

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Hess/FOIA</i>	DATE <i>4-13-11</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>100471</i>	<input type="checkbox"/> I Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Stansland, Singleton closed 4/19/11, letter attached.</i>	<input checked="" type="checkbox"/> I Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE <i>4-27-11</i> <input type="checkbox"/> I 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.			

March 29, 2011

RECEIVED

APR 13 2011

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Moore and Van Allen, PLLC
100 North Tryon Street
Suite 4700
Charlotte, NC 28202-4003

South Carolina Department
Health and Human Services
P.O. Box 8206
Columbia, SC 29202-8206

To Whom It May Concern:

My law firm would like to order a copy of the State Medicaid Plan. I have enclosed a check in the amount of \$150.00. If there are any questions or concerns, please reply to the address above or by calling 704-331-2352.

Sincerely,

Melanie Creech

Melanie Creech
Technical Service Librarian

RECEIVED

MAR 31 2011

DHHS

THIS CHECK IS VOID WITHOUT A BLUE & GREEN BACKGROUND AND AN ARTIFICIAL WATERMARK ON THE BACK - HOLD AT ANGLE TO VIEW

CHECK DATE

03/28/11

MOORE & VAN ALLEN, PLLC

ATTORNEYS AT LAW

BANK OF AMERICA CORPORATE CENTER
100 NORTH TRYON STREET, FLOOR 47
CHARLOTTE, NORTH CAROLINA 28202-4003

CHECK NO. 460595

88-130
1119

CHECK AMOUNT

\$150.00

RECEIVED

MAR 31 2011

BANK OF AMERICA OF TEXAS, N.A.
Wichita Falls, Texas

PAY EXACTLY

ONE HUNDRED FIFTY AND 00/100 DOLLARS

DHHS MOORE & VAN ALLEN, PLLC

AUTHORIZED SIGNATURE

PAY
TO THE
ORDER
OF

DEPT. OF HEALTH & HUMAN SRVS.
P.O. BOX 8206
COLUMBIA, SC 29202-8206

BY: *M. Allen*
MOORE & VAN ALLEN, PLLC

8050

SIGNATURE HAS A COLORED BACKGROUND - BORDER CONTAINS MICROPRINTING

⑈460595⑈ ⑆111901302⑆ 002330940838⑈

April 19, 2011

Ms. Melanie Creech
Technical Service Librarian
Moore and Van Allen, PLLC
100 North Tryon Street, Suite 4700
Charlotte, North Carolina 28202-4003

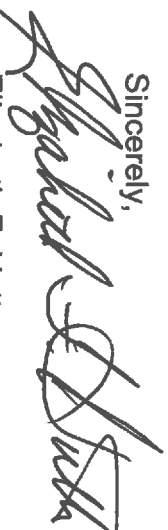
Re: South Carolina Medicaid Title XIX State Plan

Dear Ms. Creech:

Enclosed is the copy of the South Carolina Medicaid Title XIX State Plan you requested in your letter of March 29, 2011. I am sorry for the delay in your request. You will also receive all of the updates as they are approved by CMS.

If you have any questions, feel free to contact me at (803) 898-2503.

Sincerely,



Elizabeth F. Hutto
Administrative Coordinator

EFH/