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## LOBBYING REPORT

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

1. Registrant Name <b>McGuireWoods, LLP- McGuireWoods Consulting LLC</b>			
2. Address <input type="checkbox"/> Check here if different than previously reported <b>1050 Connecticut Avenue, N.W., Suite 1200, Washington, D.C. 20036</b>			
3. Principal place of business (if different from line 3) City <b>Richmond</b> State/Zip (or Country) <b>VA 23219</b>			
4. Contact Name <b>Stephen A. Katsurinis</b>		Telephone <b>202-857-2912</b>	5. Senate ID# <b>24486-63</b>
7. Client Name <input type="checkbox"/> Self <b>Trigon Healthcare, Inc., Blue Cross Blue Shield</b>		6. House ID# <b>33788005</b>	

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

#### 12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000 ☐

\$10,000 or more ☒ ⇨ \$ 120,000  
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)

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(c) of the Internal Revenue Code

Signature *Stephen A. Katsurinis*

Printed Name and Title Stephen A. Katsurinis, Vice President

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Registrant Name McGuireWoods

Client Name Trigon Healthcare, Inc.  
Blue Cross Blue Shield

**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 HEA (one per page)

16. Specific lobbying issues

Various healthcare issues, including patients bill of rights

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

House of Representatives  
Senate

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

Name	Covered Official Position (if applicable)	New
L.F. Payne		<input type="checkbox"/>
Stephen A. Katsurinis		<input type="checkbox"/>
Joseph Bogosian		<input type="checkbox"/>
Hana Brilliant		<input checked="" type="checkbox"/>
		<input type="checkbox"/>

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

Signature Stephen A. Katsurinis Date 02/14/2001

Printed Name and Title Stephen A. Katsurinis, Vice President

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Registrant Name McGuireWoods

Client Name Trigon HealthCare, Inc.  
Blue Cross Blue Shield

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

20. Client new address

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

City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

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

**LOBBYIST UPDATE**

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

**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)
Blue Cross Blue Shield	1310 G Street, N.W.	Washington, D.C. 20005

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

**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	Ownership percentage in client

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

Signature Stephen A. Katsurinis Date 2/14/2001

Printed Name and Title Stephen A. Katsurinis, Vice President