

## LOBBYING REPORT

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

1. Registrant Name:

**BLUECROSS BLUESHIELD OF TENNESSEE**

2. Address:

85 NORTH DANNY THOMAS BLVD., MEMPHIS, TN 38103

3. Principal place of business (if different from line 2):

4. Contact Name: CALVIN ANDERSON

Telephone: 9015442105

E-mail (optional): calvin\_anderson@bcbst.com

Senate ID #: 6440-12

House ID #:

7. Client Name: ☒ Self

## TYPE OF REPORT

8. Year 2007 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: ☐

## INCOME OR EXPENSES

Complete Either Line 12 **OR** Line 13

### 12. Lobbying Firms

**INCOME** relating to lobbying activities for this reporting period was:

Less than \$10,000: ☐

\$10,000 or more: ☐ => Income (nearest \$20,000): \_\_\_\_\_

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).

### 13. Organizations

**EXPENSES** relating to lobbying activities for this reporting period were:

Less than \$10,000: ☐

\$10,000 or more: ☒ => Expenses (nearest \$20,000): 140,000.00

### 14. Reporting Method.

Check box to indicate expense accounting method. See instructions for description of options.

☒ **Method A.** Reporting amounts using LDA definitions only

☐ **Method B.** Reporting amounts under section 6033(b)(8) of the Internal Revenue Code

☐ **Method C.** Reporting amounts under section 162(e) of the Internal Revenue Code

Registrant Name: BLUECROSS BLUESHIELD OF TENNESSEE Client Name: Self

### 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: BUD (one per page)

16. Specific lobbying issues:

HR. 3043 and S. 1710 HHS Appropriations Act of 2008 Medicare Contractor Funding; Medicare Advantage Funding SCHIP Reauthorization

17. House(s) of Congress and Federal agencies contacted:

HOUSE OF REPRESENTATIVES  
SENATE

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

Name: ANDERSON, CALVIN

Covered Official Position (if applicable): N/A

Name: TRAVERSE, BRAD

Covered Official Position (if applicable): N/A

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

Registrant Name: BLUECROSS BLUESHIELD OF TENNESSEE Client Name: Self

### 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: HCR (one per page)

16. Specific lobbying issues:

Insurance Market Reform S. 1019, S. 334, and HR. 3163 Mental Health Parity HR. 1424 and S. 558 Community Pharmacy Fairness Act of 2007 HR. 971 and S. 2161 HIT: Standards, ICD-10 Implementation HR. 1368 Wired for Health Care Act S. 1783 and S. 1693

17. House(s) of Congress and Federal agencies contacted:

Centers For Medicare and Medicaid Services (CMS)

HOUSE OF REPRESENTATIVES

Health & Human Services, Dept of (HHS)

SENATE

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

Name: ANDERSON, CALVIN

Covered Official Position (if applicable): N/A

Name: TRAVERSE, BRAD

Covered Official Position (if applicable): N/A

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

Registrant Name: BLUECROSS BLUESHIELD OF TENNESSEE Client Name: Self

### 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:

Medicare Advantage S. 3900 Comparative Effectiveness

17. House(s) of Congress and Federal agencies contacted:

HOUSE OF REPRESENTATIVES

SENATE

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

Name: ANDERSON, CALVIN

Covered Official Position (if applicable): N/A

Name: TRAVERSE, BRAD

Covered Official Position (if applicable): N/A

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

Registrant Name: BLUECROSS BLUESHIELD OF TENNESSEE Client Name: Self

### 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: PHA (one per page)

16. Specific lobbying issues:

Community Fairness Pharmacy Act Biologicals S. 623

17. House(s) of Congress and Federal agencies contacted: **None**

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

Name: ANDERSON, CALVIN

Covered Official Position (if applicable): N/A

Name: TRAVERSE, BRAD

Covered Official Position (if applicable): N/A

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

Signature: ON FILE Date: Feb 13, 2008

Printed Name and Title: CALVIN ANDERSON, VICE PRESIDEN -