

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

Relogged from Huth to Roberts on 11-5-13

TO <b>Roberts</b>	DATE <b>10-29-13</b>
----------------------	-------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <b>000153</b>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR _____  <i>cleared, 11/18/13, letter attached</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <b>11-15-13</b>
	<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.			

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>HuHo</i>	DATE <i>10-29-13</i>
-------------------	-------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000153</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR _____	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>11-8-13</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.			



The National Foundation for  
**Special Needs Integrity, Inc.**  
Pooled Special Needs Trust

**RECEIVED**

October 25, 2013

OCT 28 2013

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

**VIA USPS (certified mail, return receipt requested)**

South Carolina Department of Health and Human Services  
PO Box 8206  
Columbia, SC 29202

Re: Henry B. Johnson  
SSN: 249-50-0736  
DOB: 06/02/1934

Dear Sir or Madam:

The National Foundation for Special Needs Integrity, Inc ("Special Needs Integrity") administered a pooled trust account for South Carolina resident Henry B. Johnson. Unfortunately, Henry passed away on 09/26/2013. The balance of Henry's account at the time of his passing was \$6,889.43. Special Needs Integrity's retainer policy under the federal enabling and state enacting legislation is to retain 50%.

As you know, remaining assets not retained by the not-for-profit pooled trust must be paid back to the state Medicaid agency, up to the full amount that it has spent on the beneficiary *during the beneficiary's entire lifetime*, not merely during the period of time that the trust was in existence.

I am requesting that your office verify whether or not Henry B. Johnson has ever received Medicaid benefits from the State of South Carolina. If so, please advise me of the dollar amount of Medicaid's claim. Once I am in receipt of this dollar amount, Special Needs Integrity will promptly send the South Carolina Division of Medicaid a check in the amount of money remaining in Henry's account, minus Special Needs Integrity's fifty percent retainer, up to the full amount that the South Carolina Division of Medicaid has spent on Henry during his lifetime. Only if the South Carolina Division of Medicaid has been reimbursed in full will Special Needs Integrity endeavor to pay the remainder beneficiaries under Henry's Joinder Agreement.

301 E. Carmel Drive, Ste. C-100  
Carmel, IN 46032

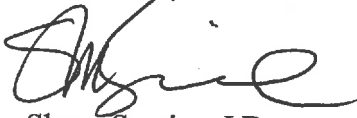
TOLL-FREE 1-866-979-8770 • (317) 841-8795 • FACSIMILE 1-866-979-8530

[www.specialneedsintegrity.org](http://www.specialneedsintegrity.org)

**Every Trust Needs A Foundation**

Thank you for your attention to this matter. If you have questions or need additional information, please feel free to contact me anytime.

Sincerely,

A handwritten signature in black ink, appearing to read "Shane Service". The signature is fluid and cursive, with a large initial "S" and a long, sweeping underline.

Shane Service, J.D.  
President, General Counsel

SS/kfb

The National Foundation for Special Needs  
301 E. Carmel Drive, Suite C-100  
Carmel, IN 46032

**CERTIFIED MAIL™**



7011 0110 0001 4266 8305



**RECEIVED**

OCT 28 2013

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

South Carolina Department of Health and Human  
Services  
PO Box 8206  
Columbia, SC 29202

OCT 28 2013  
NOV 12 2013

29202820606





The National Foundation for  
**Special Needs Integrity, Inc.**  
Pooled Special Needs Trust

**RECEIVED**

**OCT 28 2013**

October 25, 2013

Department of Health & Human Services  
**OFFICE OF THE DIRECTOR**

**VIA USPS (certified mail, return receipt requested)**

South Carolina Department of Health and Human Services  
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Columbia, SC 29202

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SSN: 249-50-0736  
DOB: 06/02/1934

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301 E. Carmel Drive, Ste. C-100  
Carmel, IN 46032

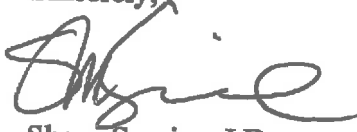
TOLL-FREE 1-866-979-8770 • (317) 841-8795 • FACSIMILE 1-866-979-8530

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Sincerely,

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Shane Service, J.D.  
President, General Counsel

SS/kfb

The National Foundation for Special Needs  
301 E. Carmel Drive, Suite C-100  
Carmel, IN 46032

