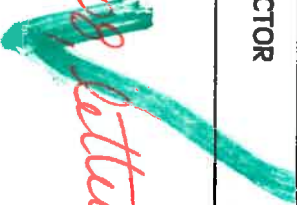


DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Singleton</i>	DATE  <i>10-31-08</i>
------------------------	-----------------------------

DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER  <i>000240</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____		
2. DATE SIGNED BY DIRECTOR  <i>cc: Stenland</i> <i>Cleared 11/12/08 letter attached.</i> 	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE <i>11-17-08</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.			

**INPUT®**

*Log, Singleton  
cc: Steensland*

11720 Plaza America Drive, 12<sup>th</sup> Floor

Reston, VA 20190

Tel: (703) 707-3500

Fax: (703) 707-6201

www.input.com

**RECEIVED**

OCT 31 2008

October 22, 2008

Office of Public Information,  
Department of Health and Human Services  
P.O. Box 8206  
Columbia, SC 29202

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Public Request ID # 16367

Dear Public Records Officer,

Pursuant to the state open records law, S.C. Code Ann. sec. 30-4-10 to 30-4-165, I am requesting clearly releasable portions of the documents regarding all contracts awarded to **Blue Cross Blue Shield** under the **MMIS** requirement. Specifically, I am requesting copies of the following information/documents:

- Awarded contract (contract and amendments between State and Blue Cross Blue Shield for the contract that began in 2000)

**Whenever possible, please refer to our PUBLIC RECORDS ID # 16367 in any response letter, email, fax, or invoice.**

If possible, I would prefer to receive the documents in electronic format. If not, hard copies of responsive documents will suffice.

**I agree to pay any reasonable copying and postage fees of not more than \$100. If the cost would be greater than this amount, please notify me. Please provide a receipt indicating the charges for each document.**

As provided by the open records law, I would request your response within fifteen (15) working days.

If you choose to deny this request, please provide a written explanation for the denial including a reference to the specific statutory exemption(s) upon which you rely. Also, please provide all segregable portions of otherwise exempt material.

If your agency does not maintain these public records, please let me know who does and include the proper custodian's name and address.

Thank you for your assistance,

*M Jones*

Monica Jones  
mjones@input.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: \_\_\_\_\_



*State of South Carolina*  
*Department of Health and Human Services*

Mark Sanford  
Governor

November 12, 2008

Emma Forkner  
Director

Ms. Monica Jones  
Input  
11720 Plaza America Drive, 12<sup>th</sup> Floor  
Reston, VA 20190

RE: Freedom of Information Act Request  
Public Records ID #16367

Dear Ms. Jones:

This is in response to your letter to the South Carolina Department of Health and Human Services (SCDHHS) dated October 22, 2008 and received on October 31, 2008, requesting copies of the contract and any amendments between SCDHHS and Blue Cross Blue Shield that were effective in 2000 regarding MMIS. The contract with Blue Cross Blue Shield was procured through the Information Technology Management Office (ITMO) of the South Carolina Budget and Control Board. By copy of this letter, I am forwarding your request for information to the following address:

Mike Spicer  
Information Technology Management Office  
4430 Broad River Road  
Columbia, SC 29210

If I can be of further assistance regarding this matter, please let me know.

Sincerely,

*Deirdra T. Singleton*  
Deirdra T. Singleton  
General Counsel

DTS/bb

cc: Mike Spicer, Information Technology Management Office

Office of General Counsel  
P. O. Box 8206 Columbia South Carolina 29202-8206  
(803) 898-2795 Fax (803) 255-8210

Log #000340