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## LOBBYING REPORT

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

1. Registrant Name <b>OXFORD HEALTH PLANS, INC.</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>48 MONROE TURNPIKE</b>			
3. Principal Place of Business (if different from line 2) <b>TRUMBULL</b> <b>CONNECTICUT 06611</b> City: State/zip (or Country)			
4. Contact Name <b>TIMOTHY B. MEYER</b>	Telephone <b>(203) 459-7271</b>	E-mail (optional) <b>TMEYER@OXFORDHEALTH.COM</b>	5. Senate ID # <b>30440-12</b>
7. Client Name <input checked="" type="checkbox"/> Self <b>OXFORD HEALTH PLANS, INC.</b>			6. House ID # <b>30440</b>

**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	
<p><b>12. Lobbying Firms</b></p> <p><b>INCOME</b> 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><b>13. Organizations</b></p> <p><b>EXPENSES</b> 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 checked="" type="checkbox"/> ⇨ \$ <u>143,161.54</u> Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition:</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b) Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) Internal Revenue Code</p>

Signature  Date 8-13-03

Printed Name and Title TIMOTHY B. MEYER, VICE PRESIDENT GOVERNMENT RELATIONS

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Registrant Name OXFORD HEALTH PLANS, INC. Client Name OXFORD HEALTH PLANS, INC.

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

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

16. Specific lobbying issues

HHS Privacy Regulations - standards for privacy of individually identifiable health information (65 Federal Register 82476)  
U.S. Department of Labor Erisa Claims Procedure (65 Federal Register 70246)  
HR 1, S 1, HR 660, HR 2596, HR 368, HR 26, HR 5, S 590 and HR 2070


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

Senate, Office of Management & Budget (OMB), House of Representatives, Health & Human Services - Dept of (HHS), White House Office, Labor - Dept of (DOL), Council of Economic Advisers, Centers for Medicare and Medicaid Services (HCFA)

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

Name	Covered Official Position (if applicable)
TIMOTHY B. MEYER	N/A
ALEXANDER SHEKH DAR	N/A

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

Signature 

8-13-03

Printed Name and Title

TIMOTHY B. MEYER, VICE PRESIDENT 8 GOVERNMENT RELATIONS

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