**CERTIFIED MAIL™**



7011 0110 0001 4266 8305



**RECEIVED**

OCT 28 2013

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

South Carolina Department of Health and Human  
Services  
PO Box 8206  
Columbia, SC 29202

OCT 28 2013  
NOV 12 2013





Log #153

Healthy Connections 

Nikki Haley  
Anthony Kirk

P.O. Box 6206 Columbia, SC 29202  
[www.scdhhs.gov](http://www.scdhhs.gov)

November 18, 2013

Shane Service, Esquire  
President & General Counsel  
The National Foundation for Special Needs Integrity, Inc.  
301 E. Carmel Drive, Ste. C-100  
Carmel, Indiana 46032

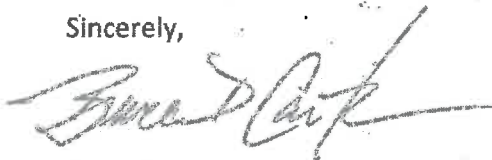
RE: Henry B. Johnson  
SSN: 249-50-0736  
MID: 140 119 3601

Dear Mr. Service:

Thank you for your letter regarding the pooled trust account for Mr. Johnson. Henry B. Johnson was eligible for Medicaid in South Carolina beginning October 1, 1998, until his death on September 26, 2013. Given the balance remaining in the account, we are submitting to you skeletal claims for the period covering January through September 2013. The total Medicaid expenditures for this time period are \$17,431.04. If you need additional documentation, please let me know and we will run a more extensive report.

Please make any payment to come to South Carolina Medicaid payable to the South Carolina Department of Health and Human Services. You may send the payment to my attention at the above address. If you have any questions or I can be of further assistance, please contact me at 803.898.2793 or at [carterbd@scdhhs.gov](mailto:carterbd@scdhhs.gov).

Sincerely,



Bruce D. Carter  
Assistant General Counsel  
South Carolina Department of Health & Human Services

14:05:41 Friday, November 01, 2013

MEDHMS54 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 11/01/13  
MEDSPROD RECIPIENT INFORMATION ACTION:  
MEMBER PERIOD START: 02/28/12 END: PAGE: 0001

NAME: JOHNSON HENRY B HH NAME: JOHNSON HENRY B  
RCP NUMBER: 1401193601 HH NUMBER: 100469702 ACTION TYPE: MAINTENANCE  
SSN: 249-50-0736 VC: V APL STATUS: ACTION DATE: 10/24/02  
PRIMARY INDIVIDUAL: APL CO: 40 WORKER ID: TBURL LOCATION: 077

SSCN: 249500736A RRN:  
5919 CONVEYOR ST RACE: 02 SEX: M MARITAL STATUS: M  
TPL: Y RSP: 1 RELATION: SELF  
COLUMBIA SC 29203- DOB: 06/02/1934 DOD: 09/26/2013  
CORRECT RCP NUMBER: LIV ARRANGEMENT: HOME INCOME TRUST:  
PROVIDER:

	BG	BEG	END			BENEFITS	QMB	RETRO	% OF POV	
S	NUMBER	ELIG	ELIG	PCAT	QCAT	TYPE	IND	IND	LEVEL	SPONSOR
	79795491	10/01/2007	11/01/2013	15	10	FULL	N	N	1.13	4000
	49319395	08/01/2006	10/01/2007	15	10	FULL	N	N	1.16	
	14011936	03/01/1999	08/01/2006	15	10	FULL	N		1.15	
		10/01/1998	01/01/1999	32					1.15	

UPDATED: USER ID: RENEH DATE: 10/03/07 SYSTEM ID: MMA2100 DATE: 10/19/13  
ME900063 RECIPIENT RECORD FOUND  
PF2->HH BG PF3->HH MBR DTL PF4->REFH PF5->ELD02 PF6->RETURN PF7->PREV  
PF8->NEXT PF9->HH NOTES PF15->RCP SEARCH PF17->ELD00 PF18->HH MBR BGS

