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LOBBYING REPORT

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

1. Registrant Name <u>Health Policy Strategies</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>888 17th Street, NW Suite 800</u>			
3. Principal Place of Business (if different from line 2) City: <u>Washington</u> State/Zip (or Country) <u>DC 20006</u>			
4. Contact Name <u>Ann Langley</u>	Telephone <u>(202)452-8290</u>	E-mail (optional) <u>al@hps1.com</u>	5. Senate ID # <u>45686-12</u>
7. Client Name <input type="checkbox"/> Self <u>National Association of Children's Hospitals</u>			6. House ID # <u>45686-12</u>

TYPE OF REPORT 8. Year 2002 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 **INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES 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>40,000</u> Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (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).	14. REPORTING METHOD. Check box to indicate reporting accounting method. See instructions for description of each method.
	<input type="checkbox"/> Method A. Reporting amounts using LDA definitive accounting method.
	<input type="checkbox"/> Method B. Reporting amounts under section 6033(c) Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature _____

Printed Name and Title _____

Ann Langley, President

Registrant Name Health Policy Strategies Client Name National Association of Children's Hospite

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the regi engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, p information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Appropriations for Labor, Health & Human Services and Education for Graduate Medical Education for Children's Hospitals (S 2766)

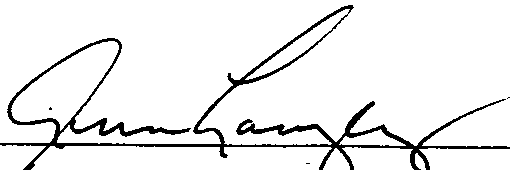
17. House(s) of Congress and Federal agencies contacted Check if None

U.S. Senate
U.S. House of Representatives
DHHS - Office of the Secretary, HRSA

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

Name	Covered Official Position (if applicable)
<u>Ann Langley</u>	<u>President</u>
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature  Date 8/02/02
Printed Name and Title Ann Langley, President

Registrant Name Health Policy Strategies Client Name National Association of Children's Hospitals

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

Children's Health Coverage		S 1016
Bioterrorism	HR 3448	S1765
Family Opportunity Act - Medicaid buy-in for		S2274
FAMILIES OF DISABLED Children	HR 4825	
Medicaid DSH Funding	HR 854	S 572

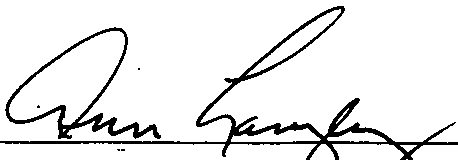
17. House(s) of Congress and Federal agencies contacted Check if None

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

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Name	Covered Official Position (if applicable)
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Printed Name and Title Ann Langley, President

