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LOBBYING REPORT

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

1. Registrant Name Michigan Health & Hospital Association			
2. Address <input type="checkbox"/> Check if different than previously reported 6245 West St. Joseph Highway			
3. Principal Place of Business (if different from line 2) City: Lansing State/Zip (or Country) MI 48917			
4. Contact Name Brian Peters	Telephone (517) 703-8609	E-mail (optional)	5. Senate ID # 25168-12
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # 31300000

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

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"/> → \$ _____ <small>Income (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>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"/> → \$ _____ <small>Expenses (nearest \$20,000)</small></p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input 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 _____

Printed Name and Title Brian Peters, Group Vice President, Advocacy

LD-2 (REV. 6/98)

PAGE 1 of 5

Michigan Health & Hospital Association Self
Registrant Name _____ 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.

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

16. Specific lobbying issues

S 2626 & HR 4666-Improving Access to tax-exempt financing for non-profit health care and educational facilities

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

U.S. House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)	New
		<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 Brian Peters Date 1-21-01

Printed Name and Title Brian Peters, Group Vice President, Advocacy

Michigan Health & Hospital Association 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 UNM (one per page)

16. Specific lobbying issues

Unemployment Compensation-Federally-mandated unemployment benefit expansion (Part time employees reform initiative)

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

U.S. House of Representatives

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

Table with 3 columns: Name, Covered Official Position (if applicable), New. Multiple empty rows with checkboxes in the 'New' column.

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

Signature [Signature] Date 1-21-01
Printed Name and Title Brian Peters, Group Vice President, Advocacy

Michigan Health &
Registrant Name Hospital Association 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

HR 2614-Balanced Budget Relief Legislation
42CFR 447.272 & 42CFR 447.321-Upper Payment Limit Regulations
HR 3508 & S2018-Medicare Inpatient PPS Payment (12-year inflation adjustment)
Health Care Provider Bill of Rights & Access Assurance Act


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

U.S. House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)	New
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
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		<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  Date 1-21-01

Printed Name and Title Brian Peters, Group Vice President, Advocacy

Michigan Health &
Registrant Name Hospital Association 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

National Health Service Corp (A program that brings health providers to urban and rural areas)

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

U.S. Senate

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

Name	Covered Official Position (if applicable)	New
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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