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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 <input type="checkbox"/> Check if different than previously reported Address 441 9th Avenue 8th Floor City New York State/Zip (or Country) NY 10001 USA			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Jeffrey L. Goodwin			5. Senate ID # 40522-428
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # 32807048

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-Dec

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
<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 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>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> >> \$ _____ Expenses (nearest \$2</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definit</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603 the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>

Signature Jeffrey L. Goodwin Date 2/10/2004

Printed Name and Title Jeffrey L. Goodwin - Pa

Registrant Name: Group Health, Inc.

Client Name: Group Health, Inc.

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 HCR (one per page)

16. Specific Lobbying issues
HR 1, HR 660, S. 486, mental health parity legislation,
Misc. Insurance issues
Misc. Medicare legislation issues

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

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

Name	Covered Official Position (if applicable)
Branchini, Frank	
Goodwin, Jeffrey L.	
Margolin, Ilene	

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

Signature _____ Date 2/10/2004

Printed Name and Title Jeffrey L. Goodwin - Page

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Client Name: Group Health, Inc.

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

16. Specific Lobbying issues
Health insurance, health care costs, Mental Health Parity legislation, HR 660 & S.486,

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

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

Name	Covered Official Position (if applicable)
Branchini, Frank	
Goodwin, Jeffrey L.	
Margolin, Ilene	

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

Signature _____ Date 2/10/2004

Printed Name and Title Jeffrey L. Goodwin - _____ Page

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Client Name: Group Health, Inc.

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

16. Specific Lobbying issues
AMT as it applies to not-for-profit health plans

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

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

Name	Covered Official Position (if applicable)
Branchini, Frank	
Goodwin, Jeffrey L.	
Margolin, Ilene	

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

Signature _____ Date 2/10/2004

Printed Name and Title Jeffrey L. Goodwin - Pa