

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

| | |
|---------------------|-------------------------|
| TO <i>Jacobs</i> | DATE <i>11-18-09</i> |
|---------------------|-------------------------|

| DIRECTOR'S USE ONLY | ACTION REQUESTED |
|--|--|
| 1. LOG NUMBER <i>100-230</i> | <input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____ |
| 2. DATE SIGNED BY DIRECTOR <i>Cic Kost</i> <i>Cleared 11/25/09, letter attached.</i> | <input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>12-1-09</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. | | | |

Phone: (803) 212-6116
Fax: (803) 212-6299

P. O. Box 142
Suite 601 Gressette Building
Columbia, SC 29202

Senator Dick Elliott

Memo

RECEIVED

NOV 18 2009

Department of Health & Human Services
OFFICE OF THE DIRECTOR

11/16 -
called Mendi to
get her know-
ed get her info. to
Medicaid.

To: Brian Kust

From: Michele Neal

Fax Number: 255 -- 8235

Date: Nov. 16, 09

Re: Conatituent Mendi Davis
medicaid matter.

Thanks so much,

Michele

Brian,

Will you please take a look into
Mr. Davis' situation to see what
can be done to help her.

Thanks
Michele

**** Dick Elliott [D] (1992)**

Real Estate-Vacation Rentals, Golf Courses, Sales, Development
Dist. No. 28 - Dillon, **Horry**, Marion & Marlboro Cos.

Mandi Davis
404 Backwater Ct.
Myrtle Beach, SC 29579

(H) P.O. Box 3626, North Myrtle Beach, 29582

(C) Home (843) 249-1449

Bus. (803) 212-6116 Home (803) 771-8711

My name is Mandi Davis. I have an 11 year old son. His father passed away in 2006 and he gets 300 per month social security. I have Hepatitis C. I lost my job due to my inability to work all the day, because of exhaustion from this disease. No one will hire me in my field now because of the hepatitis. I have been on unemployment and collect 224. each week. I have a small apartment, but I never have enough money for food so my son spends a lot of time at my mother's house.

We were both on Medicaid when I worked, as my income was low, but now they have turned me down for Medicaid when I need it most. They said unemployment is unearned income. Don't we all earn unemployment when we can work? The treatment for Hep C is a chemo treatment that is very expensive. I was on this treatment last spring, but I was not tolerating it well so my Dr. said to go off a while and we would try again in Sept or Oct of this year. Well now I do not have any way that I can pay for this treatment, Medicaid does not seem to care if I die and leave my son with NO parents. Also part of the side affects of this disease is unbelievable depression. I also cannot get this medication now.

When I sent in my reapplication for Medicaid, they sent me the turn down and used my mothers street address, but the first 3 numbers of my social sec. # for the numbers on the address. Ofcourse I didn't get this letter, I found out when I called them. The girl tried to tell me that is what I gave, but I have a copy of the application and the information was all correct on it. My question is "How do I know this was even processed correctly if they cannot even read the address off the application"?

If you know any way to help me, please call my mothers phone at 843-467-8537.

Or if you can find anyone who can advise me what to do.
I do not know where to turn with this.

I have sent a message to State Medical Affairs Committee which I found on the internet.

Thank you,
Mandi Davis



Aug 02 30
✓

State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

November 25, 2009

The Honorable Dick Elliott
South Carolina Senate
Post Office Box 142
Suite 601 Gressette Building
Columbia, South Carolina 29202

Dear Senator Elliott:

Thank you for contacting our agency on behalf of Ms. Mandi Davis regarding her Medicaid eligibility and healthcare needs.

A member of my staff has been in direct contact with Ms. Davis regarding Medicaid eligibility and the rules and regulations governing the program. We provided Ms. Davis with information on other programs and organizations that can assist residents in South Carolina with their healthcare services, prescriptions, and daily living expenses. She was also given the name and phone number of a staff person in our Constituent Services Division should she have questions in the future.

Thank you for your continued interest and support of the South Carolina Medicaid program. If I may be of further assistance on this or any other matter, please let me know.

Sincerely,

A handwritten signature in cursive script, reading "Emma Forkner".

Emma Forkner
Director

EF/jcl



November 24, 2009

Ms. Mandi Davis
404 Backwater Court
Myrtle Beach, South Carolina 29579

Dear Ms. Davis:

Senator Dick Elliott contacted our agency on your behalf regarding your Medicaid eligibility and healthcare needs.

Our records indicate your Medicaid coverage under the Transitional Medicaid (TM) category ended September 1, 2009. The transfer to TM took place in June 2008 when your coverage under the Low Income Families (LIF) category ended. You recently applied for coverage under the LIF Program; however, this application was denied because your monthly income is over the allowable limit. Fortunately, your son, Riley Davis, remains covered under Medicaid's Partners for Healthy Children Program.

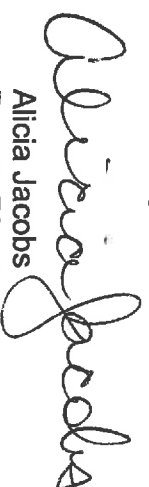
You may apply for our Aged, Blind or Disabled (ABD) program. This program is for disabled individuals whose income is under 100% of the Federal Poverty Level and who meet disability criteria. If you choose to apply for this program, please complete the enclosed application and return it to the Horry County Medicaid Office located at 1601 11th Avenue, 2nd Floor, P.O. Box 290, Conway, SC 29526. Their telephone number is (843) 381-8260.

Your letter mentions that your closure notification was mailed with an incorrect address. Our Medicaid system has been updated to reflect your correct address of 404 Backwater Court, Myrtle Beach, SC 29579. We apologize for this error and any inconvenience this may have caused you and your family.

We have enclosed information on other programs and organizations that can assist residents in South Carolina with their healthcare services, prescriptions, and daily living expenses. We hope this information is helpful.

If you have any questions about the Medicaid program, please contact Ms. Sheila Chavis in Constituent Services at (803) 898-2707.

Sincerely,


Alicia Jacobs
Deputy Director

AJ/clc
Enclosures