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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration 10/1/21

2. House Identification Number 33755

Senate Identification Number _____

REGISTRANT

3. Registrant name Policy Impact Communications, Inc.

Address 1401 K Street, N.W. Suite 600

City Washington State DC Zip 20005

4. Principal place of business (if different than line 3)

City _____ State _____ Zip _____

5. Telephone number and contact name

202-737-5339 Contact Mr. John Drew Hiatt E-mail info@policyimpact.com

6. General description of registrant's business or activities

Government and Public Relations

CLIENT *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check 1 labeled "Self" and proceed to line 10.* Self

7. Client name Regence BlueCross BlueShield

Address 2890 East Cottonwood Parkway

City Salt Lake City State UT Zip 84121

8. Principal place of business (if different than line 7)

City _____ State _____ Zip _____

9. General description of client's business or activities

Health care insurance provider

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person has served as a "covered executive branch official" or "covered legislative branch official" within two years or a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
William Nixon	
John Drew Hiatt	

0000023191

Registrant Name Policy Impact Communications, Inc.

Client Name Regence BlueCross BlueShield

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1.

HCR

12. Specific lobbying issues (current and anticipated)

Issues related to health care policy and reform.

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans supervises or controls the registrant's lobbying activities?

No ⇒ Go to line 14.

Yes ⇒ Complete the rest of this section for each entity matching criteria above, then proceed to line 14.

Name	Address	Principal place of Business (city and state or country)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13: **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes the client or any organization identified on line 13: **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

No ⇒ Sign and date the registration.

Yes ⇒ Complete the rest of this section for each entity matching the criteria above, then sign and date registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

3000023192

Signature John Drew Hiatt

Credibly signed by John Drew Hiatt
On: 07/14/2007 10:00 AM
Registration No: 0000023192
Expires: 07/14/2008 10:00 AM

Senate Password

Date 2/14/2007

Registrant Name Policy Impact Communications, Inc.

Client Name Regence BlueCross BlueShield

ADDITIONAL LOBBYISTS

10 Supplemental. List any additional lobbyists for this client not listed on page 1, number 10.

Name	Covered Official Position (if applicable)

ADDITIONAL LOBBYING ISSUES

11 Supplemental. General lobbying issue areas. Enter any additional codes for issues not listed on page 2, number 11.

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AFFILIATED ORGANIZATIONS

13 Supplemental. List any other affiliated organization that meets the criteria specified and is not listed on page 2, number 13.

Name	Address	Principal place of Business (city and state or country)

ADDITIONAL FOREIGN ENTITIES

14 Supplemental. List any other foreign entity that meets the criteria specified and is not listed on page 2, number 14.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature Document digitally signed on Page 2.

Date 2/14/2007

Printed Name and Title J. Drew Hiatt, Executive Vice President

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