


DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Miles</i>	DATE <i>2-25-08</i>
--------------------	------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000441	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Claud 3/12/08, letter attached.</i> 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>3-5-08</i> <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action

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

RECEIVED

FEB 25 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

February 20, 2008

Lowcountry Medical Associates
180 Wingo Way Suite. 105
Mount Pleasant, SC 29464

South Carolina Department of Health and Human Services
Office of the Director
Emma Forkner, Director
P.O. Box 8206
Columbia, SC 29202

Log. Myers
Appro. Sign.

Re: SC Medicaid

Ms. Forkner,

I am writing this letter to you today in regards to problems I am having with the Medicaid program and trying to obtain information about outstanding claims for my clients.

I currently work as a collections specialist for a large medical company where I am responsible for working outstanding claims for our patients in laboratory and radiology billings. The patients have been referred to our offices in need of blood work and x-rays their physician has ordered to determine the patient's diagnosis. Once the claim has been billed to Medicaid and this claim has been rejected, it is my responsibility to contact Medicaid to see what may be required to get the claim processed and paid correctly.

The issue I am having is our contact representative, Clarisa Johnson, for the Charleston area is not available to consult with us on these issues. I have to leave messages for her to return calls most often I have to leave several messages over several days before I get a call back. The voice mail for her is usually full and you can not leave a message. Once I do get in touch with her she will only go over three issues at a time. If you have more claims that need to be discussed you are instructed to hang up and call back the next day to see if you can get through again. Mrs. Johnson is our only contact in regards to these issues. This has become a real issue as you also have a short amount of time to get resolution on the claims and information sent back to the carrier before time restraints are applied.

I have tried on numerous occasions in the past week to contact Ms. Johnson and her voice mail was full or I left messages with no response to date. At this time I am asking for help with ways for us to have better communication with the Medicaid program on these issues. I know I speak not only for myself but for other in our offices and I am sure other practices in Charleston also.

Right now I hold twenty (20) claims on my desk that I need resolution on for laboratory billings and numerous claims for radiology also, some are quite old. These claims need to be worked on with a representative from Medicaid so the issues can be resolved. I am including with this letter copies of the claims so you may have a better understanding why this issue needs to be addressed. We need an alternative line of help when our representative is unavailable.

I want to thank you for any help you can give in this matter. These issues are very important for all concerned. I can be contacted at 843-937-8101 ext. 221 if you need any additional information.

Sincerely,

Sybilina McKenzie

Lowcountry Medical Associates

Attachments included

c.c. Mark Sanford
Governor South Carolina

12F Farmfield Avenue
Charleston, S.C. 29407
Mt Pleasant, S.C. 29464
(843) 937-8101 x 254 phone
(843) 266-3571 fax

**LMA Ancillary Billing
Department**

Fax

COPY

To: Clorethia Johnson @ Medicaid **From:** Lyn Inman

Fax: 803-255-8255

Pages: 18 7

Phone: 843-937-8101 ext 254

Date: 1/3/2008

Re: Names and information on patients
with outstanding balances where
Medicaid is 2nd insurance. Also copies
of Medicaid EOB's that have claims for
patients, but no money and no edit
codes or ECF sheets. Please help

Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

● **Comments:** This fax is intended only for the individual or entity to which it is addressed and may contain information that is privileged, confidential & is exempt from disclosure under applicable law. If you have received this fax in error please be advised that any dissemination, distribution or copying of this communication prohibited. If you are not the intended recipient of this fax please call (843) 937-8101 x 254, then shred this fax. Thank you

January 3, 2008

Patient Name	DOB	DOS	Medicaid Numbe	ECF returned	no response	no pay	no edits	No ECF
Carrie Abernathy	6/1/1948	9/18/2007	4780402512	12-Nov	X	X		
Sou Ballou	12/10/1933	10/15/2007	2780101477					X
Timmy Bendt	10/22/1959	2/21/2007	9605849701					X
Gloria Boston	6/9/1941	10/17/2007	6630228960		X			X
Vernon Brown	6/28/1952	8/20/2007	4104820501			X	X	X
Bernell Cooper	6/23/1951	6/6/2007	5780276630	10/25 & 08/03	X	X		
Glen Davis	1/20/1957	9/24/2007	3102308501		X	X	X	X
Lawrence Eaddie	10/15/1929	10/16/2007	6108322702		X	X		
Margie Frierson	9/21/1928	9/20/2007	5715717801	12-Nov	X	X	X	
Sandra Gathers	11/25/1951	9/25/2007	1102016903		X	X	X	X
Suzette Graham	7/25/1949	2/13/2007	7603001201	X		X	X	X
Robert Hillman	7/25/1949	9/5/2007	7108483701	X		X	X	X
Kate Holmes	11/10/1923	6/4/2007	9107641401	X		X	X	X
Jennifer Jansson	12/28/1975	9/6/2006	5780301348	X		X	X	X
Bennie Johnson	3/16/1954	10/9/2007	8780340631	X		X	X	X
Mark Judy	3/30/1963	10/8/2007	5780273551	X		X	X	X
Artha Mae Lewis	5/8/1929	5/10/2007	100342301	X		X	X	X
Charles Mack	6/29/1934	10/17/2007	1780466090	X		X	X	X
Ester McManus	8/26/1934	8/22/2007	5102838201	X		X	X	X
Ester McManus	8/26/1934	10/8/2007	5102838201	X		X	X	X
James Miller	11/11/1948	9/21/2007	1311435001	X		X	X	X
Frankie Nilton	1/16/1935	10/9/2007	103655201	X		X	X	X
Vermell Payton	10/20/1940	2/22/2007	530542001	X		X	X	X
Francis Perkalis	11/24/1943	8/9/2006	4780522402	X		X	X	X
Queen Lee Pringle	11/22/1921	7/24/2007	5780090517	10/29/2007	X	X	X	
Patrice Reid	11/15/1965	10/5/2007	6722580901	X		X	X	X
Annabelle Richardson	2/1/1919	1/30/2007	2717069801	8/3/2007	X	X	X	
Annabelle Richardson	2/1/1919	5/10/2007	2717069801	8/3/2007	X	X	X	
Barbara Rowland	8/30/1942	9/26/2007	7780567963	X		X	X	X
Barbara Rowland	8/30/1942	10/4/2007	7780567963	X		X	X	X
Barbara Rowland	8/18/1924	10/16/2007	9729901201	X		X	X	X
Mary Rutledge	1/31/1934	8/22/2007	5715725901	X		X	X	X
Pearl Scott	1/31/1934	8/22/2007	5715725901	X		X	X	X
Jackie Sheffield	6/3/1955	10/16/2007	6780674434	X		X	X	X
Susie Mae Simmons	5/6/1950	3/30/2007	4107360601	X		X	X	X
Irene Smith	7/4/1943	10/18/2007	7720609901	X		X	X	X

Lillie Smalls	8/10/1915	6/21/2007	108649501	X	X	X	X	X	X	X
James Smith	5/31/1951	1/12/2007	5303587701	X	X	X	X	X	X	X
George Snider	9/16/1923	10/8/2007	7085918501	X	X	X	X	X	X	X
Kathy Spell	9/22/1961	8/1/2007	722974401	X	X	X	X	X	X	X
Pamela Stewart	8/12/1951	4/30/2007	6780561289	X	X	X	X	X	X	X
Irmalee Suggs	10/26/1923	9/26/2007	8103135301	11/19/2007	X	X	X	X	X	
Joyce Thomas	10/12/1965	10/3/2007	7302137401	X	X	X	X	X	X	X
Cindy Walters	8/31/1954	9/19/2007	82434501	11/12/2007	X	X	X	X	X	X
Ronnie Watkins	12/5/1960	6/21/2006	3106194801	X	X	X	X	X	X	x ad
Gallager White	2/25/2136	5/31/2007	2720501401	08/20 & 09/25	X	X	X	X	X	
Tonya Williams	12/9/1974	9/10/2007	2601318703	X	X	X	X	X	X	X

