

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Hutto</i>	DATE <i>6-24-14</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000420</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Kost cleared 7/15/14, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>7-3-14</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.			



FLORENCE ADDRESS
1817 Pineland Avenue
Florence, South Carolina 29501
(843) 667-1152

HUGH K. LEATHERMAN, SR.

SOUTH CAROLINA STATE SENATE
DISTRICT 31, FLORENCE
AND DARLINGTON COUNTIES

111 GRESSETTE SENATE OFFICE BUILDING
COLUMBIA, SOUTH CAROLINA 29202
(803) 212-6640

COMMITTEES
Chairman, Finance
Chairman, Operations and Management
Ethics
Interstate Cooperation
Labor, Commerce and Industry
Rules
State House
Transportation

June 19, 2014

RECEIVED

JUN 24 2014

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Anthony E. Keck, Director
Department of Health & Human Services
1801 Main Street
Columbia, South Carolina 29201

Dear Dr. Keck:

I am enclosing herewith a copy of an e-mail that I recently received from my constituent, Karen Rotan. As you can see, Ms. Rotan is interested in applying for Medicaid. I would very much appreciate it if you would ask your staff to contact her to determine her eligibility.

As always, thank you for your assistance.

Very truly yours,

Hugh K. Leatherman, Sr.
Senate District 31

HKL:dsm

Enclosure
cc: Ms. Karen Rotan

12/RO

From: krotan3@aol.com
Sent: Thursday, June 12, 2014 9:33 PM
Subject: medicaid ~ Website email from karen rotan

sir, I would like for you to help me ,Im wanting to get medicaid for myself.I am 61 yrs old, I have no health insurance cant afford it,my husband has health ins with his retirement hes 65,he cant afford to pay for my insurance. I need it, I broke my kneecap a year ago and the ortho dr said I need surgery I cant afford it,now it kinda healed up,sometimes it kinda bothers me when I walk some. my daughter has medicaid cause shes special needs. I hope you can help me get it.

karen rotan
1404 half greenland drive
1404 half greenland drive
florence, SC 29505
18434096574



HUGH K. LEATHERMAN, SR.
SENATOR, DISTRICT 31
P. O. BOX 142
COLUMBIA, SOUTH CAROLINA 29202

RECEIVED

JUN 24 2014

Department of Health & Human Services
OFFICE OF THE DIRECTOR

IMS

Anthony E. Keck, Director
Department of Health & Human Services
1801 Main Street
Columbia, South Carolina 29201

July 15, 2014

Ms. Karen Rotan
1404 Half Greenland Drive
Florence, SC 29505

Dear Ms. Rotan:

Senator Hugh K. Leatherman contacted our Agency on your behalf regarding Medicaid eligibility and your healthcare needs. We were unable to reach you by telephone.

To be eligible for Medicaid benefits through the Aged, Blind or Disabled (ABD) Program, an individual must meet certain guidelines. Ms. Carolyn Roach in Member Relations mailed you an overview of the ABD program, an application for Medicaid and Affordable Health Coverage and resource information 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,

Elizabeth B. Hutto

Elizabeth B. Hutto, Deputy Director
Eligibility, Enrollment & Member Services

EBH:jr

July 11, 2014

Ms. Karen Rotan
1404 Half Greenland Drive
Florence, SC 29505

Dear Ms. Rotan:

Senator Hugh K. Leatherman contacted our Agency on your behalf regarding Medicaid eligibility and your healthcare needs. We were unable to reach you by telephone.

To be eligible for Medicaid benefits through the Aged, Blind or Disabled (ABD) Program, an individual must meet certain guidelines. Ms. Carolyn Roach in Member Relations mailed you an overview of the ABD program, an application for Medicaid and Affordable Health Coverage and resource information 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,



Mr. John R. Supra, Jr.
Deputy Director and CIO

JRS:jr



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

July 14, 2014

The Honorable Hugh K. Leatherman, Sr.
South Carolina State Senate
111 Gressette Senate Office Building
Columbia, SC 29201

Dear Senator Leatherman:

Thank you for referring Ms. Karen Rotan to our Agency regarding Medicaid eligibility and her healthcare needs. A member of our staff tried to reach Ms. Rotan via telephone, however they were unsuccessful.

We mailed her a letter regarding Medicaid eligibility requirements for the Aged, Blind or Disabled program, an application for Medicaid and Affordable Health Coverage, and information on programs and organizations that can assist residents in South Carolina with their healthcare needs and prescriptions. We also provided Ms. Rotan with the contact information for our Member Relations office in case further assistance is needed.

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

Sincerely,



Mr. John R. Supra, Jr.
Deputy Director and CIO

BH:jr

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

July 14, 2014

The Honorable Hugh K. Leatherman, Sr.
South Carolina State Senate
111 Gressette Senate Office Building
Columbia, SC 29201

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Sincerely,



Mr. John R. Supra, Jr.
Deputy Director and CIO

BH:jr

