

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Meyers</i>	DATE <i>3-18-08</i>
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DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER <i>000475</i>		<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____	
2. DATE SIGNED BY DIRECTOR <i>CC: Ms. Forlinner</i> <i>Also send a copy of</i> <i>office per Richard K.</i>		<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>3-27-08</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. <i>Cleared 3/26/08.</i> <i>Letter attached.</i>			
2.			
3.			
4.			

RECEIVED

MAR 17 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

BEVERLY C. MOORE-ROWE

52 CHADWICK DRIVE

CHARLESTON, SC. 29407

(843) 737-0733

March 11, 2008

Emma Forkner Director of Medicaid
P. O. Box 8206
Columbia, South Carolina 29201

Dear Mrs. Forkner,
I am writing you to ask for help. I am a disabled citizen and resident of South Carolina and I am requesting a special accommodation because of my physical disabilities and limitations.

I am also writing this letter as an official appeal to ask for a Medicaid placement accommodation and consideration for my mother Novella Whitely Smith. My mother has no one other than me to monitor her care and even visit her should she be sent to a long-term care in another state.

I am an only child and the only caregiver for my elderly disabled mother and I also have to provide care for my 81-year-old husband who is also not well.

I have done the best that I could to provide care, support, advocacy, help, and assistance for my mother in our home but it is not enough. We moved her to Charleston to live with us in our home when she was being discharged from Autumn Care Skilled Nursing and Rehabilitation Center in Marshville, NC. The SNF deemed that mother did not meet skilled level of care for staying in their facility in August 2007. Four days after she was relocated to Charleston she was seen by the doctor and home health. Home Health determined that mother met skilled level of care and they said that the SNF in North Carolina had to know mother was skilled because she had not suddenly declined just four days from the date of her discharge.

I wanted mother to be able to continue living with us. Sadly her health care needs go far beyond care that we can give her.

I ambulate on crutches. I am not able to hold on to my mother and I am not strong enough to keep her from falling. Her bones are brittle from osteoporosis, which caused her spinal stenosis.

Mother's condition has worsened since she came here last August. She now takes 21 medications for multiple health problems, which include severe spinal stenosis at L5-S1, Insulin Dependent Diabetes, Parkinson's Disease and now she has a blood clot in her right leg. This blood clot was discovered last November while mother was being treated at Roper Hospital. Unfortunately, it was only discovered after I had to demand a Neurosurgery consultation for my mother because she was screaming and hyperventilating from pain. Roper's Hospitalist only wanted to treat my mother for her admission diagnoses, which were nausea and a blocked colon.

Mother suffers from severe back pain, which radiates down both legs. At times her pain is so severe that she seems paralyzed in bed and can not get up. She also has tremors from Parkinson's which also makes it difficult for her to move around on the walker. When mother was discharged from Trinity Mission Skilled Nursing and Rehabilitation Hospital

the Physical Therapist and Occupational Therapist felt that mother should not return to our home. It was suggested that I should continue to seek suitable placement as soon as possible.

Roper hospital informed me that that according to mothers records from rehab, she was unable to ambulate more than ten feet; a fact that the Rehab facility never informed me of prior to discharging her to home.

I went to a treatment plan meeting shortly after mother was admitted to Trinity for Rehab. I then became ill with pneumonia and was unable to attend the only other meeting that was ever scheduled. I visited my mother at Trinity Mission several times per week and frequently spoke to the charge nurse about mother's progress. Trinity's staff did have one home visit with my mother. I was later told that mother failed that visit.

At the time the social worker of the facility stated that mother did not have enough remaining Medicare days for them to have the time to seek suitable placement in a Medicaid facility, though they did get her name on the waiting lists in the Charleston area.

We had hoped that mother could have back surgery to correct her spine problems. Now that she has fluid retention and a blood clot in her right leg, she is not a candidate for surgery. About three weeks prior to mother being discharged from Trinity Mission she suddenly became incontinent of bowel and bladder and now needs hands on care with bathing, hygiene and with frequent diapers or depends changes and it is almost impossible for her to stand up long enough to be changed.

Mother was approved for some Community Long-term care services as well as Home health services. Unfortunately the hours they can offer are very limited. There are twenty-four hours in the day and we would only have help two to three hours out of the day for someone who needs hands on care.

I have been seeking placement for mother in skilled nursing facilities here in Charleston and have been contacting the facilities to inquire where mother's name is on the lists and when they anticipate a bed for admission. I have hoped for placement locally because it is difficult for me to travel on long trips because of my own physical problems.

Multiple state officials have told me that there are just no Medicaid beds available in Charleston, or any place else in South Carolina. I have sought help through the Lieutenant Governors office without finding any solution. I contacted the Medicare Ombudsman, who suggested I seek the congressmen to get the laws changed.

The state ombudsman said that since there are just no Medicaid beds Mother could be sent to some other state for placement, which would make it difficult if not impossible for me to visit or monitor her treatment and care.

The elder support person for the Charleston City Police Department, stated that she sees other similar cases everyday and she suggested that I go on talk radio to make the issue more public and get more attention for the problem.

