

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Jacobs</i>	DATE <i>3-31-10</i>
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DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER <i>1011406</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>4-8-10</i> <i>Cleared 3/31/10, letter attached.</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.			

LAND, PARKER & WELCH, P.A.

ATTORNEYS AT LAW
POST OFFICE BOX 138
MANNING, SOUTH CAROLINA 29102

JOHN C. LAND, III
NELSON R. PARKER
J. CALHOUN LAND, IV
RICCI LAND WELCH
WILLIAM CETH LAND

29 SOUTH MILL STREET
TELEPHONE: 803-435-8894
FACSIMILE: 803-435-8362
REL EST FAX: 803-435-0925
ceth@pwlawfirm.com

March 24, 2010

S.C. Dept. of Health and Human Services
Post Office Box 100223
Columbia, South Carolina 29202-3223

RE: William Ceth Land

Dear Sir or Madam:

Please find enclosed a notice that I received indicating that I am eligible for Medicaid because I receive SSI benefits. Upon receiving this letter I called the number found in the notice and spoke with three different individuals, each individual put me on hold to look into the matter, there would be pause of several minutes and then the phone would begin beeping indicated that the line was dead.

First of all, I am very disappointed with the service that I was provided, however, more importantly, I am very concerned that I am receiving a notice indicating that I am receiving SSI when in fact I do not receive SSI benefits. While speaking to each of the three representatives they indicated that the Medicaid number listed on the notice does not match with my name or address. I would ask that this matter be looked into and that I receive a follow up letter indicating that the error has been corrected.

I do represent clients seeking Social Security benefits and hope that the only reason my name is listed is that there may have been a mix up in regarding one of my clients. Once again please notify me that this matter has been fixed.

With kind regards, I am

Sincerely,



William Ceth Land

WCL/sr
Encs.



SOCIAL SECURITY

MEMORANDUM

SOCIAL SECURITY ADMINISTRATION
240 BULTMAN DRIVE
SUMTER SC 29150
TELEPHONE: 803-775-9140
803-435-4412
FAX: 803-775-5470
Date: 03/19/2010

*803 775-4955 X 204
Tom Perard*

From: SOCIAL SECURITY ADMINISTRATION

Subject: IN DIRE NEED OF MEDICAID CARD

To: NATASHA
FAX: 803-255-8203

NAME: GREGORY L. HODGE

SS#: 251-55-4867

ADDRESS: 11 LAVERNE ST
SUMTER SC 29153

SSI IS BEING REINSTATED EFFECTIVE: OCTOBER 2007

THANK YOU,

GAIL PEROZZI
BRANCH MANAGER

VERY IMPORTANT NOTICE

WILLIAM CETH LAND
PO BOX 138
MANNING SC 29102

DATE: 03/22/2010
MEDICAID NUMBER: 8780824832
BUDGET GROUP: 01115834
HH#: 101236191

Re: WILLIAM CETH LAND

head of HH.

Social security has told us that you will get a Supplemental Security Income (SSI) check. Because you get SSI, you will also get Medicaid. Your Medicaid starts 01/01/2008. If you have unpaid medical bills during this period, take this letter to your provider immediately. A medical provider is a doctor, hospital, drug store, or ambulance, who gives you medical services. If you have unpaid medical bills from the three months before your SSI started, contact your County Department of Health and Human Services and ask for a retroactive Medicaid determination.

You will soon receive a Healthy Connections Medicaid card. You must present this card to the doctor, hospital, and drug store each time you go. The card will be mailed to your current address. If you move, call (1-888-549-0820). You must also report a change of address to the Social Security Administration (1-800-772-1213).

You have a choice about the way you receive health services. You will soon receive a Healthy Connections Choices enrollment package. It is very important that you read the package and choose a plan. If you do not choose a plan, a plan will be chosen for you. If you have questions, call SC Healthy Connections Choices at (1-877-552-4642).

Some people get both Medicaid and Medicare. If you can get Medicare, you must call Social Security to enroll for this coverage. As long as you get Medicaid, we will pay your Medicare Part B premium.

☒ Medicaid does not pay medical expenses that a third party, such as a private health insurance company or someone who injures you, is supposed to pay. When you use your Healthy Connections Medicaid card you are assigning and giving your rights to any payments from a liable third party to Medicaid, up to the payment amount that Medicaid has made for your medical care. This assignment also applies to minor children who may be injured. These payments may include payments from hospital and health insurance policies, or payments received as a settlement from an accident.

The medical provider will file for payment from Medicaid. YOU CANNOT FILE YOUR OWN MEDICAID CLAIMS. If you have Medicare or any other kind of health insurance, you must also show that policy or card to the person in charge. Your other insurance must be billed before Medicaid can be billed.

The Department of Health and Human Services may be able to help you:

- If your SSI IS TERMINATED and you still need Medicaid,
- If you do not agree with the action being taken on your case, you can request a fair hearing
- If you have QUESTIONS call 1-888-549-0820

