

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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# LOBBYING REPORT

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

1. Registrant Name		J. Michael Hudson		The Health Policy Group	
2. Address		<input type="checkbox"/> Check if different than previously reported			
438 New Jersey Ave. S.E.		Suite B			
3. Principal Place of Business (if different from line 2)					
City: Washington, D.C.		State/Zip (or Country)		2003	
4. Contact Name		Telephone		E-mail (optional)	
J. Michael Hudson		202-547-0780			
7. Client Name		<input type="checkbox"/> Self			
Valley Baptist Medical Center		5. Senate ID #		6. House ID #	
				32710007	

**TYPE OF REPORT** 8. Year 2002 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

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

### 12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000

\$10,000 or more  ⇒ \$ 60,000.00  
Income (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).

### 13. Organizations

EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000

\$10,000 or more  ⇒ \$ \_\_\_\_\_  
Expenses (nearest \$20,000)

14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of

Method A. Reporting amounts using LDA definition

Method B. Reporting amounts under section 6033(b) Internal Revenue Code

Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature \_\_\_\_\_

Printed Name and Title

J. Michael Hudson



Registrant Name J. Michael Hudson Client Name Valley Baptist Medical Center

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

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

16. Specific lobbying issues

Technical issues regarding Medicare and Medicaid

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

Centers for Medicare and Medicaid Services

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

Name	Covered Official Position (if applicable)
J. Michael Hudson	
Manda Wong	

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

*Manda Wong*

Signature



Date



Printed Name and Title

J. Michael Hudson

Senior Partner