

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 THE  
04 FEB -2 PM '03

## LOBBYING REPORT

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

1. Registrant Name PacifiCare Health Systems, Inc.			
2. Address <input type="checkbox"/> Check if different than previously reported 5995 Plaza Drive, M/S CY20-536			
3. Principal Place of Business (if different from line 2) Cypress CA/ 90630 City: State/zip (or Country)			
4. Contact Name Leigh Volkland	Telephone (714) 226-3211	E-mail (optional) leigh.volkland@phs.com	5. Senate ID # 30597-12
7. Client Name <input checked="" type="checkbox"/> Self Self			6. House ID # 32170000

**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 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 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 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 checked="" type="checkbox"/> ⇨ \$ <u>\$760,000.00</u> Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitive accounting method.</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(e) Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) Internal Revenue Code</p>
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Signature  Date 1/20/2004

Printed Name and Title Leigh Volkland, Director, Government Relations

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Registrant Name PacifiCare Health Systems, Inc. Client Name Self

**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 code information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Medicare - H.R. 1 and S.1  
- Medicare Reform  
- Medicare Payment  
- Medicare Prescription Drugs

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

U.S. House of Representatives  
U.S. Senate  
Department of Health and Human Services (Plus Center for Medicare and Medicaid Services, CMA)  
White House

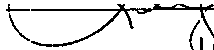
18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Nick Franklin, Senior Vice President, Public Affairs	
Janet Newport, Vice President, Public Policy	
Joe Guinn, Vice President, Public Affairs	
Leigh Volkland, Director, Government Relation	
Jennifer Martin, Manager, Public Policy	

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

Signature *Joe Guinn* Date 1/20/2004

Signature



Printed Name and Title

Leigh Volkland, Director, Government Relations

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Registrant Name PacifiCare Health Systems, Inc. Client Name Self

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

20. Client new address

21. Client new principal place of business (if different from line 20)

City \_\_\_\_\_ State/Zip (or Country) \_\_\_\_\_

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

**LOBBYIST UPDATE**

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

**ISSUE UPDATE**

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

HCR \_\_\_\_\_

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (city and state or cot

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

**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

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

*[Handwritten Signature]*

Signature [Handwritten Signature] Date \_\_\_\_\_

Printed Name and Title Leigh Volkland, Director, Government Relations

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