15:17:45 Friday, November 01, 2013

MMDCLM28 SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID	TYPE	AMOUNT PAID	CHECK DATE	SERVICE DATE FIRST	LAST
—	1326500510811000A	EX1070	61	34.92	09/27/13	09/19/13	09/19/13
—	1326200669810700A	EXG024	62	52.35	09/27/13	09/18/13	09/18/13
—	1326200549811600A	EX1070	61	116.40	09/27/13	09/17/13	09/18/13
—	1326200548811600A	EX1070	61	101.66	09/27/13	09/15/13	09/16/13
—	1325800204814700A	EX1070	61	58.20	09/20/13	09/14/13	09/14/13
—	1325800203814700A	EX1070	61	116.40	09/20/13	09/12/13	09/13/13
—	1325500818815600A	EX1070	61	26.38	09/20/13	09/11/13	09/11/13
—	1325500817815600A	EX1070	61	119.12	09/20/13	09/01/13	09/11/13
—	1325500816815600A	EX1070	61	114.85	09/20/13	09/08/13	09/09/13
—	1325100457811100A	EX1070	61	58.20	09/13/13	09/07/13	09/07/13
—	1325100456811100A	EX1070	61	116.40	09/13/13	09/05/13	09/06/13
—	1324800365811700A	EX1070	61	116.40	09/13/13	09/03/13	09/04/13
—	1324800364811700A	EX1070	61	114.85	09/13/13	08/18/13	09/02/13
—	1324700932810100A	EN2137	61	4.89	09/13/13	09/01/13	09/01/13
—	1324400923810900A	EX1070	61	58.20	09/06/13	08/31/13	08/31/13

PAGE: 0001

\*\* MAXIMUM 24 PAGES POSSIBLE. . MARK SELECTION(S) AND PRESS ENTER FOR DETAIL \*\* \*

PF1->HELP

PF4->INQUIRY

PF7->PAGE UP

ENTER->SKEL CLM DTL

PF8->PAGE DOWN

PF10->PREVIOUS MENU

15:17:52 Friday, November 01, 2013

MMDCLM28 SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID TYPE	AMOUNT PAID	CHECK DATE	SERVICE DATE FIRST LAST
-	1324400922810900A	EX1070 51	109.03	09/06/13	08/29/13 08/30/13
-	1324400516810200A	EXG024 62	52.35	09/06/13	08/29/13 08/29/13
-	1324100418811800A	EX1070 61	116.40	09/06/13	08/27/13 08/28/13
-	1324100417811800A	EX1070 61	116.40	09/06/13	08/25/13 08/26/13
-	1324100339441000Z	274472 01	1184.00	09/06/13	04/29/13 05/10/13
-	1323700744811000A	EX1070 61	58.20	08/30/13	08/24/13 08/24/13
-	1323700743811000A	EX1070 61	116.40	08/30/13	08/22/13 08/23/13
-	1323400187811700A	EX1070 61	85.75	08/30/13	08/20/13 08/21/13
-	1323400186811700A	EX1070 61	106.31	08/30/13	08/18/13 08/20/13
-	1323000678811000A	EX1070 61	87.30	08/23/13	08/16/13 08/17/13
-	1323000677811000A	EX1070 61	114.85	08/23/13	08/06/13 08/16/13
-	1322700801811500A	EX1070 61	116.40	08/23/13	08/13/13 08/14/13
-	1322700800811500A	EX1070 61	116.40	08/23/13	08/11/13 08/12/13
-	1322300827811000A	EX1070 61	27.55	08/16/13	08/10/13 08/10/13
-	1322300826811000A	EX1070 61	117.95	08/16/13	08/08/13 08/10/13

