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| 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 FEB 14 PM 12:52

LOBBYING REPORT

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

| | | | |
|---|-----------------------------------|---------------------|-------------------|
| 1. Registrant name | | | |
| Organization | HC Associates, Inc. | | |
| 2. Address <input type="checkbox"/> Check if different than previously reported | | | |
| Address 1 | 1100 15th Street, N.W., Suite 900 | | |
| City | Washington | State | DC |
| | | Zip Code | 20005 |
| | | | Country US |
| 3. Principal place of business (if different than line 2) | | | |
| City | | State | |
| | | Zip Code | |
| | | | Country |
| 4a. Contact Name | | b. Telephone number | c. E-mail |
| Prefix | Full Name | | |
| Mr. | Howard Cohen | (202) 441-0161 | hcohen@hjclaw.com |
| 7. Client Name <input type="checkbox"/> Self | | | 5. Senate ID # |
| Oxford Health Plan, Inc. | | | 65497-1 |
| | | | 6. House ID # |
| | | | 355980 |

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 Lobbying Act

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

| | |
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| <p align="center">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 checked="" type="checkbox"/> ⇨ \$ <u>60,000</u></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 align="center">13. Organizations</p> <p>EXPENSES 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"/> ⇨ \$ _____</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of reporting method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p> |
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Form

Printed Name and Title Howard Cohen - President

Howard Cohen 2/14/2005

Registrant Name HC Associates, Inc. Client Name Oxford Health Plan, 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 MMM - Medicare/Medicaid (one per page)

16. Specific lobbying issues *Add page to continue specific issues description for this issue* >

P.L. 108-173: Medicare Prescription Drug, Improvement, and Modernization Act of 2003

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

House of Representatives
Senate
Executive Branch
Department of Health and Human Services

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists for*

| First Name | Name Last Name | Suffix | Covered Official Position (if applicable) |
|------------|-------------------|--------|---|
| Howard | Cohen | Mr. | |
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Registrant Name HC Associates, Inc. Client Name Oxford Health Plan, 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 - Health Issues (one per page)

16. Specific lobbying issues *Add page to continue specific issues description for this issue*

P.L. 108-173: Medicare Prescription Drug, Improvement, and Modernization Act of 2003.

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

House of Representatives
Senate
Executive Branch
Department of Health and Human Services

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists for*

| First Name | Name Last Name | Suffix | Covered Official Position (if applicable) |
|------------|-------------------|--------|---|
| Howard | Cohen | Mr. | |
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Add a page for e di

Registrant Name HC Associates, Inc. Client Name Oxford Health Plan, Inc.

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

20 Client new address

Address

City State Zip Code Country

21. Client new principal place of business (if different than line 20)

City State Zip Code Country

22. New general description of clients 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**

First Name Last Name Suffix First Name Last Name
1 3
2 4

ISSUE UPDATE

Find the code to select below.

24 General lobbying issues that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Table with 3 columns: Name, Address, Principal place of business (city and state or country). Includes sub-headers for City, State, Country, and C/S/Z.

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

1 2 3

FOREIGN ENTITIES

27. Add the following foreign entities

Table with 4 columns: Name, Address (Street Address, City, State/Province, Country), Principal place of business (city and state or country), Amount of contribution for lobbying activities. Includes sub-headers for City, State, Country.

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

1 3 5
2 4 6

Add a page for more

Printed Name and Title Howard Cohen - President

Howard Cohen

11/4/2005