

Office 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

RECEIVED.  
SECRETARY OF THE SENATE

04 AUG 25 PM 3:21

## LOBBYING REPORT

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

1. Registrant name <b>Barnes &amp; Thornburg LLP</b>			
2. Address <input checked="" type="checkbox"/> Check if different than previously reported <b>750 17<sup>th</sup> Street N.W., Washington, D.C. 20006-4067</b>			
3. Principal Place of Business (if different from line 2) <b>11 South Meridian Street</b> City <b>Indianapolis</b> State/Zip (or Country) <b>Indiana 46204</b>			
4. Contact Name <b>Bonnie J. Lewis</b>	Telephone <b>317-231-7506</b>	E-mail (optional) <b>bonnie.lewis@btlaw.com</b>	5. Senate ID <b>5404-48</b>
7. Client Name <input type="checkbox"/> Self <b>Baker Healthcare Consulting, Inc.</b>			6. House ID # <b>30212003</b>

**TYPE OF REPORT** 8. Year 2004 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 A

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

12. Lobbying Firms	13. Organizations
<p><b>INCOME</b> relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" 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><b>EXPENSES</b> relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate exp accounting method. See instructions for description of opti</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(1) Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of Internal Revenue Code</p>

Signature \_\_\_\_\_

Printed Name and Title \_\_\_\_\_



Registrant Name Barnes & Thornburg LLP Client Name Baker Healthcare Consulting, Inc.

**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 and provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

**Government relations representation concerning Medicare geographic reclassification.**

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)
<b>Robert T. Grand</b>	n/a
<b>J. Michael Grubbs</b>	n/a

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_



Registrant Name Barnes & Thornburg LLP Client Name Baker Healthcare Consulting, Inc.

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

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

16. Specific lobbying issues

**Government relations representation concerning Medicare geographic reclassification.**

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)
Robert T. Grand	n/a
J. Michael Grubbs	n/a

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_



Registrant Name Barnes & Thornburg LLP Client Name Baker Healthcare Consulting, Inc.

**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 code** information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

**Government relations representation concerning Medicare geographic reclassification.**

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)
<b>Robert T. Grand</b>	n/a
<b>J. Michael Grubbs</b>	n/a

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_



Registrant Name Barnes & Thornburg LLP Client Name Baker Healthcare Consulting, Inc.

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

20. Client new address **n/a**

21. Client new principal place of business (if different from line 20) **n/a**  
 City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

22. New general description of client's business or activities **n/a**

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client: **n/a**  
**n/a**

**ISSUE UPDATE** **n/a**

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 county)
Saint Margaret Mercy Healthcare Centers (North Campus-Hammond and South Campus-Dyer)	5454 Holman Avenue Hammond, Indiana 46320	Hammond, Indiana
St. Catherine Hospital	4321 Fir Street East Chicago, Indiana 46312	East Chicago, Indiana
St. Anthony Medical Center	1201 South Main Street Crown Point, Indiana 46307	Crown Point, Indiana
St. Mary Medical Center	1500 South Lake Park Avenue Hobart, Indiana 46342	Hobart, Indiana
Community Hospital	901 MacArthur Boulevard Munster, Indiana 46321	Munster, Indiana
The Methodist Hospitals (North Lake Campus-Gary and South Lake Campus-Merrillville)	600 Grant Street Gary, Indiana 46402	Gary, Indiana

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client **n/a**

**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 registrant, client organization

Signature  Date 8/2/04

Printed Name and Title D. William Moreau, Jr., Partner

U