PAGE: 0002

\*\* MAXIMUM 24 PAGES POSSIBLE. MARK SELECTION(S) AND PRESS ENTER FOR DETAIL \*\* \*

PF1->HELP PF4->INQUIRY PF7->PAGE UP  
ENTER->SKEL CLM DTL PF8->PAGE DOWN PF10->PREVIOUS MENU

15:18:15 Friday, November 01, 2013

MMDCLM28 - - - SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID TYPE	AMOUNT PAID	CHECK DATE	SERVICE DATE FIRST LAST
—	1322100296814500A	EN2137 61	4.89	08/16/13	08/01/13 08/01/13
—	1322000952811400A	EX1070 61	88.85	08/16/13	08/06/13 08/07/13
—	1322000951811400A	EX1070 61	116.40	08/16/13	08/04/13 08/05/13
—	1321600511889000A	EX1070 61	58.20	08/09/13	08/03/13 08/03/13
—	1321600510889000A	EX1070 61	116.40	08/09/13	08/01/13 08/02/13
—	1321400835814100A	EX1070 61	116.40	08/09/13	07/30/13 07/31/13
—	1321400834814100A	EX1070 61	116.40	08/09/13	07/28/13 07/29/13
—	1320900008811700A	EX1070 61	58.20	08/02/13	07/27/13 07/27/13
—	1320900007811700A	EX1070 61	116.40	08/02/13	07/25/13 07/26/13
—	1320600974811900A	EX1070 61	116.40	08/02/13	07/23/13 07/24/13
—	1320600973811900A	EX1070 61	116.40	08/02/13	07/21/13 07/22/13
—	1320300703811700A	EX1070 61	58.20	07/26/13	07/20/13 07/20/13
—	1320300702811700A	EX1070 61	116.40	07/26/13	07/18/13 07/19/13
—	1319900478812100A	EX1070 61	17.05	07/26/13	07/17/13 07/17/13
—	1319900477812100A	EX1070 61	126.90	07/26/13	07/15/13 07/17/13

PAGE: 0003

PF1->HELP PF4->INQUIRY PF7->PAGE UP  
ENTER->SKEL CLM DTL PF8->PAGE DOWN PF10->PREVIOUS MENU

15:18:18 Friday, November 01, 2013

MMDCLM28 -- SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID TYPE	AMOUNT PAID	CHECK DATE	SERVICE FIRST	DATE LAST
--	1319900476812100A	EX1070 61	88.85	07/26/13	07/14/13	07/15/13
--	1319600829813300A	EX1070 61	58.20	07/19/13	07/13/13	07/13/13
--	1319600828813300A	EX1070 61	116.40	07/19/13	07/11/13	07/12/13
--	1319200614810900A	EXG024 62	52.35	07/19/13	07/08/13	07/08/13
--	1319200554812100A	EX1070 61	116.40	07/19/13	07/09/13	07/10/13
--	1319200553812100A	EX1070 61	103.21	07/19/13	07/07/13	07/08/13
--	1319200260810800A	EN2137 61	52.89	07/19/13	07/09/13	07/09/13
--	1318800059888800A	EX1070 61	58.20	07/12/13	07/06/13	07/06/13
--	1318800058888800A	EX1070 61	116.40	07/12/13	07/04/13	07/05/13
--	1318500668812100A	EX1070 61	116.40	07/12/13	07/02/13	07/03/13
--	1318500667812100A	EX1070 61	116.40	07/12/13	06/30/13	07/01/13
--	1318100477811500A	EX1070 61	58.20	07/05/13	06/29/13	06/29/13
--	1318100476811500A	EX1070 61	116.40	07/05/13	06/27/13	06/28/13
--	1317800308813300A	EX1070 61	116.40	07/05/13	06/25/13	06/26/13
--	1317800307813300A	EX1070 61	116.40	07/05/13	06/23/13	06/24/13

PAGE: 0004

PF1->HELP

ENTER->SKEL CLM DTL

PF4->INQUIRY

PF8->PAGE DOWN

PF7->PAGE UP

PF10->PREVIOUS MENU

15:18:21 Friday, November 01, 2013

MMDCLM28 - SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID TYPE	AMOUNT PAID	CHECK DATE	SERVICE FIRST	DATE LAST
—	1317400379811600A	EX1070 61	55.10	06/28/13	06/22/13	06/22/13
—	1317400378811600A	EX1070 61	116.40	06/28/13	06/20/13	06/21/13
—	1317100306812100A	EX1070 61	116.40	06/28/13	06/18/13	06/19/13
—	1317100305812100A	EX1070 61	116.40	06/28/13	06/16/13	06/17/13
—	1317100093810900A	EXG024 62	52.35	06/28/13	06/18/13	06/18/13
—	1316700358811600A	EX1070 61	58.20	06/21/13	06/15/13	06/15/13
—	1316700357811600A	EX1070 61	116.40	06/21/13	06/13/13	06/14/13
—	1316400351812700A	EX1070 61	78.35	06/21/13	06/11/13	06/12/13
—	1316400350812700A	EX1070 61	107.95	06/21/13	06/09/13	06/11/13
—	1316000105811600A	EX1070 61	58.20	06/14/13	06/08/13	06/08/13
—	1316000104811600A	EX1070 61	116.40	06/14/13	06/06/13	06/07/13
—	1315800328811500A	AB0023 82	37.71	08/09/13	04/28/13	04/28/13
—	1315700545812000A	EX1070 61	116.40	06/14/13	06/04/13	06/05/13
—	1315700544812000A	EX1070 61	116.40	06/14/13	06/02/13	06/03/13
—	1315300591838400A	EX1070 61	58.20	06/07/13	06/01/13	06/01/13