PROVIDERS OWN REF. NUMBER	CLAIM REFERENCE NUMBER	SERVICE RENDERED DATE(S) MMDYY	PROC.	AMOUNT BILLED	TITLE 19 PAYMENT MEDICAID	RECIPIENT ID. NUMBER	RECIPIENT NAME F M I LAST NAME	M TLE. 18 D CHARGES	COPAY AMT 18	PAYMENT
000367249	0631204093005700A	101306 101306 101306 101306 101306 101306 101306 101306 101306 101306	93017 78478 78480 78465 A9500 A9505	1910.00 125.00 125.00 125.00 125.00 125.00 125.00 125.00 125.00 125.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	4729499901	S B BROWN	000 000 000 000 000 000 000 000 000 000	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00
000382815	0714908735020300A	042307 042307 042307	72193 74160 Q9946	1375.00 500.00 575.00 300.00	128.24 38.17 38.17 51.90	2717153001	R H TELFAIR	000 000 000 000	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00
000388157	0719402774011300A	062107 062107	78006 A9516	275.00 100.00	0.00 0.00	0108649501	L B SMALLS	000 000 000	0.00 0.00 0.00	0.00 0.00 0.00
000394029	0726202906006300A	082807	71250	425.00	42.56	1607787001	D D MISOVIANIS	000 000 000	0.00 0.00 0.00	0.00 0.00 0.00
000393528	0728412605041500A	082207	76770	140.00	0.00	5102838201	E O MCMAHUS	000 000 000	0.00 0.00 0.00	0.00 0.00 0.00
000369874	0728412611041500A	111406	70552	1050.00	0.00	7608014801	G BURBAGE	000 000 000	0.00 0.00 0.00	0.00 0.00 0.00
000393272	0728412612041500A	082007	93325	610.00	0.00	4104820501	V BROWN	000 000 000 000 000 000 000 000 000 000	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00

FOR AN EXPLANATION OF THE
ERROR CODES LISTED ON THIS
FORM REFER TO: "MEDICAID
PROVIDER MANUAL".

IF YOU STILL HAVE QUESTIONS
PHONE THE D.H.S. NUMBER
SPECIFIED FOR INQUIRY OF
CLAIMS IN THAT MANUAL.

CERT. PG TOT
MEDICAID PG TOT

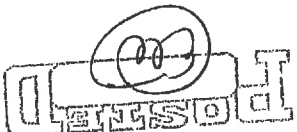
CERTIFIED AMT
MEDICAID TOTAL

CHECK TOTAL

CHECK NUMBER

STATUS CODES:
P = PAYMENT MADE
R = REJECTED
S = IN PROCESS
E = ENCOUNTER

PROVIDER NAME AND ADDRESS
LMA DIAGNOSTIC RADIOLOGY
LOWCOUNTRY MEDICAL ASSOCIA
180 WINGO WAY STE 105
MOUNT PLEASANT SC 29464



NOV 12 2007

PROVIDER ID. 000008646
DEPT OF HEALTH AND HUMAN SERVICES
SOUTH CAROLINA MEDICAID PROGRAM

PROFESSIONAL SERVICES
REMITTANCE ADVICE

PAYMENT DATE
11/09/2007

PAGE
2

PROVIDERS OWN REF. NUMBER	CLAIM REFERENCE NUMBER	SERVICE RENDERED DATE(S) MDDY	AMOUNT BILLED	TITLE 19 PAYMENT	RECIPIENT ID. NUMBER	RECIPIENT NAME F M	M TLE. 18 D CHARGES	COPY TILE 18 PAYMENT
000395967	0728806220013600A	091807 091807	1175.00 875.00 300.00	0.00 R	4780402512	C J ABERNATHY	OTC L00 733 L01 953 L02 953	0.00 0.00 0.00
000396371	0728806221013600A	092107	875.00	0.00 R	1311435001	J L MILLER	OTC L00 733 L01 953 L02 733	0.00 0.00 0.00
000396270	0728806222013600A	092007	140.00 140.00	0.00 R	5715717801	M FRIERSON	OTC L00 733 L01 953 L02 733	0.00 0.00 0.00
000396183	0728806223013600A	091907	110.00 110.00	0.00 R	0082434501	C A WALTERS	OTC L00 733 L01 953 L02 733	0.00 0.00 0.00
000396905	0728903926010400A	092607 092607 092607	1375.00 500.00 575.00 300.00	0.00 R	8103135301	I P SUGGS	OTC L00 690 L01 721 L02 721 L02 733 L03 721	0.00 0.00 0.00 0.00 0.00

FOR AN EXPLANATION OF THE
ERROR CODES LISTED ON THIS
FORM REFER TO: "MEDICAID
PROVIDER MANUAL".
IF YOU STILL HAVE QUESTIONS
PHONE THE D.H.S. NUMBER
SPECIFIED FOR INQUIRY OF
CLAIMS IN THAT MANUAL.

CERT. PG TOT
MEDICAID PG TOT
MEDICAID TOTAL
CHECK TOTAL

STATUS CODES:
P = PAYMENT MADE
R = REJECTED
S = IN PROCESS
E = ENCOUNTER
CHECK NUMBER

PROVIDER NAME AND ADDRESS

LMA DIAGNOSTIC RADIOLOGY
LOWCOUNTRY MEDICAL ASSOCIA
180 WINGO WAY STE 105
MOUNT PLEASANT SC 29464

PROVIDERS OWN REF. NUMBER	CLAIM REFERENCE NUMBER	SERVICE RENDERED DATE(S) MDDYY	PROG.	AMOUNT BILLED PAYMENT	RECIPIENT ID. NUMBER	RECIPIENT NAME F M I LAST NAME	M TLE. 18 D CHARGES	COPY AMT 18 PAYMENT
000394794	0729004164012600A	090507	93971	225.00	0.00	* Robert Hillman T M NELSON	OTC	0.00
000395065	0729700299001100A	091007	71260	800.00	0.00	WILLIAMS	OTC	0.00
000386775	0729904321009100A	091007	71260	500.00	0.00	WILLIAMS	OTC	0.00
		091007	99946	198.00	0.00		OTC	0.00
		091007	99946	102.00	0.00		OTC	0.00
		060607	78465	850.00	0.00	COOPER	OTC	0.00
		060607	78480	125.00	0.00		OTC	0.00
		060607	78478	125.00	0.00		OTC	0.00
		060607	93017	125.00	0.00		OTC	0.00
		060607	A9500	185.00	0.00		OTC	0.00
		060607	A9505	500.00	0.00		OTC	0.00
000399828	0730400435810700A	102507	93922	188.00	0.00	RUSSELL	OTC	0.00
		102507	93922	188.00	0.00		OTC	0.00
000300043	0730400247814300A	102607	70486	350.00	139.24	K V BROWN	OTC	0.00
		102607	70486	350.00	139.24		OTC	0.00
000399835	0730600962810900A	102507	71020	65.00	0.00	L MACKAY	OTC	0.00
		102507	71020	65.00	0.00		OTC	0.00
TOTALS		18		12998.00	310.04			0.00

FOR AN EXPLANATION OF THE
 FORM REFER TO: "MEDICAID
 ERROR CODES LISTED ON THIS
 PROVIDER MANUAL".
 IF YOU STILL HAVE QUESTIONS
 PHONE THE D.H.S. NUMBER
 SPECIFIED FOR INQUIRY OF
 CLAIMS IN THAT MANUAL.

