

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
04 MAR -8 1

LOBBYING REPORT

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

1. Registrant name Barnes & Thornburg			
2. Address <input type="checkbox"/> Check if different than previously reported 11 South Meridian Street, Indianapolis, IN 46204			
3. Principal Place of Business (if different from line 2) n/a			
City		State/Zip (or Country)	
4. Contact Name Bonnie J. Lewis	Telephone 317-231-7506	E-mail (optional) bonnie.lewis@btlaw.com	5. Senate I 5404-48
7. Client Name <input type="checkbox"/> Self Baker Healthcare Consulting, Inc.			6. House ID 30212003

TYPE OF REPORT 8. Year 2003 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	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input checked="" type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (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).	14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of options.
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition:
	<input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature _____

Registrant Name Barnes & Thornburg Client Name Baker Healthcare Consulting, Inc.

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

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

16. Specific lobbying issues

General government relations representation concerning Medicare reimbursement and classification.

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

**U.S. House of Representatives
U.S. Senate
General Accounting Office
Office of Management and Budget (OMB)
Health and Human Services (HHS)**

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

Name	Covered Official Position (if applicable)
Robert T. Grand	n/a
J. Michael Grubbs	n/a

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name Barnes & Thornburg Client Name Baker Healthcare Consulting, Inc.

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

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

16. Specific lobbying issues

General government relations representation concerning Medicare reimbursement and classification.

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

**U.S. House of Representatives
General Accounting Office
Office of Management and Budget (OMB)
Health and Human Services (HHS)**

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

Name	Covered Official Position (if applicable)
Robert T. Grand	n/a
J. Michael Grubbs	n/a

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name Barnes & Thornburg Client Name Baker Healthcare Consulting, Inc.

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

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

16. Specific lobbying issues

General government relations representation concerning Medicare reimbursement and classification.

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

**U.S. House of Representatives
General Accounting Office
Office of Management and Budget (OMB)
Health and Human Services (HHS)**

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

Name	Covered Official Position (if applicable)
Robert T. Grand	n/a
J. Michael Grubbs	n/a

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

Signature _____ Date _____

Printed Name and Title _____

Registrant Name Barnes & Thornburg Client Name Baker Healthcare Consulting, Inc.

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

20. Client new address n/a

21. Client new principal place of business (if different from line 20) n/a
 City _____ State/Zip (or Country) _____

22. New general description of client's business or activities n/a

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client: n/a
n/a

ISSUE UPDATE n/a

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Busir (city and state or count

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

FOREIGN ENTITIES

27. Add the following foreign entities

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

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

Signature  Date 2/8/04

Printed Name and Title D. William Moreau, Jr., Partner

