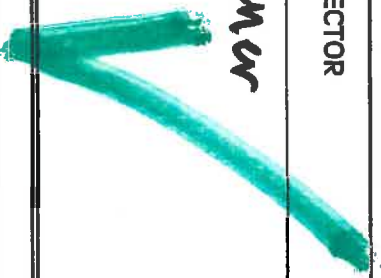


DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO  <i>Myers</i>	DATE  <i>12-19-08</i>
------------------------	-----------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER  <i>000324</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR  <i>CC: Ms. Forkner</i> 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>1-5-09</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 G. FELDER, SR.

## FELDER & ASSOCIATES

LOBBYING, CONSULTING AND

GOVERNMENTAL AFFAIRS

614 NORTH FR HUFF DRIVE

POST OFFICE BOX 346

ST. MATTHEWS, SC 29135

Telephone: (803) 874-1430 or (803) 874-2010

Fax: (803) 655-7167

**RECEIVED**

DEC 19 2008

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

December 17, 2008

Emma Forkner, Director  
SC Department of Health & Human Services  
PO Box 8206  
Columbia, SC 29202-8206

Dear Mrs. Forkner:

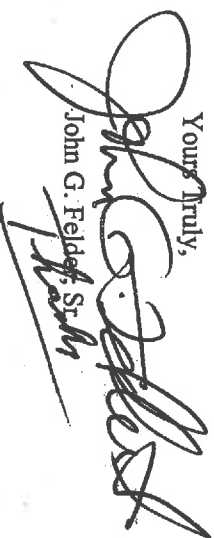
I understand the Department in response to the recent mandated budget cuts is having to make some very tough decisions. We understand that one cut under consideration is ending the reimbursement to providers who use the Syvek Patch for their dialysis patients on January 1, 2009. I have been representing the company who makes this product for more than six (6) years. Because of the progressive action by the Department, Medicaid and dually eligible Medicaid patients in South Carolina have had access to the patch which helps improve the quality of life to persons on dialysis and has helped avoid costs to the program as well. Providers have been pleased with the quality of the product and they are using it to help their patients leave the clinic much quicker, cut down on the numbers of visits to the doctors and hospital, lessens damage to them caused by needles, etc., a very compelling story. Truly, together we are improving the quality of life for those who need it the most.

If the reimbursement is cut off January 1, 2009, it will cause the providers not to allow their patients to use the patch and we will only be hurting the patients. I realize the budget cuts and the financial problems are not the fault of the Department, but I wanted you to know that this really hurts the quality of life for those patients who need dialysis and depend on the Syvek Patch.

If you need further information or if there is anything we can do to see if you could simply allow the reimbursement to continue and not repeal the existing Medicaid Bulletin, it would be very much appreciated by the patients and their families as well as the providers since this information caught them completely off guard.

Any consideration that you can give to this request would be appreciated.

With kindest personal regards, I am

Yours Truly,  
  
John G. Felder, Sr.

JGF, Sr./vlf

cc: Felicity Costin Myers, Deputy Director, Medical Services SCDHHS  
Melanie Giese, Bureau Chief, Bureau of Health Services SCDHHS  
Terri Tokaz, Program Manager, Division of Hospital Services SCDHHS

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Myers / Giese</i>	DATE <i>12-19-08</i>
----------------------------	-------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000324</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>CC: Ms. Forkner</i> <i>Cleared on 12/29/08, per phone conversation with Emma</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>1-5-09</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
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JOHN G. FELDER, SR.

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Department of Health & Human Services  
OFFICE OF THE DIRECTOR

December 17, 2008

Emma Forkner, Director  
SC Department of Health & Human Services  
PO Box 8206  
Columbia, SC 29202-8206

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JGF, Sr./vf

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Melanie Giese, Bureau Chief, Bureau of Health Services SCDHHS  
Terri Tokaz, Program Manager, Division of Hospital Services SCDHHS

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Myers</i>	DATE <i>12-19-08</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>300324</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>CC: Ms. For Kner</i> <i>[Signature]</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>1-5-09</i>  <input type="checkbox"/> FOIA DATE DUE _____  <input type="checkbox"/> Necessary Action

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Columbia, SC 29202-8206

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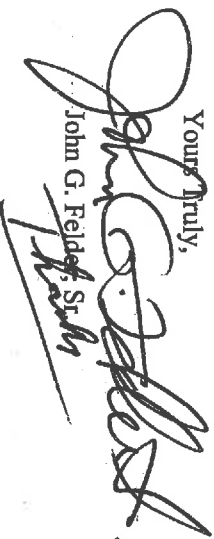
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Terri Tokaz, Program Manager, Division of Hospital Services SCDHHS

**FELDER & ASSOCIATES**

614 North F.R. Huff Drive • P.O. Box 346  
St. Matthews, South Carolina 29135

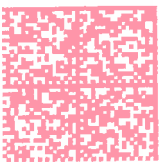
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Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Emma Forknier, Director  
SC Department of Health & Human Services  
PO Box 8206  
Columbia, SC 29202-8206

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