



**BlueCross BlueShield
of Tennessee**
An Independent Licensee of the
BlueCross BlueShield Association

85 North Danny Thomas Blvd,
Memphis, TN 38103-2398
(901) 544-2105
Fax: (901) 544-2565
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SECRETARY OF THE SENATE

Calvin Anderson
Vice President
Corporate Affairs

00 AUG 10 AM 11:31

August 8, 2000

Secretary of the State
United States Senate
Suite 232, Hart Building
Washington, DC 20515

RE: Mid Year Lobbying Report

Dear Mr. Secretary:

Please find enclosed BlueCross and BlueShield of Tennessee's Mid-Year, 2000 lobbying report which includes a completed LD-2 report for the period January 1, 2000 to June 30, 2000.

Please accept this filing as our mid-year report.

Sincerely,


Calvin Anderson

CA/ybg

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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 <input type="checkbox"/> Check if different than previously reported 85 North Danny Thomas Blvd.			
3. Principal Place of Business (if different from line 2) City: Memphis State/Zip (or Country) Tennessee 38103 (Shelby)			
4. Contact Name Calvin Anderson	Telephone (901) 544-2105	E-mail (optional) Calvin_Anderson@BCBST.com	5. Senate ID # 6440-12
7. Client Name <input checked="" type="checkbox"/> Self	6. House ID # 33435000		

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 Calvin Anderson

Printed Name and Title Calvin Anderson, Vice President, Corporate Affairs

Registrant Name BlueCross BlueShield of TN Client Name Calvin Anderson

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

Patients Bill of Rights HR 2990 S. 1344
Managed Care Reform - various issues
Privacy/Confidentiality HR 4585 (Leach)
Anti Trust HR 1304 S. 2107 (Gramm)

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

House
Senate
HCFA/HHS

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

Name	Covered Official Position (if applicable)	Yes
Calvin Anderson	Vice President	<input type="checkbox"/>
Ron Harr	Vice President	<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 Calvin Anderson Date August 8, 2008

Printed Name and Title Calvin Anderson, Vice President, Corporate Affairs

Registrant Name BlueCross BlueShield of TN Client Name Calvin Anderson

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

Medicare Contractor Funding HR 4577 S. 2553

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

House
Senate
HCFA/HHS

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

Name	Covered Official Position (if applicable)	Yes
Calvin Anderson	Vice President	<input type="checkbox"/>
Ron Harr	Vice President	<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 Calvin Anderson Date August 8, 2000

Printed Name and Title Calvin Anderson, Vice President Corporate Affairs

Registrant Name BlueCross BlueShield of TN Client Name Calvin Anderson

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 HR 4680
Prescription Drug S1895 and S. 2342
Medicare+Choice HR 406

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

House
Senate
HCFE/HHS

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

Name	Covered Official Position (if applicable)	New
Calvin Anderson	Vice President	<input type="checkbox"/>
Ron Harr	Vice President	<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 Calvin Anderson Date August 8, 2000

Printed Name and Title Calvin Anderson, Vice President, Corporate Affairs

Registrant Name BlueCross BlueShield of TN Client Name Calvin Anderson

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

20. Client new address

No Change

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)
No		

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
None				

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 Calvin Anderson Date August 8, 2000

Printed Name and Title Calvin Anderson, Vice President, Corporate Affairs