

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

Relogged from Myers to Singleton per Myers on 4/11/08
 TO Relog to Singleton DATE Due date changed to 4/25/08
 Singleleaf-FOIA 4-8-08

DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER 000523	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____ <input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE 4-25-08 <input type="checkbox"/> Necessary Action		
2. DATE SIGNED BY DIRECTOR CC: Stensland I don't think we can do this can we - they are asking for subcontracting info.			

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1. Cleared 4/8/08, better attack.			
2.			
3.			
4.			

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Myers/FOTA</i>	DATE <i>4-8-08</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000523</i>	<input type="checkbox"/> I Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>CC: Singleton, Stensland</i>	<input checked="" type="checkbox"/> I Prepare reply for appropriate signature DATE DUE _____
	<input checked="" type="checkbox"/> FOIA DATE DUE <i>4-22-08</i>
	<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.			

Anderson Area Cancer Center

Oncology – Hematology Clinic, P.A.

2000 E. Greenville Street, Suite 5000
Anderson, South Carolina 29621
Ph. (864) 224-5765 / Fax (864) 224-1449

Board Certified
Medical Oncology & Internal Medicine
Rajeev Malik, M.D., FACP
Sarbokus G. Batizy, M.D.
John E. Doster, M.D.
Nandkishore Parthuri, M.D.

April 4, 2008

RECEIVED

APR 08 2008

Freedom of Information Act
Medicaid Managed Care Program
P.O. Box 8206
Columbia, SC 29202

Department of Health & Human Services
OFFICE OF THE DIRECTOR

To Whom It May Concern:

Please send me a list of the Medicaid Managed Care Plans in South Carolina and their rate of reimbursement to physicians and facilities.

Thank you,



Charlyene Harmon
Contract Manager

Phone: (864) 716-6862
Fax: (864) 716-6550
Email: charmon@charterinternet.com



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

TO:

FROM:

SUBJECT: Cost of Processing FOIA Request #

The South Carolina Department of Health and Human Services has received and processed your FOIA request. The cost for processing this information is as follows:

Staff processing time at \$10.00 per hour	_____ Hours	\$ _____
Pages copied at \$.10 per page	_____ Pages	\$ _____
Pages faxed at \$.20 per page	_____ Pages	\$ _____
Shipping and Handling Costs		\$ _____
Other costs associated with the FOIA request:	_____	\$ _____

Total Amount Due SCDHHS:

\$ _____

Please remit the above amount to the following address:

Bureau of Fiscal Affairs
South Carolina Department of Health and Human Services
Post Office Box 8297
Columbia, South Carolina 29202-8297

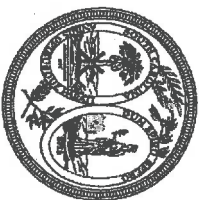
Please contact _____ should you have any questions.

Signature _____

Date: _____

Finance and Administration
P. O. Box 8206 Columbia South Carolina 29202-8206
(803) 898-2503 Fax (803) 255-8235

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State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

April 18, 2008

Ms. Charlyene Harmon
Anderson Area Cancer Center
200 E. Greenville Street, Suite 5000
Anderson, South Carolina 29621

Re: Freedom of Information Act Request

Dear Ms. Harmon:

This is in response to your Freedom of Information Act (FOIA) request dated April 4, 2008, and received by the Department of Health and Human Services (DHHS) on April 8, 2008. Specifically, you requested "a list of the Medicaid Managed Care Plans in South Carolina and their rate of reimbursement to physicians and facilities." The Medicaid Managed Care Plans currently participating in South Carolina are:

<u>Managed Care Organizations</u>	<u>Medical Home Networks</u>
AMERIGROUP Community Care	South Carolina Solutions
of South Carolina	
BlueChoice HealthPlan of South Carolina	
Carolina Crescent Health Plan, Inc.	
Select Health of South Carolina	
Total Carolina Care Inc.	
Unison Health Plan of South Carolina	
Wellpath of South Carolina	

The provisions of S.C. Code §30-4-40 protect trade secrets from public disclosure. "Trade secret" is a term that includes "materials which contain references to potential customers, competitive information or evaluation." S.C. Code §30-4-40(a)(1) The "rate of reimbursement to physicians and facilities" is competitive information, the disclosure of which to third parties could seriously jeopardize the networks of the Managed Care Plans. Therefore, we have not included this information.

Ms. Charlyene Harmon

April 18, 2008

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If you have any questions regarding this matter, you may contact me at (803) 898-2795.

Sincerely,

A handwritten signature in black ink, appearing to read "Byron R. Roberts". The signature is fluid and cursive, with the first name "Byron" being more prominent.

Byron R. Roberts
Assistant General Counsel

BRR/b