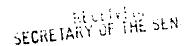
Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515 Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510



05 AUG 15 AM 10: 56

## LOBBYING REPORT

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

1. Registrant Name  Group Health, Inc.			
2. Registrant Address	fferent than previously reported State/Zip (or Country)	8th Floor NY 10001 USA	
3. Principal Place of Business (if differen	t from line 2)		
City	State/Zip (or Country)		
4. Contact Name  Jeffrey L. Goodwin	•	nail (optional) oodwin@ghi.com	5. Senate ID # 40522-428
7. Client Name 🔀 Self			6. House ID # 32807048
			11. No Lobbyi
10. Check if this is a Termination I	Report   >> Terminate  SES - Complete Eith	er Line 12 <b>OR</b> Line 13	
10. Check if this is a Termination I	Report   >> Terminate SES - Complete Eith Firms	er Line 12 <b>OR</b> Line 13	ganizations
10. Check if this is a Termination I  INCOME OR EXPENT  12. Lobbying INCOME relating to lobbying ac	Report   >> Terminate SES - Complete Eith Firms	er Line 12 <b>OR</b> Line 13  13. Or  EXPENSES relating to lobbyi	_
10. Check if this is a Termination Income or Expension Income or Expension Income relating to lobbying ac period was:	Report   >> Terminate SES - Complete Eith Firms tivities for this reporting	er Line 12 OR Line 13  13. Or  EXPENSES relating to lobbyi period were:	ganizations  ng activities for this repo
INCOME OR EXPENSIONAL INCOME relating to lobbying ac period was:  Less than \$10,000   \$10,000 or more   Provide a good faith estimate, rous \$20,000 of all lobbying related in	Report   >> Terminate  SES - Complete Eith  Firms  tivities for this reporting  Income (nearest \$20,000)  anded to the nearest come from the client	er Line 12 OR Line 13  13. Or  EXPENSES relating to lobbyi period were:  Less than \$10,000  \$10,000 or more  \$14. REPORTING METHOD accounting method. See instructions in the second sec	rganizations  ng activities for this repo  Expenses (nearest \$20  Check box to indicate ctions for description of
INCOME OR EXPENSIONAL INCOME relating to lobbying ac period was:  Less than \$10,000   \$10,000 or more >> \$	SES - Complete Eith  Firms  tivities for this reporting  Income (nearest \$20,000)  Inded to the nearest come from the client istrant by any other entity	er Line 12 OR Line 13  13. Or  EXPENSES relating to lobbyi period were:  Less than \$10,000  \$10,000 or more  \$14. REPORTING METHOD accounting method. See instructions in the second sec	Expenses (nearest \$20  O. Check box to indicate ctions for description of ounts using LDA definition ounts under section 6033

Simon / LUMA	ey yoodwin	Date 8/3/2005	
Signature 7	<del>/                                    </del>		
Printed Name and Title	Jeffrey L. Goodwin - Director, Government Relations		Pag

## 00000350979

gl	strant Name:	Group Health, Inc.	
	nt Name:	Group Health, Inc.	
enga	iged in lobbyir	FIVITY. Select as many codes as necessary ng on behalf of the client during the reportiquested. Attach additional page(s) as needed	to reflect the general issue areas in which the registrant ng period. Using a separate page for each code, provide.
15.	General issue	e area code HCR (one per page)	
16.	Misc. insura: Misc. health	bying issues ince issues a care legislation issues 106; Small Business Health Fairness Act;	AHP legislation
17.		Congress and Federal agencies contacted epresentatives	☐ Check if None
18.	Name of eac	ch individual who acted as a lobbyist in this	issue area
	Name		Covered Official Position (if applicable)
	Branchini, l	Frank	
-	Goodwin, Jo	effrey L.	
	Margolin, I	llene	
		·	
			İ
19.	Interest of e	each foreign entity in the specific issues list	ed on line 16 above   Check if None

Signature		Date .	8/3/2005	
Printed Name and Title	Jeffrey L. Goodwin - Director, Government Relations	<del></del>		Pag

## 00000350980

ત્રી	strant Name:	Group Health, Inc.				
Clie	nt Name:	Group Health, Inc.				
enga	ged in lobbyin	IVITY. Select as many codes as necessary on behalf of the client during the reportinested. Attach additional page(s) as needed	to reflect the general issue areas in which the registrant ng period. Using a separate page for each code, provide i.			
15.	General issue					
16.	Specific Lobb Health insura	oying issues ance, health care costs, HR 525 & S.406,	Small Business Health Fairness Act; AHP legislation,			
17.		Congress and Federal agencies contacted presentatives	☐ Check if None			
1 Q	Name of each	n individual who acted as a lobbyist in this	issue area			
10.	Name	, 114.	Covered Official Position (if applicable)			
	Branchini, F	rank				
	Goodwin, Je					
	Margolin, Il	ene				
		·				
19.	Intonost of	ach foreign entity in the specific issues liste	ed on line 16 above 🛛 Check if None			

Signature		Date .	8/3/2005	
Printed Name and Title	Jeffrey L. Goodwin - Director, Government Relations	<del> </del>		_ Pag

## 00000350981

ન્દ્રાક	trant Name:	Group Health, Inc.	
Clien	t Name:	Group Health, Inc.	
engag	ged in lobbyir	IVITY. Select as many g on behalf of the client pested. Attach additional	codes as necessary to reflect the general issue areas in which the registrant during the reporting period. Using a separate page for each code, provide page(s) as needed.
		area code TAX	(one per page)
16.	Specific Lobb  AMT as it ap	oying issues  oplies to not-for-profit l	health plans
		·	
17.		Congress and Federal age presentatives	encies contacted   Check if None
18.	Name of eac	ı individual who acted a	s a lobbyist in this issue area
	Name		Covered Official Position (if applicable)
	Branchini, I	Frank	
	Goodwin, Jo	effrey L.	
	Margolin, Il	ene	
			•
19.	Interest of ea	ach foreign entity in the	specific issues listed on line 16 above   Check if None

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Signature		Date 8/3/2005	
Printed Name and Title	Jeffrey L. Goodwin - Director, Government Relations		Pag