

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
Single copy/FOIA	3-19-09

DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER	100515	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____	
2. DATE SIGNED BY DIRECTOR	cc: Steno land, Ms. Farkner Cleared 3/23/09, letter attached.	<input checked="" type="checkbox"/> FOIA DATE DUE 4-2-09 <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.			

Law Offices

Poliakoff and Associates, P.A.

215 Magnolia Street

Spartanburg, South Carolina 29306

MAILING ADDRESS:

P.O. BOX 1571

SPARTANBURG, SOUTH CAROLINA 29304

TELEPHONE: (864) 582-5472

(864) 682-8101

FACSIMILE: (864) 582-7280

www.gpoliakoff.com

GARY W. POLIAKOFF
gary@poliakoff.com
RAYMOND P. MULLIMAN, JR.
rmullmanjr@aol.com
LARA PETTISS HARRILL
lpettisharrill@poliakoff.com

RECEIVED

MAR 19 2009

Department of Health & Human Services
OFFICE OF THE DIRECTOR

BERNARD B. POLIAKOFF
(1916-1965)
J. MANNING POLIAKOFF
(1989-1989)
MATTHEW POLIAKOFF
(1919-1979)

FOIA Coordinator
Department of Health and Human Services
P.O. Box 8206
Columbia, SC 29202

RE: Medicaid Cost Reports for Magnolia Place at Spartanburg, Provider # 42-5175

Dear FOIA Coordinator:

I am making a request for information pursuant to the South Carolina Freedom of Information Act S.C. Code §§ 30-4-10 through 30-4-165, and the applicable federal statutes and regulations, see, e.g., 5 U.S.C.A. §552 and 29 C.F.R. §1610.7.

In making this request, we hereby certify that we assume financial liability for the direct costs of the search for the requested records and their duplication as set forth in the applicable regulations. Please provide the following information within ten (10) working days after receipt of this request, or sooner, if possible.

We are requesting signed Medicaid Cost Reports for the above-referenced facility for the fiscal years ending in 2007 and 2008.

Thank you for your assistance in this matter and I look forward to hearing from you in the near future.

With best regards, I am,

Yours truly,



Angela S. Lizer

Paralegal

Poliakoff & Associates, P.A.

/tba



Log # 000515

State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

March 23, 2009

Angela S. Lizer, Paralegal
Poliakoff & Associates, P.A.
P. O. Box 1571
215 Magnolia Street
Spartanburg, SC 29304

Re: FOIA Request – Cost Reports for Magnolia Place at Spartanburg

Dear Ms. Lizer:

In response to your Freedom of Information Act request, enclosed you will find the information you requested. These documents are a true and accurate copy of reports collected by the Department in the regular course of its business.

Our expense for reproducing and mailing this information is Twenty-five and 53/100 dollars (\$25.53). Please make the check payable to the Department of Health and Human Services and send it to:

Department of Health and Human Services
Department of Receivables
Post Office Box 8297
Columbia, SC 29202-8297

I hope this information is helpful to you. Please contact me if there are any questions.

Sincerely,

Richard G. Hepfer
Richard G. Hepfer
Deputy General Counsel

RGH/h
Enclosures
cc: Lynette D. Wilson, Receivables

Office of General Counsel
P. O. Box 8206 Columbia South Carolina 29202-8206
(803) 898-2795 Fax (803) 255-8210