


DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
Singleha/FOIA	6-8-10

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 100482	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR cc: Standard Cleared 6/23/10, letter attached 	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> Necessary Action DATE DUE 6-28-10

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

Brenda James - SC FOIA

RECEIVED

JUN 08 2010

From: "Shanna Jarrell" <SJarrell@pmped.com>
To: <stenland@scdhhs.gov>
Date: 6/8/2010 9:15 AM
Subject: SC FOIA

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Pursuant to the South Carolina Freedom of Information Act, I am hereby requesting Cost Reports for the following facilities for the years 2005-2009.

Uni-Health Post Acute Care of Ridgeway, Ridgeway, SC

Heartland of Columbia Rehabilitation & Nursing Center, Columbia, SC

Oakbrook Health & Rehabilitation Center, Summerville, SC

Uni-Health Post Acute Care of the Lowcountry, Estill, SC

Morningside of Sumter, Sumter, SC

Heartland of West Ashley Rehabilitation & Nursing Center, Charleston, SC

Orangeburg Nursing Home, Orangeburg, SC

BayView Manor Nursing Center, Beaufort, SC

Life Care Center of Charleston, Charleston, SC

*Shanna M. Jarrell
Peters, Murdaugh, Parker,
Elizroth & Detrick Law Firm
P. O. Box 457
Hampton, SC 29924
Phone 803-943-2111
Fax 803-943-3943*

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From: Jan Polatty
To: Brenda James
Date: 6/8/2010 9:37 AM
Subject: Fwd: Fw: SC FOIA (please log)
Attachments: SC FOIA

Bren, Please log this FOIA for Jeff. Thanks!!!

>>> Jeff Stensland 6/8/2010 9:16 AM >>>

June 23, 2010

Ms Shanna M. Jarrell
Peters, Murdaugh, Parker,
Eltzroth & Detrick Law Firm
Post Office Box 457
Hampton, SC 29924

Re: FOIA Request – Cost Reports

Dear Ms. Jarrell:

In response to your Freedom of Information Act request, enclosed you will find the applicable cost reports you requested. These documents are a true and accurate copy of reports collected by the Department in the regular course of its business.

Our expense for reproducing and mailing this information is five hundred sixty-seven and 49/100 dollars (\$567.49). Please make the check payable to the Department of Health and Human Services and send it to:

Department of Health and Human Services
Department of Receivables
Post Office Box 8297
Columbia, SC 29202-8297

I hope this information is helpful to you. Please contact me if there are any questions.

Sincerely,



Richard G. Hepfer
Deputy General Counsel

RGH/h
Enclosures
cc: Lynette D. Wilson, Receivables