

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Supra</i>	DATE <i>6-18-13</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000396</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR _____ <i>Cleared 7/2/13, letter attached</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>6-28-13</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.			

LINDSEY O. GRAHAM
SOUTH CAROLINA290 RUSSELL SENATE OFFICE BUILDING
WASHINGTON, DC 20510
(202) 224-5873UNITED STATES SENATE
Fax Transmittal Sheet

TO: DHHS 898 4575 **RECEIVED**
JUN 18 2013
FROM: Scott Van Liff Department of Health & Human Services
OFFICE OF THE DIRECTOR
DATE: 6/13
COMMENTS: Re: Davis

 PAGE(S) TO FOLLOWIF THERE IS ANY PROBLEM RECEIVING THIS FAX, PLEASE
CALL (803) 933-0112.

Confidentiality: This message is intended solely for the use of the addressee and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the person responsible for delivering it to the recipient, you are put on notice that any dissemination, distributing or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by phone and return the original message at the address via U.S. Postal Service.

Thank you.

LINDSEY O. GRAHAM
SOUTH CAROLINA



290 RUSSELL SENATE OFFICE BUILDING
WASHINGTON, DC 20510
(202) 224-5972

UNITED STATES SENATE

June 13, 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,

A handwritten signature in black ink, appearing to read "L. Graham".

Lindsey O. Graham
United States Senator

LOG/jsj

Enclosure

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From: "WebServer Reserved UID" <webservd@p-ess-www10.senate.gov>
Date: 6/7/2013 10:08:01 AM
To: "webmail@lgraham-ic.senate.gov" <webmail@lgraham-ic.senate.gov>
Cc:
Subject: Senator Lindsey Graham

Sender's IP address = 99.174.218.173, 96.6.47.31

<APP>SCCMAIL

<PREFIX>Mrs.</PREFIX>

<FIRST>Elizabeth</FIRST>

<LAST>DavisElizabethD</LAST>

<ADDR1>4308 devereaux rd</ADDR1>

<ADDR2></ADDR2>

<CITY>Columbia</CITY>

<STATE>SC</STATE>

<ZIP>29205</ZIP>

<HPHONE>803 787-1303</HPHONE>

<WPHONE>803 497-7113</WPHONE>

<EMAIL>Buffiemail@yahoo.com</EMAIL>

<ISSUE>ASSISTANCE</ISSUE>

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

<MSG>My child Olivia Isabel Davis has been diagnosed with Ehlers danlos syndrome .We have applied for TEFRA and have not heard any response. We have met with social worker and submitted all records requested. School reports have been submitted as well. We are continually being hounded by hospitals and doctors offices for payment ! I ask that you make an inquiry on Olivia's behalf (D O B 11/1/01) so that this issue can be resolved and services can be put into place for this child .

Thank you,</MSG>

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

</APP>

[Close](#)

July 2, 2013

Ms. Elizabeth Davis
4308 Deveraux Road
Columbia, SC 29205

Dear Ms. Davis:

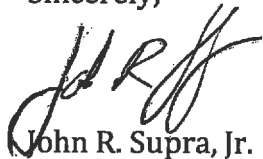
Senator Lindsey Graham contacted our Agency on your behalf regarding your concerns about Medicaid eligibility and the healthcare needs of your daughter, Olivia Davis.

You applied for the Tax Equity and Fiscal Responsibility Act (TEFRA) program for Olivia on April 24, 2013. The Department of Disability Determination is currently reviewing Olivia's medical records and expects a disability decision within the next two weeks. This disability decision will determine Olivia's Medicaid eligibility. We apologize for any inconvenience caused to you and your family.

If you have additional questions, you may contact Ms. Carolyn Roach in our Office of Member Services and she will be happy to assist you. Ms. Roach can be reached at (803) 898-3967.

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,



John R. Supra, Jr.
Deputy Director and CIO

JRS:j