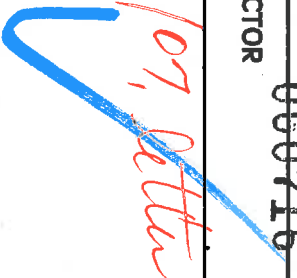


DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
<i>Bowling</i>	<i>5-11-07</i>

DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER	<i>000716</i>	<input type="checkbox"/> Prepare reply for the Director's signature	DATE DUE _____
2. DATE SIGNED BY DIRECTOR	<i>Cleaved 6/17/07, letter attached.</i> 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature	DATE DUE <i>5-22-07</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.			



House of Representatives  
Washington, DC 20515

BOB INGLIS  
4TH DISTRICT, SOUTH CAROLINA

May 8, 2007

JUDICIARY  
EDUCATION AND WORKFORCE  
SCIENCE

Robert Kerr, Director  
Department Of Health And Human Services  
Medicaid  
P.O. Box 8206  
1801 Main Street  
Columbia, SC 29202-8206

*Log-Bourling*  
*110ppm. Sign.*

**RECEIVED**

MAY 11 2007

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Dear Robert:

I am writing on behalf of my constituent, Beverly Shell (SSN: 248-33-7938) about a pending payment from Medicaid.

Beverly contacted my office in regards to a Medicaid claim. Beverly says she was injured in 2006 and hospitalized at Greenville Memorial Hospital in Greenville, SC (unfortunately she could not give me a specific date or timeline). Beverly says she filed a claim with Medicaid and a payment of \$1400 was mailed to her on November 16th, which partially covered her claim. Beverly claims there is a remaining balance of \$310 due to her from Medicaid. Beverly says Medicaid was verifying that she did not have any outstanding bills related to treatment of this injury with Greenville Memorial Hospital, prior to finalizing and mailing her remaining payment in full- \$310.00. Beverly is requesting follow up from your office. Your full and fair consideration, consistent with governing rules and regulations, would be most appreciated as you review this matter.

Thank you, in advance, for your assistance. I hope you will not hesitate to call me or April of my Greenville office at 864.232.1141 if you have any questions or need more information.

I look forward to hearing from you soon.

Sincerely,

*Bob*

Bob Inglis  
Member of Congress

WASHINGTON, DC  
330 CANNON HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515  
PHONE: (202) 225-6030  
FAX: (202) 228-1177

SPARTANBURG, SC  
464 EAST MAIN STREET, SUITE 8  
SPARTANBURG, SC 29302  
PHONE: (864) 582-6422  
FAX: (864) 573-9478  
UNION, SC  
PHONE: (864) 427-2205  
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GREENVILLE, SC  
105 NORTH SPRING STREET, SUITE 111  
GREENVILLE, SC 29601  
PHONE: (864) 232-1141  
FAX: (864) 233-2160



House of Representatives  
Washington, DC 20515

BOB INGLIS  
4TH DISTRICT, SOUTH CAROLINA

JUDICIARY  
EDUCATION AND WORKFORCE  
SCIENCE

Privacy Act Release Form

TO WHOM IT MAY CONCERN:

I am aware that the Privacy Act of 1974 prohibits the release of information in my file without my approval. I, Beverly Shell do hereby authorize Congressman Bob Inglis and/or his staff to all information in my files.

Beverly Shell  
Signature

16 Colorado Street  
Address  
Greenville S.C. 29607

248-33-7938  
Social Security Number

18647 370-4823  
Telephone Number

WASHINGTON, DC  
330 CANNON HOUSE OFFICE BUILDING  
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PHONE: (864) 232-1141  
FAX: (864) 233-2150

BI/ae

Enclosure

cc: Beverly Shell



*State of South Carolina*  
*Department of Health and Human Services*

Mark Sanford  
Governor

Susan B. Bowling  
Acting Director

June 7, 2007

The Honorable Bob Inglis  
House of Representatives  
105 North Spring Street, Suite 111  
Greenville, South Carolina 29601

Dear Congressman Inglis:

Thank you for your recent letter on behalf of Ms. Beverly Shell regarding a pending payment for Medicaid services received at Greenville Hospital in 2006. We appreciate the opportunity to be of assistance in this matter.

Pursuant to Medicaid policy, payments may be made only to a provider, to a provider's employer, or to an authorized billing entity. During our follow up with the Greenville Hospital System, it was determined that no Medicaid claims had been filed or paid for Ms. Shell for a 2006 hospitalization at Greenville Hospital. We subsequently contacted Ms. Shell and discovered that the payment in question involved a private insurance company rather than Medicaid.

Thank you for your support of the South Carolina Medicaid program. If you have any questions regarding this matter or if we can be of further assistance, please do not hesitate to contact me directly or Ms. Zenovia Vaughn, Division Director of Hospital Services, at (803) 898-2665.

Sincerely,

*Susan B. Bowling*  
Susan B. Bowling  
Acting Director

SBB/gvb