

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
Roberts/Liggett/FOIA	3-9-15

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 008202	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR CC: Brooks Mullins Closed 3/25/15, letter attached	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input checked="" type="checkbox"/> FOIA DATE DUE 3-23-15
	<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.			

Brenda James

From: Annie McCanne
Sent: Monday, March 09, 2015 2:37 PM
To: Brenda James
Cc: Marie Brown
Subject: FW: FOIA Request

RECEIVED

MAR 09 2015

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Please log. Thanks!

Annie McCanne
Administrative Coordinator
MCCANNE@scdhhs.gov

803.898.0178

1801 Main Street

Columbia, South Carolina - 29201

www.scdhhs.gov



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From: Sarah Wagner [mailto:swagner@wyche.com]
Sent: Monday, March 09, 2015 2:34 PM
To: Annie McCanne
Cc: Matthew T. Richardson; Jonathan Cote; Evan Gessner
Subject: FOIA Request

To Whom it May Concern:

Pursuant to the Freedom of Information Act, S.C. Code § 30-4-10 et. seq., I am requesting an opportunity to inspect and obtain a copy of the following:

- 1) All documents and information of all trainings held by DHHS since 2011 related to accreditation of rehabilitative behavioral health services ("RBHS") providers, including but not limited to the May 2014 training, and including all recordings by any means, materials, notes, and participants and other information from that and any other training regarding accreditation issues for RBHS providers;
- 2) Any notices sent to unaccredited RBHS providers warning them of the accreditation requirement and the possibility of termination for failure to comply, including any notices sent on or about November 25, 2014;
- 3) All communications by DHHS with Continuum of Care or other agencies or providers regarding the termination related to accreditation of RBHS providers; and
- 4) All communications and information since July 1, 2012 related to accreditation of RBHS providers with other agencies and providers and parents and guardians, except for those communications which constitute medical records within the meaning of S.C. Code §30-4-20(c) or information of a personal nature within the meaning of S.C. Code § 30-4-40(a)(2).

I presume you have these documents readily available, but if access to the records I am requesting will take more than a week to gather and copy or scan, please contact me with information about when I might expect copies or the ability to inspect the requested records.

We agree to pay for search, review and copying of any documents you have regarding this request. If you find the costs will exceed \$200.00, please contact us before proceeding.

Please feel free to e-mail the requested records to me at my e-mail address below if that is most convenient. Do not hesitate to call me to discuss.

Most respectfully,

Matthew Richardson
mrichardson@wyche.com



Sarah Wagner | Wyche

Legal Assistant

801 Gervais St, Suite B | Columbia, SC 29201

Phone: (803) 254-6542 | Fax: (803) 254-6544

swagner@wyche.com | www.wyche.com | [vCard](#)

This e-mail may contain privileged or confidential information.
If the e-mail was not intended for you, please:
(i) delete the e-mails and any attachments
(ii) destroy any copies that may have been made
(iii) do not use, copy or distribute the contents in any form
(iv) notify the sender by return e-mail or by calling 864-242-8200.
No privilege is waived by inadvertent transmission.
Thank you.

Nikki Haley GOVERNOR

Christian L. Saura DIRECTOR

P.O. Box 8206 Columbia, SC 29202

www.scdhhs.gov

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:

Nikki R. Haley, GOVERNOR
Christian L. Soura, DEPUTY GOVERNOR
P.O. Box 8206 Columbia, SC 29202
www.scdhhs.gov

March 25, 2015

Matthew Richardson
Wyche Law Firm
801 Gervais St, Suite B
Columbia, SC 29201

Dear Mr. Richardson:

Your Freedom of Information Act was referred to me for processing. You requested a copy of the following:

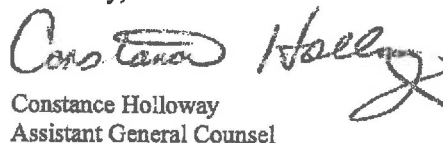
1. All documents and information of all trainings held by DHHS since 2011 related to accreditation of rehabilitative behavioral health services ("RBHS") providers, including but not limited to the May 2014 training, and including all recordings by any means, materials, notes, and participants and other information from that and any other training regarding accreditation issues for RBHS providers.
 - See Attachment A
2. Any notices sent to unaccredited RBHS providers warning them of the accreditation requirement and the possibility of termination for failure to comply, including any notices sent on or about November 25, 2014.
 - See Attachment B
3. All communications by DHHS with Continuum of Care or other agencies or providers regarding the termination related to accreditation of RBHS providers.
 - No responsive documents
4. All communications and information since July 1, 2012 related to accreditation of RBHS providers with other agencies and providers and parents and guardians, except for those communications which constitute medical records within the meaning of S.C. Code §30-4-20(c) or information of a personal nature within the meaning of S.C. Code § 30-4-40(a)(2).
 - See Attachment C

Our expense for extracting this information is Fifty Eight Dollars and 70/100 dollars (\$58.70). Please make the check payable to the Department of Health and Human Services and send it to:

Department of Health and Human Services
Department of Receivables
Post Office Box 8297
Columbia, SC 29202-8297

Thank you for your request. If you have any questions, please feel free to contact me at (803)-898-0062.

Sincerely,


Constance Holloway
Assistant General Counsel

Nikki R. Haley GOVERNOR
Christian L. Sours DIRECTOR
P.O. Box 8206 Columbia, SC 29202
www.scdhhs.gov

March 25, 2015

TO: Matthew Richardson
FROM: Constance D. Holloway
Assistant General Counsel
SUBJECT: Cost of Processing FOIA Request # 202

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	<u>2</u> Hours	\$ <u>20.00</u>
Pages copied at \$.10 per page	<u>267</u> Pages	\$ <u>26.70</u>
Pages faxed at \$.20 per page	<u> </u> Pages	\$ <u> </u>
Shipping and Handling Costs		\$ <u>12.00</u>
Other costs associated with the FOIA request:	<u> </u>	\$ <u> </u>
Total Amount Due SCDHHS:		\$58.70

Please remit the above amount to the following address:

Department of Health and Human Services
Department of Receivables
Post Office Box 8297
Columbia, SC 29202-8297

Signature

Date