

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

**ACTION REFERRAL**

TO <u>Jacobs</u>	DATE <u>2-23-09</u>
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<b>DIRECTOR'S USE ONLY</b>	<b>ACTION REQUESTED</b>
1. LOG NUMBER <u>100461</u>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <u>Cleared 3/5/09, letter attached.</u>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <u>3-4-09</u>
	<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.			

*Oaktree Medical Centre, P.C.*  
*3505 Pelham Road, Suite A*  
*Greenville, SC 29615*  
*Phone: (864) 288-8878 Fax: (864) 288-8103*

**RECEIVED**

FEB 23 2009

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

PatientID: 501152NR  
Patient Name: NAHLA RAFKA  
Date of Birth: 01/01/1965

RE: Nahla Rafka  
DOB: 01/01/1965  
PATIENT'S HOME PHONE: (864) 801-1006  
PATIENT'S WORK PHONE:

Dr. Mason Burton  
S.C. Department of Health and Human Services  
P.O. Box 8206  
Columbia, S.C. 29202

RE: Nahla Rafka  
I.D. # 40692572  
SS # 239-61-3062  
DOB 01/01/1965

Dr. Cordas is scheduled to perform surgery on Ms. Rafka 3/2/09. Proposed surgery, right shoulder arthroscopy code 29806, shoulder manipulation under anesthesia code 29825, distal clavicle resection code 29824, and subacromial resection code 29826. The surgery is to take place at Greer Memorial Hospital, Greer, S.C.

Her treatment will be surgery, post-operative care with Dr. Cordas, and post-operative Physical Therapy at a Medicaid contracted facility. The time frame for this is approximately three months which would take care through June 3, 2009.

It is my understanding that Ms. Rafka's First Choice Medicaid coverage ends Feb, 28, 2009. Hence I am requesting that you extend her coverage through 6/3/09 in order for Ms. Rafka to have this medically necessary Surgery, Physical Therapy, and post-operative care

If you require any further information, please do not hesitate to contact me.

I would appreciate your attention to this matter as I feel that the patient's health would be damaged by not performing this surgery.

Sincerely,

**DANIEL CORDAS, MD,**



Log # 0461  
✓

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

Mark Sanford  
Governor

Emma Forkner  
Director

March 5, 2009

Oaktree Medical Centre, P.C.  
Daniel Cordas, M.D.  
3505 Pelham Road, Suite A  
Greenville, South Carolina 29615

Dear Dr. Cordas:

Thank you for contacting our agency on behalf of Mrs. Nahla Ratfah concerning Medicaid eligibility and her healthcare needs.

Unfortunately, we are unable to extend Mrs. Ratfah's Medicaid coverage past March 1, 2009 due to her medical needs alone. To qualify for Medicaid, an individual must meet certain state and federal financial guidelines and categorical requirements. We have been in direct contact with Mrs. Ratfah to assist with her questions about Medicaid eligibility.

We appreciate you bringing your concerns regarding Mrs. Ratfah's medical needs to our attention. If we may be of assistance in the future, please let us know.

Sincerely,

  
Alicia Jacobs  
Deputy Director

AJ/cl

c: Mrs. Nahla Ratfah



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

Mark Sanford  
Governor

Emma Forkner  
Director

March 5, 2009

Ms. Nalah Ratfah  
238 Sheffield Road  
Greer, South Carolina 29651

Dear Ms. Ratfah:

Dr. Daniel Cordas contacted our agency on your behalf concerning Medicaid eligibility and your healthcare needs.

Your Medicaid coverage under the Transitional Medicaid (TM) program ended March 1, 2009. The TM program provides Medicaid coverage only for a short time. You are no longer eligible under this program.

Your recent Medicaid application under the LIF program was denied on February 27, 2009 because your monthly income exceeded the allowable limit. Income is based on gross earnings and does not allow deductions for taxes, utilities, car payments or other living expenses.

Fortunately, Hazar and Manar were found eligible through South Carolina's State Children's Health Insurance Program (SCHIP), Healthy Connections Kids (HCK). Children eligible for HCK must be enrolled into a managed care health plan before coverage may begin; therefore, their eligibility is effective April 1, 2009. You will receive information shortly regarding the health plan in which they are enrolled.

Enclosed is information on other programs and organizations that can assist residents in South Carolina with their healthcare needs, prescriptions and inpatient hospitalization. If you have further questions about the Medicaid program, please contact Jennifer Lynch at (803) 898-3965.

Sincerely,

A handwritten signature in cursive script that reads "Alicia Jacobs".

Alicia Jacobs  
Deputy Director

AJ/cl  
Enclosures