

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

SECRETARY OF THE SENATE

02 FEB 14 PM 5:37

LOBBYING REPORT

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

| | |
|--|---|
| 1. Registrant Name FH/GPC | |
| 2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 601 13th Street, N.W. Suite 410 South City Washington State/Zip (or Country) DC 20005 | |
| 3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____ | |
| 4. Contact Name Stephen Cooper | Telephone 202-737-0100 E-mail (optional) _____ |
| 5. Senate ID # _____ | |
| 7. Client Name <input type="checkbox"/> Self Health Insurance Association of America | 6. House ID # _____ |

TYPE OF REPORT 8. Year 2001 Midyear (January 1-June 30) OR Year End (July 1-De

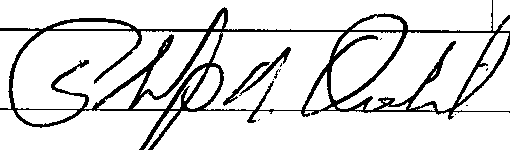
9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report >> Termination Date _____ 11. No Lobby

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

| 12. Lobbying Firms | 13. Organizations |
|---|--|
| INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> >> \$ <u>\$75,000.00</u> Income (nearest \$20,000) | EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$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 accounting method. See instructions for description of <input type="checkbox"/> Method A. Reporting amounts using LDA definit <input type="checkbox"/> Method B. Reporting amounts under section 6035 the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code |

Signature _____



Date 2/11/2002



Registrant Name: FH/GPC

Client Name: Health Insurance Association of America

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
Patient Bill of Rights
Physician Anti-Trust Exemptions
Medicare Prescription Drug Benefits

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

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

| Name | Covered Official Position (if applicable) |
|------------------------|---|
| Cooper, Stephen | |
| Jacob, Amy | |
| | |
| | |
| | |
| | |
| | |
| | |

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

Signature _____ Date 2/11/2002