CERT. PG TOT
 MEDICAID PG TOT
 MEDICAID TOTAL
 CHECK TOTAL

STATUS CODES:
 P = PAYMENT MADE
 R = REJECTED
 S = IN PROCESS
 E = ENCOUNTER
 CHECK NUMBER

PROVIDER NAME AND ADDRESS
 LMA DIAGNOSTIC RADIOLOGY
 LOWCOUNTRY MEDICAL ASSOCIA
 180 WINGO WAY STE 105
 MOUNT PLEASANT SC 29464

TRANSMISSION VERIFICATION REPORT

TIME : 01/03/2008 12:01
NAME : LMA ANCILLARY BILLIN
FAX : 8432663571
TEL : 8439378101
SER.# : BRDH5J526320

DATE, TIME
FAX NO./NAME
DURATION
PAGE(S)
RESULT
MODE

01/03 11:59
18032558255
00:02:05
07
OK
STANDARD
ECM

Encounters

Transactions

Enc Number
91787
76512
72202
64800
56725
53792
48510
46883

Created	Sync Date	SIM Description	CPT 4	Qty	Amount	Type	Deduction	Tracking Desc
12/15/06	12/12/06	Glycosylated hemo...	83036	1.00	60.00	Chg		
12/15/06	12/12/06	Metabolic panel, ba...	80048	1.00	48.00	Chg		
12/15/06	12/12/06	Hepatic function pe...	80076	1.00	52.00	Chg		
12/15/06	12/12/06	Lipid profile	80061	1.00	78.00	Chg		
01/09/07	01/09/07	Medicaid Adj			-48.47	Adj		
01/09/07	01/09/07	Medicaid Print			-11.53	Print		
							.00	4881 874 Split
							.00	4881 874 Split

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$236.00	\$0.00	-\$11.53	\$48.47	\$0.00	\$0.00	\$178.00

Patient Information

Personal

Clinical History/Notes

Encounters

Encounters

Transactions

Enc Number
108576
76617

Created	Svc Date	Srv Description	OP14	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surfact	Quartz
11/27/07	11/19/07	Venipunct trig/heel...	36415	1.00	12.00	Crg						
11/27/07	11/19/07	Automated frang...	83025	1.00	42.00	Crg						
11/27/07	11/19/07	Assay, serum lion	83540	1.00	29.00	Crg						

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$83.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$83.00

Encounter Number
 Encounter Date

Printing...

Start NextGenM

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Document - Microsoft...

doj.sc.gov - Financial...

Version: 5.4.29

02/18/08 07:58 AM

Patient Chart - Ancrum, Armani T

Medical Record #1235

Patient Information

Financial

Clinical History/Notes

Encounters

Encounters

Enc Number: 105971

Transactions

Created	Sync Date	SIM Description	CP14	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
12/14/07	12/04/07	Cul. bact. ident so...	87088	1.00	58.00	Chg						
01/07/08	01/07/08	Medicaid Lab Pynt			00	Prd	10	6104567	236			

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$58.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$58.00

- Encounter Number
- Encounter Date

Patient Chart - Walters, Lee

Walters, Lee

Medical Record 40489

Patient Information Financial Clinical History/Notes Encounters

Encounters

Transactions

Enc Number
109364
107102
106312
100357

Created	Svc Date	SIM Description	CP14	QU	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
12/27/07	12/18/07	Venipunct Inj/heel...	36415	1.00	12.00	Chg						
12/27/07	12/18/07	Assay PSA, total	84153	1.00	35.00	Chg						
12/27/07	12/18/07	Lipid profile	80061	1.00	78.00	Chg						
12/27/07	12/18/07	Assay, blood test/tst...	84408	1.00	100.00	Chg						

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$285.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$285.00

Start NextGenPM

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Document2 - Microsoft...

del.sc.gov - Financial an...

Encounter

Financial

Clinical History/Notes

Encounters

Encounters

Transactions

Enc Number
103876
76517

Created	Svc Date	SIM Description	CP14	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Qualifier
11/27/07	11/19/07	Venipunct Inpt/heel...	36415	1.00	12.00	Chg						
11/27/07	11/19/07	Automated testing...	85026	1.00	42.00	Chg						
11/27/07	11/19/07	Assay, serum ion	83540	1.00	29.00	Chg						

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$83.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$83.00

Printing...

Start NextGen

NextGen - LMA Ancilla..

Inbox - Microsoft Outlook

Document2 - Microsoft ...

du.sc.gov - Financial an..

MCKENZIES

Version 5.4.29

02/18/08 08:00 AM

Patient Chart - Parker, Jean M

Medical Record 20589

Encounters
Patient Information
Financial
Clinical History/Notes
Encounters

Encounter	Enc Number	Created	Svc Date	SYM Description	CP74	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
	51787	12/15/06	12/12/06	Glycosylated hem...	83036	1.00	60.00	Chg						
	76512	12/15/06	12/12/06	Metabolic panel, ba...	80048	1.00	48.00	Chg						
	72202	12/15/06	12/12/06	Hepatic function pa...	80076	1.00	52.00	Chg						
	64800	12/15/06	12/12/06	Medicad Adl	80061	1.00	28.00	Chg						
	56725	01/09/07	01/09/07	Medicad Adl			-48.47	Adl	.00	4861874 Spk				
	53792	01/09/07	01/09/07	Medicad Pymt			-11.53	Pmt	.00	4861874 S,sk				
	48510													
	46883													

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$236.00	\$0.00	-\$11.53	-\$48.47	\$0.00	\$0.00	\$178.00

Patient Chart - Richardson, Alston

Richardson, Alston

Medical Record 42507

Patient Information

Financial

Clinical History/Notes

Encounters

Encounters

Transactions

Enc Number
107273
106420

Created	Sync Date	SLM Description	CP14	Q14	Amount	Type	Deductions	Tracking Desc	Reason	Tech	Surface	Quota
12/28/07	12/19/07	Venipunct lmg/heal...	36415	1.00	12.00	Chg						
12/28/07	12/19/07	Automated hemogr...	85025	1.00	42.00	Chg						

Encounter Financial Summary

Charges	Unbilled	Payments	Adjustments	Refunds	Bad Debt	Balance
\$54.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$54.00

Printing...

Start

NextGenPM

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Document2 - Microsoft ...

doj.sc.gov - Financial an...

MOCKENZIES

Version 5.4.29

02/18/08 08:00 AM

Patient Information

Financial

Clinical History/Notes

Encounters

Encounters

Transactions

Enc Number

Created	Svc Date	SIM Description	QRT #	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Salvage	Quadrant
---------	----------	-----------------	-------	-----	--------	------	------------	---------------	--------	-------	---------	----------

110351	08/07/07	08/03/07	Venipunct Inj/hneal...	36415	1.00	12.00 Chg						
104570	08/07/07	08/03/07	Proctomastomy	85618	1.00	30.00 Chg						
103180	08/31/07	08/31/07	Medicaid Lab Adl			-9.45 Adl						
101906	08/31/07	08/31/07	Medicaid Lab Pynt			2.55 Pynt						
99874							.00	5022937				
99423							.00	5022937				
97460												
96856												
96897												
94239												
93467												
93163												
\$2208												
92163												
90778												
90645												
89657												
89227												
88794												
88201												
87621												
86569												
86396												
84868												
84831												
80319												
79267												
78471												

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bsd Debt	Balance
\$42.00	\$0.00	\$2.55	-\$9.45	\$0.00	\$0.00	\$30.00

Encounter Number
Encounter Date

Printing...

Start NextGen

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Document2 - Microsoft ...

doct.gov - Financial sm...