PAGE: 0005

PF1->HELP

ENTER->SKEL CLM DTL

PF4->INQUIRY

PF8->PAGE DOWN

PF7->PAGE UP

PF10->PREVIOUS MENU

15:18:24 Friday, November 01, 2013

MMDCLM28... SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID TYPE	AMOUNT PAID	CHECK DATE	SERVICE DATE FIRST LAST
—	1315300590888400A	EX1070 61	116.40	06/07/13	05/30/13 05/31/13
—	1315300419887300A	EXG024 62	52.35	06/07/13	05/31/13 05/31/13
—	1315300212887200A	EN2137 61	4.89	06/07/13	06/01/13 06/01/13
—	1315000454812000A	EX1070 61	116.40	06/07/13	05/28/13 05/29/13
—	1315000453812000A	EX1070 61	116.40	06/07/13	05/26/13 05/27/13
—	1314600683811400A	EX1070 61	58.20	05/31/13	05/25/13 05/25/13
—	1314600682811400A	EX1070 61	116.40	05/31/13	05/23/13 05/24/13
—	1314400628440100Z	429453 02	48.70	05/31/13	03/11/13 03/11/13
—	1314300879818300A	EX1070 61	116.40	05/31/13	05/21/13 05/22/13
—	1314300878818300A	EX1070 61	116.40	05/31/13	05/19/13 05/20/13
—	1313900051811500A	EX1070 61	58.20	05/24/13	05/18/13 05/18/13
—	1313900050811500A	EX1070 61	116.40	05/24/13	05/16/13 05/17/13
—	1313600865812300A	EX1070 61	81.48	05/24/13	05/14/13 05/15/13
—	1313600864812300A	EX1070 61	183.14	05/24/13	04/29/13 05/14/13
—	1313200142811600A	EX1070 61	90.02	05/17/13	05/10/13 05/11/13

PAGE: 0006

PF1->HELP

ENTER->SKEL CLM DTL

PF4->INQUIRY

PF8->PAGE DOWN

PF7->PAGE UP

PF10->PREVIOUS MENU



15:18:27 Friday, November 01, 2013

MMDCLM28 SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID	TYPE	AMOUNT PAID	CHECK DATE	SERVICE DATE FIRST	LAST
-	1312200775812100A	EX1070	61	58.20	05/10/13	04/28/13	04/28/13
-	1312200619810800A	EN2137	61	4.89	05/10/13	05/01/13	05/01/13
-	1311800646811400A	EX1070	61	58.20	05/03/13	04/27/13	04/27/13
-	1311800645811400A	EX1070	61	116.40	05/03/13	04/25/13	04/26/13
-	1311500639818200A	EX1070	61	116.40	05/03/13	04/23/13	04/24/13
-	1311500638818200A	EX1070	61	116.40	05/03/13	04/21/13	04/22/13
-	1311500441814000A	AB0023	82	37.71	06/14/13	01/23/13	01/23/13
-	1311100891811500A	EX1070	61	58.20	04/26/13	04/20/13	04/20/13
-	1311100890811500A	EX1070	61	116.40	04/26/13	04/18/13	04/19/13
-	1311100502810400A	EXG024	62	52.35	05/03/13	04/19/13	04/19/13
-	1310800324812100A	EX1070	61	27.55	04/26/13	04/17/13	04/17/13
-	1310800323812100A	EX1070	61	113.68	04/26/13	04/15/13	04/17/13
-	1310800322812100A	EX1070	61	91.57	04/26/13	04/14/13	04/15/13
-	1310400695811600A	EX1070	61	58.20	04/19/13	04/13/13	04/13/13
-	1310400694811600A	EX1070	61	116.40	04/19/13	04/11/13	04/12/13

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15:18:30 Friday, November 01, 2013