I have contacted various agencies, state offices, social workers, Nursing Home admission staff, and others. Everyone says that there are no available Medicaid beds and the waiting lists for such facilities are 2-3 years.

Medicare's pays for 100 Days of skilled Nursing care only after a three-night stay in a hospital. Once those Medicare Rehab days are used it takes 60 days of being out of the hospital and Rehab to have them back on the books for further Rehab in skilled Nursing homes. After admission the nursing home can bill Medicare for everything that it is worth during that first hundred days. Multiple hospital social workers and Nursing home admission personnel have stated that the 100 days Medicare pay's for during skilled Nursing is the *only thing* that makes a *Medicaid applicant* appealing for admission to a nursing home. Such facilities gladly accept payment from state and federal funds and once they have Medicaid slots they hold on to them. Though they are given Medicaid slots the

Skilled Nursing Facilities are allowed to pick and choose whom they want to admit to their facilities.

Medicare's 100 billable days adversely affects the admission process for those looking for a Medicaid slot because nursing placement is then based on economics versus the medical necessity for care of those needing placement for skilled care. I was told that nursing homes always takes the person with the most billable days instead of the person most in need of care. It was also suggested that frequently nursing homes also look at the amount of care required because of the staffing needs of the facility. They have said that nursing homes don't always fill their Medicaid slots with Medicaid patients and that frequently they place private pay patients in the slots that they should retain for Medicaid patients.

I was able to survive the roadblocks of the Medicaid system though mother was at first disqualified for not providing documents that were never requested until after we were notified that she had been disqualified. Hands delivered documents were sent to the wrong offices even though the workers were given the name of the caseworker. Getting the documents back required intervention by the Lieutenant Governors office.

When I requested a special accommodation to help me obtain required documents the Medicaid worker said, "I'll just give you extra time." Though I told the Medicaid worker that I was disabled and that my mobility was impaired I only was offered extra time for completing the paper work and obtaining all the documents, which were in another state. I offered and requested to sign a release of information statement so that Medicaid could obtain anything they needed to complete the process. I have since been told that the workers are supposed to help with getting the documents. Since Mother had Medicare and Medicaid before moving to South Carolina I asked the Medicaid caseworker in North Carolina to contact the Medicaid case worker here to provide copies of documents and assistance. She later told me that her phone calls were never returned.

Mother was admitted to Roper Hospital on March 9, 2008. Just this afternoon I was informed by telephone of the hospital's intent to discharge mother today. Though I had told the social worker that I would not take mother back home and requested that she find suitable placement they still attempted to guilt me into taking mother home.

I don't like feeling like people are trying to force me into taking mother home and it feels like everyone is discounting that I have physical limitations and am unable to safely take care of my mother.

I was told to refuse to bring mother home by a doctor as well as others and it was one of the hardest things that I have ever had to do.

The hospital social workers don't want to take no for an answer and their responses have had me in tears. I asked the social worker to find a suitable nursing home for mother. They are still pushing me to take her home with the same very limited community resources that are all that are available to us. *To make matters worse the Social Workers asked me if I were abandoning my mother.* I told them no that I was not abandoning mother and that I still intended to visit her and help her as best I could. There response was somewhat intimidating and they tried to threaten me by saying that they would call Adult Protective Services and the elder support person from the police Department if I didn't take my mother. When I asked for a conference with the hospital, Community Long-Term care and me, the social workers seemed defensive and were not pleased. They wanted to know why I was making such a request and when I told them that CLTC had suggested it they then wanted to know who made that suggestion. Their response made it obvious that they did not want anyone else coming in to be involved.

I love my mother and I want her to be close by so I can visit and make sure that she is cared for and not neglected. My support system is very limited. The only family I have in South Carolina in my mother and my husband who is also frail, having cognitive difficulties, and unable to help me handle mother's physical needs.

As I am sure you can see from all that has been documented in this letter that I am needing help.

I have written you because I am a person who has been deemed as totally and permanently disabled by Social Security since 1995.

As a person with a certified Disability, I am requesting the accommodation of having my mother placed in a bed in my home county.

I will look forward to a written response with the hopes that it will come quickly, because I received Roper Hospitals intent to discharge notification late this afternoon. I have filled an appeal to Medicare Quality Assurance and expect to receive their determination on Friday or perhaps Monday.

Thank you for taking the time to read and review my letter. I will appreciate any help or assistance you can provide.

Sincerely,

Beverly C. Moore-Rowe
Beverly C. Moore-Rowe

Cc Mark Sanford Governor
Janet Schumaucher ADA Coordinator
Gwen Gillenwater Director DRC



3/19/08
Responded to
Jennifer Lynch
Copy to
Liber to
Brunda

State of South Carolina

Office of the Governor

MARK SANFORD
GOVERNOR

OFFICE OF THE ATTORNEY
GENERAL
POLICY AND PROCEDURE

FAX TRANSMITTAL COVER

* Please send copy of response to Gov. Office.