MCKENZIES

Version 5.4.28

02/18/08 08:01 AM

Transaction

Insurance

General

1 Note

Patient Chart - Walters, Lee

Medical Record 40403

Encounters Patient Information Financial Clinical History/Notes Encounters

Enc Number	Created	Svc Date	SIM Description	CP14	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
109364	12/27/07	12/18/07	Venipunct Inj/heel/...	36415	1.00	12.00	Chg						
106312	12/27/07	12/18/07	Assay, PSA, total	84153	1.00	95.90	Chg						
100367	12/27/07	12/18/07	Lipid profile	80061	1.00	78.00	Chg						
	12/27/07	12/18/07	Assay, blood test/tot...	84403	1.00	160.00	Chg						

Encounter Financial Summary

Charges	Unassigned	Payments	Adjustments	Refunds	Bad Debt	Balance
\$285.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$285.00

Encounters

Financial

Direct History/Notes

Encounters

Encounters

Transactions

Enc Number	Created	Svc Date	SIM Description	CP74	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
104604	12/04/07	11/28/07	Venipunct Ingu/hneel...	36415	1.00	12.00	Chg						
91243	12/04/07	11/28/07	Metabolic panel, 09...	80048	1.00	48.00	Chg						
83405													
73004													
65383													
47288													
17691													
11120													

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$60.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$60.00

Printing...

Start

NextGenPM

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Documents2 - Microsoft ...

del.ac.gov - Financial an...

MCKENZIES

Version 5.4.28

02/18/08 08:07 AM

Patient Chart - Drayton, Earl

Medical Record 2442

Encounters | Patient Information | Financial | Clinical History/Notes | Encounters

Enc	Enc Number	Created	3pc Date	SIM Description	CP14	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
	104604	07/30/07	07/23/07	Venipunct Inq/heel/...	36415	1.00	12.00	Chg						
	31283	07/20/07	07/23/07	Metabolic panel, ba...	80046	1.00	48.00	Chg						
	83405													
	73004													
	65383													
	47288													
	17891													
	11120													

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$60.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$60.00

☐ Encounter Number
☐ Encounter Date

Printing..

Patient Chart - Goodman Edens, Joseph

Goodman Edens, Joseph

Medical Record 29712

Encounters Patient Information Financial Clinical History/Notes Encounters

Encounters

Transactions

Financial

Clinical History/Notes

Encounters

Enc Number
108281
78494
72381
68840
68989

Created	3rd Date	SIM Description	CP14	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
01/07/08	12/19/07	Cul, bact, quan co...	87086	1.00	66.00	Chg						
01/29/08	01/29/08	Medicaid Lab Pymt			.00	Finl		No Check	NC DOS (P...			

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$66.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$66.00

☒ Encounter Number
☐ Encounter Date

Patient Chart - Haigler, Jacob R

Medical Record 33151

Patient Information

Encoid

Clinical History/Notes

Encounters

Encounters

Transactions

Enc Number
82408
77687

Created	Syn Date	SIM Description	CPT 4	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
04/17/07	04/17/07	Venipunct (ng/heel/...	36415	1.00	12.00	Chg						
02/12/08	02/12/08	Medicaid Lab Pymt			00 Pmt		00	5123524				

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$12.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12.00

Encounter Number
 Encounter Date

Printing...

Start

NextGen

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Documents - Microsoft ...

del.sc.gov - Financial an...

MCKENZIES

Version 5.4.29

02/18/08 08:02 AM

Encounters

Financial

Clinical History/Notes

Encounters

Encounters

Transactions

Enc Number
110444
85472

Created	Spec Data	SLM Description	CP14	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
01/23/08	11/28/07	Cut, back, ident iso..	87088	1.00	58.00	Chg						
01/23/08	11/28/07	Suscept study, ant.	87184	1.00	34.00	Chg						
02/04/08	02/04/08	Medicaid Lab Pymt			.00	Pmt						
					.00			5121320				

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$92.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$92.00

☐ Encounter Number
☐ Encounter Date

Printing..

☒ Start
 ☐ NextGenEM

NextGen - LMA Ancilla..

Inbox - Microsoft Outlook

Documents2 - Microsoft ...

dot.sc.gov - Financial ...

MCKENZIES

Version 5.4.28

02/18/08 08:03 AM

1 Note

General Insurance Transactions

Patient Chart - Hughes, Kira Lynn

Hughes, Kira Lynn

Medical Record 35812

Patient Information

Encrptal

Clinical History/Notes

Encounters

Encounters

Encounter Number
110344
85472

Transactions

Created	Svc Date	SIM Description	CPT 4	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
01/23/08	11/28/07	Cul, bact, ident iso...	87088	1.00	58.00	Crg						
01/23/08	11/28/07	Suscept study anti...	87184	1.00	34.00	Crg						
02/04/08	02/04/08	Medicaid Lab Print			.00	Print		00 5121320				

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$92.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$92.00

- ☒ Encounter Number
- ☐ Encounter Date

Printing..

Start NextGen EPM

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Documents2 - Microsoft ...

doi.sc.gov - Financial an...

MCKENZIES

Version 5.4.28 02/18/08 08:03 AM

Patient Chart - McCallister, Madison J

McCallister, Madison J

Medical Record 42345

Patient Information

Financial

Clinical History/Notes

Encounters

Encounters

Transactions

Enc Number
106043

Created	Svc Date	SIM Description	CP7 #	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
12/14/07	12/10/07	Cut, pathologic organs...	87081	1.00	37.00	Org						
01/07/08	01/07/08	Medicaid Lab Print			.00	Print						
					.00	5104587			NC D05 (P...			

Encounter Financial Summary

Charges	Unassigned	Payments	Adjustments	Refunds	Bad Debt	Balance
\$37.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$37.00

Encounter Number
Encounter Date

Printing...

Start NextGenEM

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Documents - Microsoft...

doct.gov - Financial an...

MCKENZIES

Version 5.4.29

02/18/08 08:03 AM

1 Note

Transactions

Insurance

General

Encounters

Enc Number	Enc Date
103371	

Transactions

Created	Enc Date	SIM Description	CPT4	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Test	Surface	Quadrant
12/14/07	12/04/07	Cul. bact. ident iso..	87088	1.00	58.00	Crg						
01/07/08	01/07/08	Medicaid Lab Pymt			.00	Pmt	\$0	5104557	235	Our Rc..		

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$58.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$58.00

Printing...

NextGen EPM

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Documents2 - Microsoft ...

dois.gov - Financial an...

MCKENZIES

Version 5.4.29

02/18/08 08:03 AM

Patient Chart - Banks, Heaven

Banks, Heaven

Medical Record 20059

Encounters

Patient Information

Financial



Clinical History/Notes



Encounter/Notes

Transactions

Enc Number	Created	Srv Date	Srv Description	CP14	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
104703	12/04/07	11/28/07	Venipunct fing/heel...	36415	1.00	12.00	Chg						
51902	12/04/07	11/28/07	Automated hemog...	85025	1.00	42.00	Chg						
43163	12/04/07	11/28/07	Relococyte count...	85044	1.00	32.00	Chg						
	02/12/08	02/12/08	Medicaid Lab Pk...			.00	Pmt			00 5725624			

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$86.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$86.00

Printing...

Start NextGenEM

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Documents2 - Microsoft...

del sc.gov - Financial an...

MCKENZIES

Version 5.4.23

02/18/08 08:04 AM

Patient Information

Financial

Clinical History/Notes

Encounters

Encounters

Transactions

Enc Number
35187

Created	Sync Date	SIM Description	CPT4	Qty	Amount	Type	Debit/Bk	Tracking Desc	Reason	Tooth	Surface	Quadrant
09/11/07	09/07/07	Chronic gonadot...	84702	1.00	85.00	Ctg						
02/12/08	02/12/08	Medicaid Lab Pmt			.00	Pmt						

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Refunds	Bad Debt	Balance
\$85.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$85.00

Pending -

Start

NextGenPM

NextGen - LMA Ancilla...

Inbox - Microsoft Outlook

Document2 - Microsoft...

doisc.gov - Financial an...