MMDCLM28 - SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID TYPE	AMOUNT PAID	CHECK DATE	SERVICE FIRST	DATE LAST
-	1310100312812500A	EX1070 61	116.40	04/19/13	04/09/13	04/10/13
-	1310100311812500A	EX1070 61	116.40	04/19/13	04/07/13	04/08/13
-	1310000755485300Z	232488 02	10.82	04/19/13	02/20/13	02/20/13
-	1309700939889000A	EX1070 61	64.02	04/12/13	04/05/13	04/06/13
-	1309700938889000A	EX1070 61	112.13	04/12/13	12/08/12	04/05/13
-	1309400762812300A	EX1070 61	87.30	04/12/13	04/02/13	04/03/13
-	1309400761812300A	EX1070 61	145.50	04/12/13	03/31/13	04/02/13
-	1309400520811000A	EN2137 61	52.89	04/12/13	04/01/13	04/01/13
-	1309000058811400A	EX1070 61	85.75	04/05/13	03/29/13	03/30/13
-	1309000057811400A	EX1070 61	88.85	04/05/13	03/28/13	03/29/13
-	1308700576810700A	EXG024 62	52.35	04/05/13	03/27/13	03/27/13
-	1308700326812000A	EX1070 61	116.40	04/05/13	03/26/13	03/27/13
-	1308700325812000A	EX1070 61	116.40	04/05/13	03/24/13	03/25/13
-	1308300713811500A	EX1070 61	58.20	03/29/13	03/23/13	03/23/13
-	1308300712811500A	EX1070 61	116.40	03/29/13	03/21/13	03/22/13

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PF1->HELP

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PF4->INQUIRY

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15:18:37 Friday, November 01, 2013

MMDCLM28 - SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER		AMOUNT PAID	CHECK DATE	SERVICE DATE	
		ID	TYPE			FIRST	LAST
—	1308000881812100A	EX1070	51	116.40	03/29/13	03/19/13	03/20/13
—	1308000880812100A	EX1070	61	116.40	03/29/13	03/17/13	03/18/13
—	1307600111811600A	EX1070	61	58.20	03/22/13	03/16/13	03/16/13
—	1307600110811600A	EX1070	61	116.40	03/22/13	03/14/13	03/15/13
—	1307300684813800A	EX1070	61	116.40	03/22/13	03/12/13	03/13/13
—	1307300683813800A	EX1070	61	116.40	03/22/13	03/10/13	03/11/13
—	1306900868811700A	EX1070	61	58.20	03/16/13	03/09/13	03/09/13
—	1306900867811700A	EX1070	61	116.40	03/16/13	03/07/13	03/08/13
—	1306800631812000A	EX1070	61	116.40	03/16/13	03/05/13	03/06/13
—	1306800630812000A	EX1070	61	116.40	03/16/13	03/03/13	03/04/13
—	1305800168440600Z	429453	02	8.89	03/16/13	12/06/12	12/06/12
—	1306200833888000A	EX1070	61	58.20	03/09/13	03/02/13	03/02/13
—	1306200832888000A	EX1070	61	116.40	03/09/13	02/28/13	03/01/13
—	1306200359886700A	EN2137	61	4.89	03/09/13	03/01/13	03/01/13
—	1305900689810900A	EXG024	62	52.35	03/09/13	02/27/13	02/27/13

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PF1->HELP PF4->INQUIRY PF7->PAGE UP  
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15:28:55 Friday, November 01, 2013

MMDCLM28 SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID	TYPE	AMOUNT PAID	CHECK DATE	SERVICE DATE FIRST	LAST
—	1305900601312000A	EX1070	61	116.40	03/09/13	02/26/13	02/27/13
—	1305900600812000A	EX1070	61	116.40	03/09/13	02/24/13	02/25/13
—	1305500194811600A	EX1070	61	85.75	03/01/13	02/22/13	02/23/13
—	1305500193811600A	EX1070	61	88.85	03/01/13	02/21/13	02/22/13
—	1305200003812300A	EX1070	61	116.40	03/01/13	02/19/13	02/20/13
—	1305200002812300A	EX1070	61	116.40	03/01/13	02/17/13	02/18/13
—	1304800648811600A	EX1070	61	55.10	02/22/13	02/16/13	02/16/13
—	1304800647811600A	EX1070	61	116.40	02/22/13	02/14/13	02/15/13
—	1304500935812300A	EX1070	61	116.40	02/22/13	02/12/13	02/13/13
—	1304500934812300A	EX1070	61	116.40	02/22/13	02/10/13	02/11/13
—	1304100029811700A	EX1070	61	58.20	02/15/13	02/09/13	02/09/13
—	1304100028811700A	EX1070	61	116.40	02/15/13	02/07/13	02/08/13
—	1303800674812100A	EX1070	61	8.92	02/15/13	02/06/13	02/06/13
—	1303800673812100A	EX1070	61	133.86	02/15/13	02/04/13	02/06/13
—	1303800672812100A	EX1070	61	105.93	02/15/13	01/29/13	02/04/13

