

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

ACTION REFERRAL

TO <i>Supra</i>	DATE <i>12-31-13</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000214</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cleared 1/16/14, letter attached</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>1-10-14</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.			

John

LINDSEY O. GRAHAM
SOUTH CAROLINA



280 RUSSELL SENATE OFFICE BUILDING
WASHINGTON, DC 20510
(202) 224-5872

UNITED STATES SENATE Fax Transmittal Sheet

TO: DHHS 898 9515

FROM: Scott Talbot

DATE: 12/19

COMMENTS: RE: Cxwork

J

2 PAGE(S) TO FOLLOW

RECEIVED

DEC 19 2013

Department of Health & Human Services
OFFICE OF THE DIRECTOR

IF THERE IS ANY PROBLEM RECEIVING THIS FAX, PLEASE
CALL (803) 933-0112.

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Thank you.

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LINDSEY O. GRAHAM
SOUTH CAROLINA



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WASHINGTON, DC 20510
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UNITED STATES SENATE

December 12, 2013

Mr. Anthony Keck
Director
S.C. Department of Health and Human Services
PO Box 8206
Columbia, SC 29202-8206

Dear Mr. Keck:

The attached letter concerns an issue outside my official jurisdiction. Therefore, as a courtesy to my constituent, I am sending this correspondence to your attention.

Thank you for your attention to this matter, and I ask that you please respond directly to the individual.

Sincerely,

Lindsey O. Graham
United States Senator

LOG/jsj

Enclosure

E-Mail Viewer

Message | **Details** | Attachments | Headers | Source

[HTML](#)

From: "WebServer Reserved UID" <webservd@p-ess-www10.senate.gov>
 Date: 11/22/2013 8:33:04 AM
 To: "webmail@lgraham-iq.senate.gov" <webmail@lgraham-iq.senate.gov>
 Cc:
 Subject: Senator Lindsey Graham

Sender's IP address = 108.202.38.251, 72.246.247.9

<APP>SCCMail
 <PREFIX>Mrs.</PREFIX>
 <FIRST>Melinda</FIRST>
 <LAST>Scarborough</LAST>
 <ADDR1>304 Lloydwood Drive</ADDR1>
 <ADDR2>304 Lloydwood Drive</ADDR2>
 <CITY>West Columbia</CITY>
 <STATE>SC</STATE>
 <ZIP>29172</ZIP>
 <HPHONE>8037918050</HPHONE>
 <WPHONE>8037918050</WPHONE>
 <EMAIL>mlscarboro7777@hotmail.com</EMAIL>

<ISSUE>HEA</ISSUE>
 <>Yes, I would like a written response.</>

<MSG>Mr. Graham,

I am writing you in regards to medicaid. I am disabled and trying to live off \$1600.00 a month. This last month I went 2 weeks without most of my medication and food. My brother lent me 60.00 for some groceries. When I go to the doctor I see young women come in with their children and dressed to the nines and new cars. Here I am with a with a used 1999 blazer and my husband of 30yers who passed away 3/2012. He got 1700.00 a month in disability, I only got 450 of the 1700.00. Frankley, I sm robbing peter to pay paul. I feel Washington dosen't even care what happens to people like us, we vote too! I am very dissapointed in the way Medicaid is treated. You have a family of 2 to qualify or have children. Frankly, I am too old to have children (57) now. Thanks for letting me vent! I do want to thank you for helping with the VA, I finally got my house in my name instead of the VA's. Those poor solders, the hoops they must jump through to get the care they need. Thanks!

for all your hard work. Melinda Scarborough </MSG>

<>please enter your zip code in the format 12345 or 12345-1234.</>

</APP>



Nikki Haley GOVERNOR
Anthony Keck DIRECTOR
P.O. Box 8206 > Columbia, SC 29202
www.scdhhs.gov

January 16, 2014

Ms. Melinda Scarborough
304 Lloydwood Drive
West Columbia, SC 29172

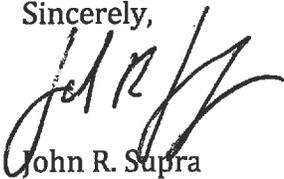
Dear Ms. Scarborough:

Senator Lindsey Graham contacted our Agency on your behalf regarding Medicaid eligibility and your healthcare needs.

Medicaid eligibility is based on federal and state requirements. To qualify for Medicaid under the Aged, Blind or Disabled (ABD) program, an individual must meet the income and resource requirements. Your monthly income exceeds the allowable limit for the ABD program, which is \$958 for an individual. Income is based on gross earnings and does not allow deductions for taxes, utilities, car payments, or other living expenses.

Ms. Carolyn Roach in our Office of Member Relations Services mailed resource information to you that may assist you with your healthcare needs. If you have additional questions regarding the Medicaid Program, please contact Ms. Roach and she will be happy to assist you. Ms. Roach can be reached at (803) 898-3967.

If I may be of further assistance on this or any other matter, please let me know.

Sincerely,

John R. Supra
Deputy Director and CIO

JRS:j