MCKENZIES

Version 5.4.29

02/18/08 08:04 AM

Created	Svc Date	SIM Description	CPT 4	Qty	Amount	Type	Deductible	Tracking Desc	Reason	Tooth	Surface	Quadrant
12/04/07	11/21/07	Automated hemogr...	85025	1.00	42.00	Chg						
12/04/07	11/21/07	Assay thyroid stimul...	84443	1.00	89.00	Chg						
12/04/07	11/21/07	Assay, free thyroxine	84439	1.00	64.00	Chg						
12/04/07	11/21/07	UV-assay, transam...	84450	1.00	28.00	Chg						
12/04/07	11/21/07	UV-assay, transam...	84460	1.00	28.00	Chg						

Encounter Financial Summary

Charges	Unapplied	Payments	Adjustments	Returns	Bad Debt	Balance
\$251.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$251.00

12F Farmfield Avenue
Charleston, S.C. 29407
Mt Pleasant, S.C. 29464
(843) 937-8101 x 254 phone
(843) 266-3571 fax

**LMA Ancillary Billing
Department**

Fax

COPY

To: Clorethia Johnson @ Medicaid **From:** Lyn Inman

Fax: 803-255-8255 **Pages:** 12

Phone: 843-937-8101 ext. 254 **Date:** 1/28/2008

Re: UNPAID MEDICAID SECONDARY

CLAIMS. PLEASE HELP. FEEL FREE
TO CONTACT ME @ 843-937-8101
EXT254

Urgent ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

● **Comments:** This fax is intended only for the individual or entity to which it is addressed and may contain information that is privileged, confidential & is exempt from disclosure under applicable law. If you have received this fax in error please be advised that any dissemination, distribution or copying of this communication prohibited. If you are not the intended recipient of this fax please call (843) 937-8101 x 254, then shred this fax. Thank you

LMA Ancillary Services Insurance Aging Analysis

Line Item

As of 1/4/2008

1/04/08 7:56 AM

Payer Phone	E/I/A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Itm Amt
(800) 410-7778	98615	05/29/1931	4292374	455	10/12/2007	93971	\$16.45	\$225.00	\$16.45
Totals for [REDACTED]							\$16.45	\$225.00	\$16.45
[REDACTED]							\$695.56	\$3,683.00	\$695.56
[REDACTED]									
(800) 992-8088	95603	06/17/1948	[REDACTED]	88	09/14/2007	71260	\$28.70	\$500.00	\$28.70
(800) 992-8088	95603	06/17/1948	[REDACTED]	88	09/14/2007	Q9946	\$19.40	\$198.00	\$19.40
(800) 992-8088	95603	06/17/1948	[REDACTED]	88	09/14/2007	Q9946	\$9.99	\$102.00	\$9.99
Totals for Rittenger, Thomas							\$58.09	\$800.00	\$58.09
[REDACTED]							\$58.09	\$800.00	\$58.09
[REDACTED]									
Medicaid									
Abernathy, Carrie J									
(800) 868-9095	95967	06/01/1948	478040251	2	09/18/2007	71270	\$51.70	\$875.00	\$51.70
(800) 868-9095	95967	06/01/1948	478040251	2	09/18/2007	Q9946	\$53.40	\$300.00	\$53.40
Totals for Abernathy, Carrie J							\$105.10	\$1,175.00	\$105.10
Alston, Joseph									
(800) 868-9095	92853	02/18/1934	678056097	6	08/16/2007	73221	\$62.54	\$875.00	\$62.54
Totals for Alston, Joseph							\$62.54	\$875.00	\$62.54
Ballam, Sou									
(800) 868-9095	98691	12/10/1933	278010147	7	10/15/2007	73030	\$3.84	\$60.00	\$3.84
Totals for Ballam, Sou							\$3.84	\$60.00	\$3.84
Beach, Sandra J									
(888) 809-3040	26428	07/28/1944	071647820	1	11/14/2005	76075	\$244.00	\$244.00	\$244.00
Totals for Beach, Sandra J							\$244.00	\$244.00	\$244.00
Bendt, Timmy									
(888) 809-3040	77771	10/22/1959	960584970	1	02/21/2007	93320	\$18.31	\$125.00	\$18.31
(888) 809-3040	77771	10/22/1959	960584970	1	02/21/2007	93307	\$25.88	\$275.00	\$25.88

*Added
Paid 1-24-08*

*checking
ck*

Confidential

Page 15

**LMA Ancillary Services
Insurance Aging Analysis**

Line Item

As of 1/4/2008

1/04/08 7:56 AM

Payer Phone	E/I/A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Itm Amt
Totals for Bendt, Timmy							\$44.19	\$400.00	\$44.19
Boston, Gloria									
(800) 868-9095	98929	06/09/1941	663022896 0		10/17/2007	78465	\$69.35	\$850.00	\$69.35
(800) 868-9095	98929	06/09/1941	663022896 0		10/17/2007	78480	\$9.17	\$125.00	\$9.17
(800) 868-9095	98929	06/09/1941	663022896 0		10/17/2007	78478	\$9.17	\$125.00	\$9.17
(800) 868-9095	98929	06/09/1941	663022896 0		10/17/2007	93017	\$11.44	\$125.00	\$11.44
(800) 868-9095	98929	06/09/1941	663022896 0		10/17/2007	A9500	\$24.34	\$185.00	\$24.34
(800) 868-9095	98929	06/09/1941	663022896 0		10/17/2007	A9505	\$18.26	\$500.00	\$18.26
Totals for Boston, Gloria							\$141.73	\$1,910.00	\$141.73
Brown, Leonard									
(888) 809-3040	99714	11/10/1951	110771020 1		10/24/2007	70486	\$33.07	\$350.00	\$33.07
Totals for Brown, Leonard							\$33.07	\$350.00	\$33.07
Brown, Vernon									
(888) 809-3040	93272	06/28/1952	410482050 1		08/20/2007	93325	\$16.41	\$210.00	\$16.41
(888) 809-3040	93272	06/28/1952	410482050 1		08/20/2007	93320	\$11.60	\$125.00	\$11.60
(888) 809-3040	93272	06/28/1952	410482050 1		08/20/2007	93307	\$25.88	\$275.00	\$25.88
Totals for Brown, Vernon							\$53.89	\$610.00	\$53.89
Buck, Kenneth									
(800) 868-9095	99346	10/16/1959	278017424 9		10/22/2007	71020	\$20.58	\$65.00	\$20.58
Totals for Buck, Kenneth							\$20.58	\$65.00	\$20.58
Campbell, Mary A									
(800) 868-9095	10095 4	08/16/1925	771905210 1		11/02/2007	93880	\$26.12	\$270.00	\$26.12
Totals for Campbell, Mary A							\$26.12	\$270.00	\$26.12
Cannaday, Alene									

