMS, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 1145 Corporate Lake Drive			
3. Principal Place of Business (if different from line 2) City: St. Louis State/zip (or Country) MO 63132			
4. Contact Name Wendy Smith	Telephone (703) 534-7979	E-mail (optional) wendy.smith@cmsrtp.com	5. Senate ID # 284653-
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # 368970

TYPE OF REPORT 8. Year 2004 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

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 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 checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate exp accounting method. See instructions for description of opt</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitio</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(c) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>
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Signature Wendy Smith Date 7/7/2004

Printed Name and Title Wendy Smith Director of Government Affs

Registrant Name CMS, Inc. 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 and information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Medicare coverage and payment for compensator-based intensity modulated radiation therapy (IMRT)

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

Centers for Medicare and Medicaid Services (CMS)

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

Name	Covered Official Position (if applicable)
Wendy Smith	

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

Signature Wendy Smith Date 7/7/2004

Printed Name and Title Wendy Smith, Director of Government Affairs

Registrant Name CMS, Inc. Client Name _____

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 information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Full funding for the Food and Drug Administration's (FDA) Center for Devices and Radiological Health (CDRH) within the FY05 Agriculture, Rural Development and Related Agencies Appropriations bill.

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

Senate

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

Name	Covered Official Position (if applicable)
Wendy Smith	

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

Signature Wendy Smith Date 7/7/2004

Printed Name and Title Wendy Smith, Director of Government Affairs

Registrant Name CMS, Inc Client Name _____

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 SCI (one per page)

16. Specific lobbying issues

Membership in the Senate Medical Technology Caucus.

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

Senate

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

Name	Covered Official Position (if applicable)
Wendy Smith	

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

Signature Wendy Smith Date 7/7/2004

Printed Name and Title Wendy Smith, Director of Government Affairs

