Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center **B-106** Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510



02 APR 29 PM 2:

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

	is an Amended Registration lentification Number			e Date of Registration	4/1/2002
REGIST	RANT				
3. Registra	nt Name Capitol Health	Group, LLC			
Address	1100 New York	Avenue, NW		Suite 200M	
City	Washington		State DC	Zip 20005-3934	
4. Principa City	place of business (if different f	from line 3)	State/Zip (or Country)	
5. Telephor	ne number and contact name -2255 Layna Peltier	Contact	E-Mail (op Layna@cs	•	, , , , , , , , , , , , , , , , , , ,
	description of registrant's busine regulatory and strategic publ		ıg.		
CLIENT AC GIA 7. Client N	: A lobbying firm is required labeled "Self" and proceed ame American Associates	to line 10. 🗌 Self	lans	ient. Organizations emplöyin	gʻin-house lobbyists sh
Address	1129 20th Stree	t, NW		Suite 600	
City	Washington	·	State DC	Zip 20036	•
8. Principa City	place of business (if different f	from line 7)	State/Zin (or Country)	
9. General	description of client's business cal association of health plans to	or activities		And the second s	
in this se first acti	STS each individual who has acted of ction has served as a "covered eng as a lobbyist for this client, so	executive branch of	ficial" or "covered	l legislative branch officia osition(s) in which the pe	l" within two years or rson served.
Name				Covered Official Positio	n (if applicable)
-		. •		<u> </u>	
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Steve Jo					
Laŷna P	eltier				

Form LD-1 (Rev. 06/98)

و مو	00020170660						
Registrant Name:	Capitol Health Group, LLC American Association of Health Plans						
Client Name:							
LOBBYING 11. General lobb HCR, MM	ying issue areas. Sele	ect all applicable codes liste	ed in instructions and on the	reverse sid	e of Form LD-1, page		
*	oying issues (current a	* '	ledicaid and other federal	health pro	grams.		
13. Is there an er		ient that contributes more t	han \$10,000 to the lobbying ses, or controls the registrant				
ĭ No. Go t	to line 14.						
	Name		Address		Principal Place of E (city and state or c		
FOREIGN E 14. Is there any	ENTITIES foreign entity that:						
b) dire of th c) is an lobb	ctly or indirectly, in one client or any organ affiliate of the clien bying activity?	whole or in major part, plan nization identified on line 1 t or any organization ident	or any organization identifiens, supervises, controls, directly or ified on line 13 and has a directly of the Complete the rest of the criteria above, the sign	ets, finance ect interest his:section	s, or subsidizes activit in the outcome of the for each entity matchi		
Name		Address	Principal Place of E	Business	Amount of contribu		
Signature	Lan	Me		_ Date _	4/17/2002		

Form LD-1 (Rev. 06/98)