**LMA Ancillary Services
Insurance Aging Analysis**

Line Item

As of 1/4/2008

1/04/08 7:56 AM

Payer Phone	E//A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Itm Amt
(800) 868-9095	10049 9	06/16/1924	178076805 5		10/30/2007	93880	\$26.12	\$270.00	\$26.12
Totals for Cannaday, Alene							\$26.12	\$270.00	\$26.12
Cash, Elizabeth (800) 868-9095	10002 2	06/13/1928	260701170 1		10/26/2007	71250	\$32.99	\$425.00	\$32.99
Totals for Cash, Elizabeth							\$32.99	\$425.00	\$32.99
Cooper, Bernell (800) 868-9095	86775	06/23/1951	578027663 0		06/06/2007	78465	\$50.30	\$850.00	\$50.30
(800) 868-9095	86775	06/23/1951	578027663 0		06/06/2007	78480	\$5.20	\$125.00	\$5.20
(800) 868-9095	86775	06/23/1951	578027663 0		06/06/2007	78478	\$6.30	\$125.00	\$6.30
(800) 868-9095	86775	06/23/1951	578027663 0		06/06/2007	A9500	\$9.00	\$185.00	\$9.00
(800) 868-9095	86775	06/23/1951	578027663 0		06/06/2007	A9505	\$7.81	\$500.00	\$7.81
(800) 868-9095	86775	06/23/1951	578027663 0		06/06/2007	93017	\$7.30	\$125.00	\$7.30
Totals for Cooper, Bernell							\$85.91	\$1,910.00	\$85.91
Davis, Glen (800) 868-9095	96539	01/20/1957	310230850 1		09/24/2007	93325	\$16.41	\$210.00	\$16.41
(800) 868-9095	96539	01/20/1957	310230850 1		09/24/2007	93320	\$11.60	\$125.00	\$11.60
(800) 868-9095	96539	01/20/1957	310230850 1		09/24/2007	93307	\$25.88	\$275.00	\$25.88
Totals for Davis, Glen							\$53.89	\$610.00	\$53.89
Eddie, Lawrence (800) 868-9095	98874	10/15/1929	610832270 2		10/16/2007	93971	\$16.45	\$225.00	\$16.45
Totals for Eddie, Lawrence							\$16.45	\$225.00	\$16.45
Frierson, Margie (800) 868-9095	96270	09/21/1928	571571780 1		09/20/2007	76700	\$14.76	\$140.00	\$14.76
Totals for Frierson, Margie							\$14.76	\$140.00	\$14.76

Gathers, Sandra M

Confidential

**LMA Ancillary Services
Insurance Aging Analysis**

Line Item
As of 1/4/2008

Payer Phone	E/I/A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Item Amt
Totals for Gathers, Sandra M									
(888) 809-3040	96740	11/25/1951	110201690	3	09/25/2007	72193	\$35.51	\$500.00	\$35.51
(888) 809-3040	96740	11/25/1951	110201690	3	09/25/2007	74160	\$43.63	\$575.00	\$43.63
(888) 809-3040	96740	11/25/1951	110201690	3	09/25/2007	Q9946	\$53.40	\$300.00	\$53.40
Totals for Graham, Suzette D									
(800) 868-9095	76880	09/27/1956	760300120	1	02/13/2007	74185	\$82.03	\$875.00	\$82.03
Totals for Graham, Suzette D									
(888) 809-3040	77926	11/29/1933	810545490	1	02/22/2007	70450	\$32.18	\$355.00	\$32.18
Totals for Grampus, Lily M									
(800) 868-9095	99932	12/22/1933	960793850	1	10/25/2007	72193	\$35.51	\$500.00	\$35.51
(800) 868-9095	99932	12/22/1933	960793850	1	10/25/2007	74160	\$43.63	\$575.00	\$43.63
(800) 868-9095	99932	12/22/1933	960793850	1	10/25/2007	Q9946	\$55.38	\$300.00	\$55.38
Totals for Helmuth, Willa S									
(800) 868-9095	94794	07/25/1949	710848370	1	09/05/2007	93971	\$5.75	\$225.00	\$5.75
Totals for Hillisman, Robert M									
(800) 868-9095	86508	11/10/1923	910764140	1	06/04/2007	77080	\$14.49	\$244.00	\$14.49
Totals for Holmes, Kate S									
(888) 809-3040	64308	12/28/1975	578030134	8	09/06/2006	70450	\$10.00	\$355.00	\$10.00
Totals for Jansson, Jennifer L									

Confidential

**LMA Ancillary Services
Insurance Aging Analysis**
Line Item
As of 1/4/2008

1/04/08 7:56 AM

Payer Phone	E//A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Itm Amt
Johnson, Bennie J (800) 868-9095	98104	03/16/1954	878034063 1		10/09/2007	72141	\$60.58	\$800.00	\$60.58
(800) 868-9095	98104	03/16/1954	878034063 1		10/09/2007	93880	\$26.12	\$270.00	\$26.12
Totals for Johnson, Bennie J							\$86.70	\$1,070.00	\$86.70
Judy, Mark (800) 868-9095	97985	03/30/1963	578027355 1		10/08/2007	78465	\$69.35	\$850.00	\$69.35
(800) 868-9095	97985	03/30/1963	578027355 1		10/08/2007	78480	\$9.17	\$125.00	\$9.17
(800) 868-9095	97985	03/30/1963	578027355 1		10/08/2007	78478	\$9.17	\$125.00	\$9.17
(800) 868-9095	97985	03/30/1963	578027355 1		10/08/2007	93017	\$11.44	\$125.00	\$11.44
(800) 868-9095	97985	03/30/1963	578027355 1		10/08/2007	A9500	\$24.34	\$185.00	\$24.34
(800) 868-9095	97985	03/30/1963	578027355 1		10/08/2007	A9505	\$18.26	\$500.00	\$18.26
Totals for Judy, Mark							\$141.73	\$1,910.00	\$141.73
Lewis, Artha Mae (800) 868-9095	84405	05/08/1929	010034230 1		05/10/2007	93307	\$25.88	\$275.00	\$25.88
(800) 868-9095	84405	05/08/1929	010034230 1		05/10/2007	93325	\$16.41	\$210.00	\$16.41
(800) 868-9095	84405	05/08/1929	010034230 1		05/10/2007	93320	\$11.60	\$125.00	\$11.60
Totals for Lewis, Artha Mae							\$53.89	\$610.00	\$53.89
Mack, Charles (888) 809-3040	98946	06/29/1934	178046609 0		10/17/2007	93922	\$18.68	\$188.00	\$18.68
Totals for Mack, Charles							\$18.68	\$188.00	\$18.68
McManus, Esther O (888) 809-3040	97990	08/26/1934	510283820 1		10/08/2007	74150	\$32.99	\$400.00	\$32.99
(888) 809-3040	93528	08/26/1934	510283820 1		08/22/2007	76770	\$14.69	\$140.00	\$14.69
Totals for McManus, Esther O							\$47.68	\$540.00	\$47.68

Miller, James L

Confidential

**LMA Ancillary Services
Insurance Aging Analysis**

Line Item

As of 1/4/2008

1/04/08 7:56 AM

Payer Phone	E//A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Itm Amt
(800) 868-9095	96371	11/11/1948	131143500		09/21/2007	73221	\$61.19	\$875.00	\$61.19
			1						
Totals for Miller, James L							\$61.19	\$875.00	\$61.19
Nolton, Frankie J (800) 868-9095	98149	01/16/1935	010365520		10/09/2007	93971	\$16.45	\$225.00	\$16.45
			1						
Totals for Nolton, Frankie J							\$16.45	\$225.00	\$16.45
Perkalis, Frances (800) 868-9095	62291	11/24/1943	478052240	09002020	08/09/2006	J1250	\$0.97	\$50.00	\$0.97
			2						
(800) 868-9095	62291	11/24/1943	478052240	09002020	08/09/2006	78465	\$81.86	\$850.00	\$81.86
			2						
(800) 868-9095	62291	11/24/1943	478052240	09002020	08/09/2006	78480	\$10.86	\$125.00	\$10.86
			2						
(800) 868-9095	62291	11/24/1943	478052240	09002020	08/09/2006	78478	\$10.86	\$125.00	\$10.86
			2						
(800) 868-9095	62291	11/24/1943	478052240	09002020	08/09/2006	93017	\$11.70	\$125.00	\$11.70
			2						
(800) 868-9095	62291	11/24/1943	478052240	09002020	08/09/2006	A9500	\$24.34	\$185.00	\$24.34
			2						
(800) 868-9095	62291	11/24/1943	478052240	09002020	08/09/2006	A9505	\$18.26	\$500.00	\$18.26
			2						
Totals for Perkalis, Frances							\$158.85	\$1,960.00	\$158.85
Prevost, Mary E (888) 809-3040	99648	08/16/1940	510218670		10/24/2007	77080	\$14.49	\$244.00	\$14.49
			1						
Totals for Prevost, Mary E							\$14.49	\$244.00	\$14.49
Pringle, Lee Queen (888) 809-3040	90596	11/22/1921	578009051		07/24/2007	93325	\$16.41	\$210.00	\$16.41
			7						
(888) 809-3040	90596	11/22/1921	578009051		07/24/2007	93320	\$11.60	\$125.00	\$11.60
			7						
(888) 809-3040	90596	11/22/1921	578009051		07/24/2007	93307	\$25.88	\$275.00	\$25.88
			7						
(888) 809-3040	90596	11/22/1921	578009051		07/24/2007	93880	\$26.12	\$270.00	\$26.12
			7						
Totals for Pringle, Lee Queen							\$80.01	\$880.00	\$80.01
Rabon, Annie									

