

Clerk of the House of Representatives  
Legislative Resource Center  
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Washington, DC 20515

Secretary of the Senate  
Office of Public Records  
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Washington, DC 20510

SECRETARY OF THE SENATE  
03 FEB 11 11

## LOBBYING REPORT

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

|  |  |                             |   |
|--|--|-----------------------------|---|
| 1. Registrant Name<br>Medical Present Value, Inc.  |  |                             |   |
| 2. Address <input type="checkbox"/> Check if different than previously reported<br>100 Loop 410, Suite 800     |  |                             |   |
| 3. Principal Place of Business (if different from line 2)<br>City: San Antonio State/Zip (or Country) TX 78216 |  |                             |   |
| 4. Contact Name<br>Mark J. Segal   |  | Telephone<br>(708) 386-4693 | E-mail (optional)<br>msegal@mpv.com             |
| 7. Client Name <input type="checkbox"/> Self   |  |                             | 5. Senate ID #<br>5765<br>6. House ID #<br>3524 |

TYPE OF REPORT 8. Year 2002 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

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

|  |  |
|--|--|
| <p><b>12. Lobbying Firms</b></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"/> ⇨ \$ _____<br/>Income (nearest \$20,000)</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><b>13. Organizations</b></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"/> ⇨ \$ _____<br/>Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p> |
|--|--|



Registrant Name Medical Present Value, Inc. Client Name \_\_\_\_\_

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant is 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

Medicare and FEHBP provider reimbursement issues

17. House(s) of Congress and Federal agencies contacted

Check if None

Centers for Medicare and Medicaid Services

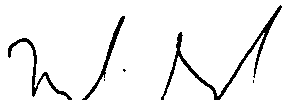
18. Name of each individual who acted as a lobbyist in this issue area

| Name                 | Covered Official Position (if applicable) |
|----------------------|---|
| Mark J. Segal        |   |
| James M.O. Rubin, MD |   |
| David Q. Bates, Jr.  |   |
|                      |   |
|                      |   |
|                      |   |
|                      |   |
|                      |   |
|                      |   |
|                      |   |

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature



Date 1/31/2003

Signature \_\_\_\_\_

Printed Name and Title Mark J. Segal, Vice President, Business Development

Form LD-2 (Rev. 6/98)

Page

Registrant Name Medical Present Value, Inc. Client Name \_\_\_\_\_

**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

David Q. Bates, Jr.

**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<br>(city and state or country) |
|------|---------|--|
|      |         |  |

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<br>(city and state or country) | Amount of contribution<br>for lobbying activities |
|------|---------|--|---|
|      |         |  |   |

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

