

Clear all d

Go to 1

SECRETAR

05 MAR.

Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515	Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510
---	--

**LOBBYING REPORT**

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

1. Registrant name				
Organization	Health Policy Source, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported				
16625 Dove Canyon Road, Ste 102-412				
City	San Diego	State	CA	Zip Code 92127
				Country US
3. Principal place of business (if different than line 2)				
City	Washington	State	DC	Zip Code 20004
				Country US
4a. Contact Name		b. Telephone number	c. E-mail	5. Senate ID #
Prefix	Full Name			
Ms.	Monica Tencate	202-388-6600	mtencate@healthpolicysource.co	74135-23
7. Client Name <input type="checkbox"/> Self				6. House ID #
American Society for Anesthesiologists				3605201

**TYPE OF REPORT** 8. Year 2004 Midyear (January 1-June 30)  OR Year End (July 1-December)
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 Acti**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was:	<b>EXPENSES</b> relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>60,000</u>	\$10,000 or more <input type="checkbox"/> ⇒ \$ <u>        </u>
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).	<b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options.
	<input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions of
	<input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(8) Internal Revenue Code
	<input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of Internal Revenue Code

Form Co

Printed Name and Title Monica Tencate, President

*M. Toucate 2/6/05*

Registrant Name Health Policy Source, Inc. Client Name American Society for Anesthesiologi

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

15. General issue area code MMM - Medicare/Medicaid (one per page)

16. Specific lobbying issues

Regulatory and legislative activities on Medicare physician payment issues, including the sustainable growth rate and payments to academic teaching institutions

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

Centers for Medicare & Medicaid Services  
U.S. Department of Health and Human Services  
U.S. House  
U.S. Senate

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Monica	Tencate		
Dan	Boston		
Jill	Canino		

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

Printed Name and Title Monica Tencate, President

LD-2DS (REV/03)

*M. Tencate 2/11/05*

Page 2