Confidential

**LMA Ancillary Services
Insurance Aging Analysis**

Line Item

As of 1/4/2008

1/04/08 7:56 AM

Payer Phone	E/I/A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Itm Amt
(888) 809-3040	82641	01/24/1945	026279950 1		04/19/2007	J1245	\$0.80	\$150.00	\$0.80
Totals for Rabon, Annie							\$0.80	\$150.00	\$0.80
Ravenell, Annabelle	97944	12/17/1917	248429834		10/05/2007	72100	\$4.73	\$105.00	\$4.73
Totals for Ravenell, Annabelle							\$4.73	\$105.00	\$4.73
Reid, Peatrice A (800) 868-9095	97856	11/15/1965	672258090 1		10/05/2007	77080	\$244.00	\$244.00	\$244.00
Totals for Reid, Peatrice A							\$244.00	\$244.00	\$244.00
Richardson, Annabell (888) 809-3040	84394	02/01/1919	271706980 1		05/10/2007	Q9946	\$29.19	\$300.00	\$29.19
(888) 809-3040	84394	02/01/1919	271706980 1		05/10/2007	71260	\$21.80	\$500.00	\$21.80
(888) 809-3040	75762	02/01/1919	271706980 1		01/30/2007	71250	\$16.50	\$425.00	\$16.50
Totals for Richardson, Annabell							\$67.49	\$1,225.00	\$67.49
Rowland, Barbara L (888) 809-3040	97847	08/30/1942	778056796 3		10/04/2007	Q9946	\$55.38	\$300.00	\$55.38
(888) 809-3040	96865	08/30/1942	778056796 3		09/26/2007	76700	\$14.76	\$140.00	\$14.76
(888) 809-3040	97847	08/30/1942	778056796 3		10/04/2007	72193	\$35.51	\$500.00	\$35.51
(888) 809-3040	97847	08/30/1942	778056796 3		10/04/2007	74160	\$43.63	\$575.00	\$43.63
Totals for Rowland, Barbara L							\$149.28	\$1,515.00	\$149.28
Rutledge, Mary (800) 868-9095	98868	08/18/1924	972990120 1		10/16/2007	93325	\$16.41	\$210.00	\$16.41
(800) 868-9095	98868	08/18/1924	972990120 1		10/16/2007	93320	\$11.60	\$125.00	\$11.60
(800) 868-9095	98868	08/18/1924	972990120 1		10/16/2007	93307	\$25.88	\$275.00	\$25.88
Totals for Rutledge, Mary							\$53.89	\$610.00	\$53.89

Scott, Pearl

Confidential

LMA Ancillary Services Insurance Aging Analysis

Line Item
As of 1/4/2008

1/04/08 7:56 AM

Payer Phone	E//A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Itm Amt
(888) 809-3040	93548	01/31/1934	571572590		08/22/2007	93325	\$82.03	\$210.00	\$82.03
			1						
(888) 809-3040	91869	01/31/1934	571572590		08/03/2007	76700	\$14.76	\$140.00	\$14.76
			1						
(888) 809-3040	93548	01/31/1934	571572590		08/22/2007	93320	\$26.14	\$125.00	\$26.14
			1						
(888) 809-3040	93548	01/31/1934	571572590		08/22/2007	93307	\$25.88	\$275.00	\$25.88
			1						
(888) 809-3040	93548	01/31/1934	571572590		08/22/2007	76700	\$14.76	\$140.00	\$14.76
			1						
Totals for Scott, Pearl							\$163.57	\$890.00	\$163.57
Sheffield, Jackie M									
(800) 868-9095	98851	06/03/1955	678067443		10/16/2007	78300	\$19.38	\$180.00	\$19.38
			4						
(800) 868-9095	98851	06/03/1955	678067443		10/16/2007	A9503	\$4.53	\$65.00	\$4.53
			4						
Totals for Sheffield, Jackie M							\$23.91	\$245.00	\$23.91
Simmons, Susie Mae									
(800) 868-9095	81149	05/06/1950	410736060		03/30/2007	93017	\$11.44	\$125.00	\$11.44
			1						
Totals for Simmons, Susie Mae							\$11.44	\$125.00	\$11.44
Smalls, Lillie B									
(888) 809-3040	88157	08/10/1915	010864950		06/21/2007	78006	\$22.20	\$175.00	\$22.20
			1						
(888) 809-3040	88157	08/10/1915	010864950		06/21/2007	A9516	\$19.21	\$100.00	\$19.21
			1						
Totals for Smalls, Lillie B							\$41.41	\$275.00	\$41.41
Smith, Irene									
(888) 809-3040	99089	07/04/1943	772060990		10/18/2007	72193	\$35.51	\$500.00	\$35.51
			1						
(888) 809-3040	99089	07/04/1943	772060990		10/18/2007	74160	\$43.63	\$575.00	\$43.63
			1						
(888) 809-3040	99089	07/04/1943	772060990		10/18/2007	Q9946	\$55.38	\$300.00	\$55.38
			1						
Totals for Smith, Irene							\$134.52	\$1,375.00	\$134.52
Smith, James S									
(800) 868-9095	74198	05/31/1951	530358770		01/12/2007	76770	\$14.69	\$140.00	\$14.69
			1						
Totals for Smith, James S							\$14.69	\$140.00	\$14.69

Confidential

Page 22

LMA Ancillary Services Insurance Aging Analysis

Line Item
As of 1/4/2008

1/04/08 7:56 AM

Payer Phone	E//A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Itm Amt
Snider, George W									
(800) 868-9095	97999	09/16/1923	708591850		10/08/2007	A9500	\$24.34	\$185.00	\$24.34
			1						
(800) 868-9095	97999	09/16/1923	708591850		10/08/2007	A9505	\$18.26	\$500.00	\$18.26
			1						
(800) 868-9095	97999	09/16/1923	708591850		10/08/2007	78465	\$69.35	\$850.00	\$69.35
			1						
(800) 868-9095	97999	09/16/1923	708591850		10/08/2007	78480	\$9.17	\$125.00	\$9.17
			1						
(800) 868-9095	97999	09/16/1923	708591850		10/08/2007	78478	\$9.17	\$125.00	\$9.17
			1						
(800) 868-9095	97999	09/16/1923	708591850		10/08/2007	93017	\$11.44	\$125.00	\$11.44
			1						
Totals for Snider, George W							\$141.73	\$1,910.00	\$141.73
Spell, Kathy A									
(888) 809-3040	91515	09/22/1961	072297440		08/01/2007	74170	\$51.85	\$600.00	\$51.85
			1						
(888) 809-3040	91515	09/22/1961	072297440		08/01/2007	Q9946	\$53.40	\$300.00	\$53.40
			1						
Totals for Spell, Kathy A							\$105.25	\$900.00	\$105.25
Stewart, Pamela									
(800) 868-9095	83700	08/12/1955	678056128		04/30/2007	93307	\$25.88	\$275.00	\$25.88
			9						
(800) 868-9095	83700	08/12/1955	678056128		04/30/2007	93325	\$16.41	\$210.00	\$16.41
			9						
(800) 868-9095	83700	08/12/1955	678056128		04/30/2007	93320	\$11.60	\$125.00	\$11.60
			9						
Totals for Stewart, Pamela							\$53.89	\$610.00	\$53.89
Suggs, Irmalee P									
(800) 868-9095	96905	10/26/1923	810313530		09/26/2007	72193	\$35.51	\$500.00	\$35.51
			1						
(800) 868-9095	96905	10/26/1923	810313530		09/26/2007	74160	\$43.63	\$575.00	\$43.63
			1						
(800) 868-9095	96905	10/26/1923	810313530		09/26/2007	Q9946	\$53.40	\$300.00	\$53.40
			1						
Totals for Suggs, Irmalee P							\$132.54	\$1,375.00	\$132.54
Thomas, Joyce J									
(888) 809-3040	97761	10/12/1965	760213740		10/03/2007	Q9946	\$55.38	\$300.00	\$55.38
			1						