DATE:	3/19/08
FAX TO:	Jenni
FAX #:	255 - 8350
FROM:	Denise

Total number of pages:

5

(Including this cover sheet)

If you have any problems receiving this document, please contact:

734-6414

RECEIVED

MAR 19 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Office of Constituent Services
Post Office Box 12257
Columbia, SC 29211
TELEPHONE: (803) 734-6048 - FAX: (803) 734-0799

Ref log #495

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(843) 737-0733
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I am an only child and the only caregiver for my elderly disabled mother and I also have to provide care for my 81-year-old husband who is also not well.

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Sincerely,

Beverly C. Moore-Rowe

Beverly C. Moore-Rowe

Ce Mark Sanford Governor

Janet Schumacher ADA Coordinator

Gwen Gillenwater Director DRC

From: Richard Kluender
To: Brenda James
Date: 3/19/2008 4:09 pm
Subject: Fwd: Received Fax From: 8037340799 Re: Novella W. Smith

*Should be 109
#475*

Brenda this is regarding Log#474, I will be forwarding another email regarding the same subject.

>>> Jennifer Lynch 3/19/2008 3:56 PM >>>

Thanks a lot. Will you be sure that the Governor's office gets a written response? Denise Riley with the Governor's office wants our written response faxed to 734-0396. Since your area will be logging/handling I feel I can close on my end if you're in agreement. However, if you need anything from me please don't hesitate to ask. I appreciate it!!

Jennifer Lynch
Supervisor, Division of Constituent Services
Bureau of Eligibility Policy & Oversight
Department of Health and Human Services
(803) 898-3965
(803) 255-8350 FAX
lynchjen@scdhhs.gov

>>> Maria Patton 3/19/2008 3:46 PM >>>
We have not received a log letter to my knowledge. I will ask that this be logged in. Thanks

>>> Jennifer Lynch 3/19/2008 3:38 PM >>>
Did y'all receive a log letter on this? I just called the Governor's office to let them know it is already being looked at. She wants something in writing. If it's not already logged, I'm going to ask that it be logged so I can prepare a letter for Emma's signature. Thanks again for keeping me updated on this one!!

Jennifer Lynch
Supervisor, Division of Constituent Services
Bureau of Eligibility Policy & Oversight
Department of Health and Human Services
(803) 898-3965
(803) 255-8350 FAX
lynchjen@scdhhs.gov

>>> Maria Patton 3/19/2008 2:50 PM >>>
Jennifer, we are familiar with this case. We assessed her mother for our program and she does meet. Before we could get services in place, she went back in the hospital and I am trying to find out from our area office what the current status is. The daughter really wants nursing home placement as she feels like due to her own disability and the level of services CLTC provides, she could not care for her at home. I will let you know what I find out.
Also, in the letter Ms. Rowe mentions that she is requesting "special accommodations". I am not sure what she means by that. I know this is an ADA term.

>>> Jennifer Lynch 3/19/2008 1:52 PM >>>
You may already have this. Can you take a look at the attached fax and see if there is anything we can do? She currently receives ABD, but her letter mentions she was approved for CLTC services, but the hours are too limited. I checked MMIS and it looks like regular ABD. (?) She's having trouble finding a Medicaid bed. She's disabled herself and wants her mother in a nursing home in the Charleston area. This fax came from the

Governor's office. They want us to see if we can do anything. I told her I didn't think we could, but I'm asking you just to be sure I'm not missing anything. Any suggestions? Thanks a lot!!

Jennifer Lynch
Supervisor, Division of Constituent Services
Bureau of Eligibility Policy & Oversight
Department of Health and Human Services
(803) 898-3965
(803) 255-8350 FAX
lynchjen@scdhhs.gov

>>> Carrie B Jackson 3/19/2008 9:49 AM >>>

Carrie Jackson
Department of Health and Human Services
Bureau of Eligibility Policy and Oversight
803-898-2635
803-255-8350 (fax)
JACKSONC@dhhs.gov

>>> "fax" <fax@scdhhs.gov> 3/19/2008 9:25 AM >>>

This message was received via FAXCOM, a product from Biscom Inc. <http://www.biscom.com/>

-----Fax Reception Report-----

Received Time: 03/19/2008 08:20
Result: OK
Description: All pages received OK
Result Code: 0000
Pages Received: 5
Remote TSI: 8037340799
Connect Time: 4 minutes, 19 seconds
Routing ID: 8350
Caller ID:
Unique ID: DHHSBUREAUOFT_0803191325064391
Fax Line: 1
Fax Server: 127.0.0.1

The fax is included as a PDF image attachment



State of South Carolina
Department of Health and Human Services

Log #475 ✓

Mark Sanford
Governor

Emma Forkner
Director

March 26, 2008

Ms. Beverly C. Moore-Rowe
52 Chadwick Drive
Charleston, South Carolina 29407

Dear Ms. Moore-Rowe:

Thank you for your recent letter regarding securing nursing home placement for your mother. I understand that your mother has been admitted to a nursing facility in the Charleston area. I hope this placement works out well.

If I can be of assistance to you in the future, please contact me.

Sincerely,

A handwritten signature in dark ink, appearing to read "Felicity Myers".

Felicity Myers
Deputy Director

FM/wpd

Medical Services
P. O. Box 8206 Columbia South Carolina 29202-8206
(803) 898-2501 Fax (803) 255-8235