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| Clerk of the House of Representatives<br>Legislative Resource Center<br>B-106 Cannon Building<br>Washington, DC 20515 | Secretary of the Senate<br>Office of Public Records<br>232 Hart Building<br>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                                                              |                            |                     |                                |                           |
| Organization                                                                    | Health Policy Source, Inc. |                     |                                |                           |
| 2. Address <input type="checkbox"/> Check if different than previously reported |                            |                     |                                |                           |
| 16625 Dove Canyon Road, Ste 102-412                                             |                            |                     |                                |                           |
| City                                                                            | San Diego                  | State               | CA                             | Zip Code 92127 Country US |
| 3. Principal place of business (if different than line 2)                       |                            |                     |                                |                           |
| City                                                                            | Washington                 | State               | DC                             | Zip Code 20004 Country US |
| 4a. Contact Name                                                                |                            | b. Telephone number | c. E-mail                      | 5. Senate ID #            |
| Prefix                                                                          | Full Name                  |                     |                                |                           |
| Ms.                                                                             | Monica Tencate             | 202-388-6600        | mtencate@healthpolicysource.co | 74135-2E                  |
| 7. Client Name <input type="checkbox"/> Self                                    |                            |                     |                                | 6. House ID #             |
| Acute Long Term Hospital Association                                            |                            |                     |                                | 3605201                   |

**TYPE OF REPORT** 8. Year 2004 Midyear (January 1-June 30)  OR Year End (July 1-December)
9. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report  ⇌ Termination Date 12/31/2004 11. No Lobbying Acti**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
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| <p align="center"><b>12. Lobbying Firms</b></p> <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 checked="" type="checkbox"/> ⇌ \$ <u>20,000</u></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 align="center"><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇌ \$ <u>          </u></p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions of lobbying</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(8) Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of Internal Revenue Code</p> |
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Form C

Printed Name and Title Monica Tencate, President

141-1 UNCAT 2/11/05



Registrant Name Health Policy Source, Inc. Client Name Acute Long Term Hospital Associati

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

15. General issue area code MMM - Medicare/Medicaid (one per page)

16. Specific lobbying issues

Regulatory and legislative activities on Medicare hospital payment issues

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

Centers for Medicare & Medicaid Services  
U.S. Department of Health and Human Services  
U.S. House  
U.S. Senate

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

| First Name | Name<br>Last Name | Suffix | Covered Official Position (if applicable) |
|------------|-------------------|--------|-------------------------------------------|
| Monica     | Tencate           |        |                                           |
| Dan        | Boston            |        |                                           |
| Jill       | Canino            |        |                                           |
|            |                   |        |                                           |
|            |                   |        |                                           |
|            |                   |        |                                           |
|            |                   |        |                                           |
|            |                   |        |                                           |
|            |                   |        |                                           |

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

Printed Name and Title Monica Tencate, President

LD-2DS (REV/03)

*M. Tencate 2/11/05*

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