Confidential

Page 23

LMA Ancillary Services Insurance Aging Analysis

Line Item

As of 1/4/2008

1/04/08 7:56 AM

Payer Phone	E/I/A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Itm Amt
(888) 809-3040	97761	10/12/1965	760213740 1		10/03/2007	72193	\$43.59	\$500.00	\$43.59
Totals for Thomas, Joyce J							\$98.97	\$800.00	\$98.97
Walters, Cindy A (888) 809-3040	96183	08/31/1954	008243450 1		09/19/2007	76856	\$12.22	\$110.00	\$12.22
Totals for Walters, Cindy A							\$12.22	\$110.00	\$12.22
Washington, Maybell (800) 868-9095	78543	02/20/1943	278025660 4		03/01/2007	77080	\$244.00	\$244.00	\$244.00
Totals for Washington, Maybell							\$244.00	\$244.00	\$244.00
Watkins, Ronnie R (800) 868-9095	58592	12/05/1960	310619480 1		06/21/2006	93320	\$25.80	\$125.00	\$25.80
(800) 868-9095	58592	12/05/1960	310619480 1		06/21/2006	93307	\$56.98	\$275.00	\$56.98
Totals for Watkins, Ronnie R							\$82.78	\$400.00	\$82.78
White, Galigher (800) 868-9095	86254	12/21/1928	272050140 1		05/31/2007	93325	\$16.41	\$210.00	\$16.41
(800) 868-9095	86254	12/21/1928	272050140 1		05/31/2007	93320	\$11.60	\$125.00	\$11.60
(800) 868-9095	86254	12/21/1928	272050140 1		05/31/2007	A9500	\$24.34	\$185.00	\$24.34
(800) 868-9095	86254	12/21/1928	272050140 1		05/31/2007	A9505	\$18.26	\$500.00	\$18.26
(800) 868-9095	86254	12/21/1928	272050140 1		05/31/2007	J1245	\$1.07	\$200.00	\$1.07
(800) 868-9095	86254	12/21/1928	272050140 1		05/31/2007	93307	\$25.88	\$275.00	\$25.88
(800) 868-9095	86254	12/21/1928	272050140 1		05/31/2007	78465	\$69.35	\$850.00	\$69.35
(800) 868-9095	86254	12/21/1928	272050140 1		05/31/2007	78480	\$9.17	\$125.00	\$9.17
(800) 868-9095	86254	12/21/1928	272050140 1		05/31/2007	78478	\$9.17	\$125.00	\$9.17
(800) 868-9095	86254	12/21/1928	272050140 1		05/31/2007	93017	\$11.44	\$125.00	\$11.44
Totals for White, Galigher							\$196.69	\$2,720.00	\$196.69

Confidential

Page 24

LMA Ancillary Services Insurance Aging Analysis

Line Item
As of 1/4/2008

1/04/08 7:56 AM

Payer Phone	E/I/A/B	Birth Dt	Policy #	Group #	Dt of Svc	Sv It	Ins2 Amt	Chg Amt	Ln Itm Amt
Williams, Deloris (888) 809-3040	10098 9	09/25/1933	072533780 1		11/02/2007	77080	\$14.49	\$244.00	\$14.49
Totals for Williams, Deloris							\$14.49	\$244.00	\$14.49
Williams, Tonya M (888) 809-3040	95065	12/09/1974	260131870 3		09/10/2007	71260	\$66.26	\$500.00	\$66.26
(888) 809-3040	95065	12/09/1974	260131870 3		09/10/2007	Q9946	\$12.30	\$198.00	\$12.30
Totals for Williams, Tonya M							\$78.56	\$698.00	\$78.56
Willis, Betty K (800) 868-9095	98832	08/19/1948	008593370 2		10/15/2007	73520	\$4.66	\$72.00	\$4.66
Totals for Willis, Betty K							\$4.66	\$72.00	\$4.66
Wright, Edwine M (888) 809-3040	99305	03/01/1964	410842200 1		10/22/2007	73070	\$3.51	\$55.00	\$3.51
Totals for Wright, Edwine M							\$3.51	\$55.00	\$3.51
Totals for Medicaid							\$4,135.38	\$39,882.00	\$4,135.38
Medicare									
[REDACTED]							\$166.00	\$244.00	\$166.00
[REDACTED]							\$15.00	\$270.00	\$15.00
[REDACTED]					08/01/2007	93880	\$15.00	\$270.00	\$15.00
[REDACTED]							\$15.00	\$270.00	\$15.00
[REDACTED]					12/04/2006	71270	\$59.37	\$875.00	\$59.37
[REDACTED]					12/04/2006	Q9946	\$48.00	\$300.00	\$48.00
[REDACTED]							\$107.37	\$1,175.00	\$107.37

11/22
12-31

Confidential



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

March 12, 2008

Ms. Sybrina McKenzie
Lowcountry Medical Associates
180 Wingo Way, Suite 105
Mount Pleasant, South Carolina 29464

Dear Ms. McKenzie:

Thank you for your recent letter regarding the unsatisfactory customer service you received when contacting the South Carolina Department of Health and Human Services (SCDHHS). I appreciate your bringing this matter to my attention.

Our program representatives devote the vast majority of their day responding to telephone inquiries from providers within their territory. Because so much of their time is spent on the telephone, we ask that providers needing assistance with resolving claims and other issues leave a message, and the program representative will return the call within 24-48 business hours.

In an attempt to respond to as many calls as possible, the program representative's primary focus is to provide assistance with claim edits, advise on policy issues, and educate providers. We do enforce a limit on claim status related calls that require only the confirmation of denial or payment of claims. However, we do not limit inquiries when a problem occurs that requires the assistance of program staff to resolve. SCDHHS recognizes that providers need information on how their claims have been adjudicated. However, we provide multiple ways for you to check the status of your claims:

- When claims are adjudicated, a provider remittance advice and edit correction form (ECF) is generated and mailed. These documents clearly outline the result of the submitted claim. If assistance is needed in navigating these documents, your program representative will be happy to assist with explaining all elements of the report.

441

Ms. Sybrina McKenzie

March 12, 2008

Page 2

- SCDHHS provides a free claim processing resource called "Web Tool" which allows providers to process claims, and to check the status. Providers interested in using this tool must complete a Trading Partner Agreement (TPA) with SCDHHS. For more information please contact the South Carolina Medicaid EDI Support Center at 1-888-289-0709.
- SCDHHS provides an Interactive Voice Response System (IVRS) that allows providers to verify eligibility for the previous 12 months. Providers may also use the IVRS to access their latest Medicaid payment information.

We are in receipt of your spreadsheet that requests status of various claims. Ms. Clarissa Johnson will review your documents to determine if there are any common edit problems and will contact you to explain your edits in detail.

Again, thank you for notifying us of your concerns and for your continued support and participation in the South Carolina Medicaid program. If you have additional questions, please do not hesitate to contact Ms. Erica Dimes, Team Leader, in Physician Services at (803) 898-2660.

Sincerely,



Felicity Myers
Deputy Director

FM/gws