*** REC 2010078 091347 H70903E0 C9P0 CIPQYAC PQAC (F-C9P) ***

MSG: DTE:03/19/10 SSID QN:251-55-4867 RN:03X03 UN:JLT PG: 001+

CCTL FUN:251-55-4867 CFL:T22 MV:08/08/08-C FRC:L07 PFL:595

HODGE, GREGORY L PSY:C01 TMR:DI ID:DI YDA:03/15/10 SEQ:3

CMSC HUN:251-55-4867 RIC:G VER:3 CPD:03/15/10-P CPF:03/15/10

CRZD FC:A 03/10

RZ: S RZP T RZD S 03/01/10 03/10 03/10 EE RZM

PRSN AP:10/18/07 DF:10/30/07 EKS:C DB:01/25/1967-B SX:M AR:Q-

LPS:ENGLISH LPW:ENGLISH DOE:10/07 MEF:11/01/2007 MCI:N

AUTH T:A NME:WILLIAM CETH LAND ADR:PO BOX 138 CTY:MANNING STN:SC 29102-####

TEL:803-435-8894 MAR:N UPT16:16673.71 FIN:S FAD:08/06/08 DP:D

T16\$:4168.42 FEND:03/10 CST:Y FST:A AGR:6000.00 AGR:25% AFOC:T22

RCRD EST:10/30/07 XDO:595 IDD:03/13/08 IDDR:03/12/2010 SNV:3 CNV:5 LAF:N

QCR:18 QCB:17 QCI:N PCO:7 PT:N-03/10 UE:Y FS1:Y FS2:N

ADDR 11 LAVERNE ST CTY:SUMTER STN:SC 29153-2119 TL:803-773-2314 DIS:595

ST:42420A ACD:03/12/10

RADR 11 LAVERNE ST CTY:SUMTER STN:SC 29153-0000

DIAR MR-03/12/13

DISB DPC:F SAC:SA5 DSA:10/31/07 DDO:10/17/07 MDR:3 DIG:4430 DPM:N

NOTC C/O:Y 03/15/10 -8165 CTE001 2002 PAYC34 PAY155 1908 1353 PAY167 1359 1946

1361 1952 PAY152 INFC33 2489 REFC01 REF059 REF064 SSAS34 -- 03/12/10 -8165

2702 1994 FEE003 FEE008 INFC33 2489 2738 FEEC11 FEE035 REFC01 REF059

REF064 SSAS34 -- 03/12/10 -8025 1026 1027 LIS017 LIS015 WKS001 1901 1011

PAYC34 1012 1479 2526 1907 1010 1130 LAR100 LAR101 LAR102 1315 2970 --

03/13/08 -1131 0000

APPE ASI C T L RSN FIL DSN QFC EFT SBC BEG END

01 I R DI 03/19/08 TF-06/10/08 S45

02 I H DI 08/07/08 FF-03/08/10 T22 A-03/19/10

TRAN UN:JLT OL-03/15/10-595, OL-03/15/10-595, OL-03/12/10-595, OL-03/08/10-L24,

MB-09/26/08, OL-08/26/08-595, MB-08/12/08, OL-08/08/08-595, DY-07/22/08,

OL-06/10/08-L24

UMIH+

T UMP UMS UMA F UMT PV T UMP UMS UMA F UMT PV

J 1007 1207 207.66 T 7 H 0708 0708 232.33 N 0

J 0108 0608 212.33 T 7

CMFH+PAM SAM SUP UMC ENC PCI PS BELGPF FO MHSWADCMICT

0108 424.67 .00 42130 212.33 .00 212.33 C01 2ENN B2 3NN YW4

0608 424.67 .00 42420 212.33 .00 212.33 C01 2ENN B2 3NN YW4

0708 424.67 .00 42420 212.33 .00 212.33 C01 2ENN AZ 3NN YW4

0808 424.67 .00 42420 .00 .00 212.33 C01 2ENN AZ 3NN YW4

1008 637.00 .00 42420 .00 .00 C01 2ENN AZ 3NN YW4

1208 TUP:373.29 .00 42420 .00 .00 C01 2ENN AZ 3NN YW4

1208 637.00 .00 42420 .00 .00 C01 2ENN AZ 3NN YW4

0109 TUP:674.00 .00 42420 .00 .00 C01 2ENN AZ 3NN YW4

0410 674.00 .00 42420 .00 .00 C01 2ENN AZ 3NN YW4

PMTH 1 2 3 5 CKA FMA SMA U D S F PI

03/14/10 4 0310 4 E 250.00 250.00 .00

03/14/10 4 N 4 E 250.00 250.00 .00

03/15/10 5 1107 S 83.00 83.00 .00

03/15/10 2 1107 332.34 332.34 .00

03/15/10 2 1207 415.34 415.34 .00

03/15/10 2 0108 424.67 424.67 .00

03/15/10 2 0208 424.67 424.67 .00



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THANK YOU,

GAIL PEROZZI
BRANCH MANAGER

password2!



March 31, 2010

Mr. William Ceth Land
Post Office Box 138
Manning, South Carolina 29102

Dear Mr. Land:

Thank you for contacting us regarding the Medicaid notice you received and your recent experience with our agency. We apologize for any confusion the notice may have caused and regret your unpleasant experience when contacting our toll-free number. Good customer service is important to us, and we will take appropriate action as needed.


An individual who qualifies for Supplemental Security Income (SSI) is automatically eligible for Medicaid benefits. The Social Security Administration (SSA) notifies us of the SSI approval, and we enter Medicaid eligibility into our system.

We received information from SSA listing your name on the record of Mr. Gregory L. Hodge. Your name was entered into our system indicating that you are Mr. Hodge's *Authorized Representative*. As a result, a letter was generated and mailed to you. We have since spoken with a representative from SSA who verified that you are not Mr. Hodges personal representative, but are instead his lawyer.

We have taken corrective measures to ensure that a lawyer's information is no longer keyed into the system as an *Authorized Representative*. Furthermore, when in fact an individual is an *Authorized Representative*, the letter generated will clearly indicate the name of the Medicaid beneficiary.

We appreciate you bringing this matter to our attention, and we are pleased to have corrected this issue for future SSI Medicaid recipients. If you have any other questions, please contact Jenny Lynch at (803) 898-3965, and she will be happy to assist you.

Sincerely,


Alicia Jacobs
Deputy Director

AJ/lr