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PF1->HELP

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PF10->PREVIOUS MENU

15:18:48 Friday, November 01, 2013

MMDCLM28 SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID TYPE	AMOUNT PAID	CHECK DATE	SERVICE FIRST	DATE LAST
—	1303400480887100A	EN2137 61	4.89	02/08/13	02/01/13	02/01/13
—	1303400198888500A	EX1070 61	58.20	02/08/13	02/02/13	02/02/13
—	1303400197888500A	EX1070 61	116.40	02/08/13	01/31/13	02/01/13
—	1303100953812000A	EX1070 61	91.57	02/08/13	01/29/13	01/30/13
—	1303100952812000A	EX1070 61	116.40	02/08/13	01/27/13	01/28/13
—	1302700683811500A	EX1070 61	58.20	02/01/13	01/26/13	01/26/13
—	1302700682811500A	EX1070 61	116.40	02/01/13	01/24/13	01/25/13
—	1302400711811800A	EX1070 61	116.40	02/01/13	01/22/13	01/23/13
—	1302400710811800A	EX1070 61	114.85	02/01/13	01/20/13	01/21/13
—	1302000024811600A	EX1070 61	58.20	01/25/13	01/19/13	01/19/13
—	1302000023811600A	EX1070 61	116.40	01/25/13	01/17/13	01/18/13
—	1301700558812100A	EX1070 61	116.40	01/25/13	01/15/13	01/16/13
—	1301700557812100A	EX1070 61	116.40	01/25/13	01/13/13	01/14/13
—	1301300643810300A	EN2137 61	52.89	01/18/13	01/09/13	01/09/13
—	1301300344811700A	EX1070 61	58.20	01/18/13	01/12/13	01/12/13

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PF1->HELP PF4->INQUIRY PF7->PAGE UP  
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15:29:08 Friday, November 01, 2013

MMDCLM28 SC DHHS - SKELETAL CLAIMS FOR RECIPIENT 11/01/13  
NAME: HENRY B JOHNSON TPL INDICATOR: H  
RECIP: 1401193601 PROV: DOC TYPE: DATE: TYPE1: TYPE2:

SEL	CLAIM-CONTROL-NO	PROVIDER ID	TYPE	AMOUNT PAID	CHECK DATE	SERVICE DATE FIRST	LAST
-	1301300343811700A	EX1070	61	116.40	01/18/13	01/10/13	01/11/13
-	1301200814810000A	0505MR	10	242.50	01/18/13	12/31/12	12/31/12
-	1301000541811100A	EXG024	62	52.35	01/18/13	01/07/13	01/07/13
-	1301000126812200A	EX1070	61	109.38	01/18/13	01/08/13	01/09/13
-	1301000125812200A	EX1070	61	123.42	01/18/13	01/06/13	01/08/13
-	1300600239889100A	EX1070	61	58.20	01/11/13	01/05/13	01/05/13
-	1300600238889100A	EX1070	61	116.40	01/11/13	01/03/13	01/04/13
-	1300300188812000A	EX1070	61	116.40	01/11/13	01/01/13	01/02/13
-	1300300187812000A	EX1070	61	111.75	01/11/13	12/30/12	12/31/12
-	1236500306811500A	EX1070	61	84.58	01/04/13	12/28/12	12/29/12
-	1236500305811500A	EX1070	61	148.22	01/04/13	12/16/12	12/28/12
-	1236200272811800A	EX1070	61	116.40	01/04/13	12/25/12	12/26/12
-	1236200271811800A	EX1070	61	116.40	01/04/13	12/23/12	12/24/12
-	1235800067811500A	EX1070	61	58.20	12/28/12	12/22/12	12/22/12
-	1235800066811500A	EX1070	61	116.40	12/28/12	12/20/12	12/21/12

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PF1->HELP

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