

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
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SECRETARY OF THE SENATE
05 MAR -1 PM 3:10

LOBBYING REPORT

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

1. Registrant Name			
Independence Blue Cross Family of Companies			
2. Address <input type="checkbox"/> Check if different than previously reported			
1901 Market Street, 38th Floor			
3. Principal Place of Business (if different from line 2)			
City:	Philadelphia	State/Zip (or Country)	PA 19103
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID
Lorina Marshall-Blake	(215) 241-2435	lorina.marshall@ibx.com	19172-1
7. Client Name	<input checked="" type="checkbox"/> Self		6. House ID:
			330090

TYPE OF REPORT 8. Year 2004 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 Lobby

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"/> ⇒ \$ _____ 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>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description:</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 170(e)(2)(B) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 170(e)(2)(C) Internal Revenue Code</p>
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Signature  _____

Printed Name and Title Lorina Marshall-Blake, Vice President of Government Relation

LD-2 (REV. 6/98)

Registrant Name _____ Client Name S A M E

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 cot information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

MANAGED CARE, ANTI TRUST
MEDICARE
ASSOCIATED HEALTH PLANS
MEDICAL MALPRACTICE
HEALTH SAVINGS ACCOUNT

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


U.S. HOUSE OF REPRESENTATIVES

U.S. SENATE

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

Name	Covered Official Position (if applicable)
.....Lorina Marshall-Blake.....	
.....	
.....	
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.....	
.....	
.....	
.....	
.....	
.....	

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

Signature  Date 2/14/15

Printed Name and Title Lorina Marshall-Blake, Vice President of Government Relations

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Registrant Name Independence Blue Cross Client Name S A M E
Family of Companies

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 B (city and state or c

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

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



Signature  Date February 14, 2

Printed Name and Title Lorina Marshall-Blake, Vice President of Government Relations

Form LD-2 (Rev. 6/98)

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