

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Jacobs</i>	DATE <i>10-11-07</i>
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DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER <i>000193</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____		
2. DATE SIGNED BY DIRECTOR <i>CC: Single for cleaned 10/23/07, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>10-22-07</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.	<i>—</i>		
3.			
4.			

Lynn Lawandales Crooks
1025 Riverland Woods Place, Unit 909
Charleston, SC 29412
(843)345-9376

RECEIVED

OCT 11 2007

Department of Health & Human Services
OFFICE OF THE DIRECTOR

October 10, 2007

Berkeley County DHHS
P.O. Box 13748
Charleston, SC 29422-0000
Attn: Allison Nickell

Re: Geneva C. Crooks-Recipient ID: 8780103932
Appeal letter dated July 10, 2007

Log: Jacobs
C: Singleton
app. sign

Dear Ms. Nickell:

I submitted an appeal of the denial of Medicaid benefits for Geneva C. Crooks three (3) months ago and have not had the courtesy of a response. A copy of my letter of July 10, 2007 with attachments is enclosed herewith.

Mrs. Crooks has exhausted all life insurance policies even though she and I were both were told by two different case workers on two separate occasions that life insurance policies with a face value of less than \$10,000 do not have to be cashed in for her to be eligible under the Resource regulations for Medicaid assisted living. Mrs. Crooks is currently residing in an assisted living facility known as Carter-May Home as she can no longer live on her own or otherwise take care of herself. The cost of the assisted living facility exceeds her income from social security and retirement. In addition to the expense of the assisted living facility, she is paying a premium each month in the amount in excess of \$200 for supplemental health insurance coverage through Blue Cross and Blue Shield.

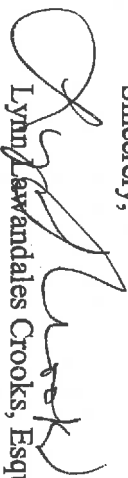
Mrs. Crooks has worked all of her adult life with the exception of those years that she spent raising her only child after her husband suddenly died in 1957. She has not been a burden on the state and, in fact, has contributed to the state's funds during her working years. Her current income meets the requirements set forth in Section 103.10.

Mrs. Crooks and I have been extremely patient with this process that was started in February of this year. However, an appeal should have been forthcoming months ago. On behalf of Mrs. Crooks, I respectfully request that this matter be addressed immediately.

If you need supporting documentation to confirm that the life insurance funds were applied toward Mrs. Crooks' living expenses, please advise at once. However, in light of the failure of the department to hear Mrs. Crooks' appeal and the dire financial

circumstances that now face Mrs. Crooks in remaining in assisted living, I expect to have an expedited review of this case.

Sincerely,

A handwritten signature in dark ink, appearing to read "Lynne Swandaes Crooks". The signature is fluid and cursive, with the first name "Lynne" being more prominent.

Lynne Swandaes Crooks, Esquire

LLC/

cc: Ms. Alicia Jacobs, Deputy Director

Ms. Deirdre Singleton, General Counsel

Lynn Lawandales Crooks
1025 Riverland Woods Place, Unit 909
Charleston, SC 29412
(843)345-9376

July 10, 2007

Berkeley County DHHS
P.O. Box 13748
Charleston, SC 29422-0000
Attn: Allison Nickell

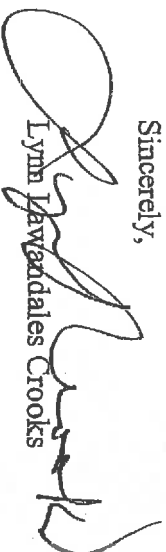
Re: Geneva C. Crooks-Recipient ID: 8780103932

Dear Ms. Nickell:

Please consider this an appeal of the denial of Medicaid benefits for Geneva C. Crooks. A copy of the denial letter is attached. The appeal is based on evidence that Mrs. Crooks' income meets the eligibility requirements. Please let me know the date of the hearing so that I may attend on behalf of Mrs. Crooks.

Thank you.

Sincerely,



Lynn Lawandales Crooks

Medicaid Letter of Action

From: BERKELEY COUNTY DHHS
P. O. Box 13748
Charleston SC 29422-0000

Date: 06/26/2007
Worker Name:

ALLISON NICKELL

To: LYNN CROOKS
1025 RIVERLAND WOODS PLACE #909
CHARLESTON SC 29412

Telephone: 843 740-5932
BG #: 09638310
HH #: 100972414

08 AAUST

Recipient Name:

GENEVA C CROOKS

Recipient ID:

8780103932

Your application has been denied for: **OPTIONAL SUPPLEMENT**

Reason for denial:

Your countable resources are more than policy allows.

Denied for the month(s) of: 05/2007

Manual/policy reference supporting this action: 402.02

X You may ask for a fair hearing before the Department of Health and Human Services if you believe an error was made in processing your application.

To Request A Hearing from the Department of Health and Human Services:

- Ask your Medicaid worker in writing within 30 days of this letter. Attach a copy of this letter to your request.

To Get Help with Your Hearing

- You may hire an attorney to help you
- You may have someone you know come to the hearing and speak for you
- Contact your Medicaid worker in person or by phone to get help in asking for a hearing

Lynn Lawndale Crooks
1025 Riverland Woods Place, Unit 909
Charleston, SC 29412

Ms. Alicia Jacobs
Deputy Director
Department of Health & Human Services
P.O. Box 8206
Columbia, SC 29202

29202#8206 7044



017H15512454
HASLER
\$0.410
10/10/2007
Mailed From 29401
US POSTAGE

2.499

100 0193



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

October 23, 2007

Ms. Lynn Crooks
1025 Riverland Woods Place #909
Charleston, South Carolina 29412

Dear Ms. Crooks:

Thank you for writing our agency on behalf of your mother in law, Ms. Geneva C. Crooks, in regards to her Medicaid appeal.

The initial request appealing the Medicaid denial for Ms. Crooks was received July 11, 2007, and our records indicate it was later withdrawn, per your request. The Charleston County DHHS office received written notice October 17, 2007, indicating that you no longer want to pursue an appeal for Ms. Crooks and instead want to proceed with determining current eligibility.

Therefore, we are currently processing Ms. Crook's application to determine her eligibility under the Optional State Supplementation (OSS) program. The OSS program is for individuals who are aged, blind or disabled and reside in a community residential care facility. Ms. JoAnn Kearse has been in contact with you and will do all possible to expedite Ms. Crooks' eligibility determination. Ms. Kearse is the Adult Medicaid Processing Supervisor for the Charleston DHHS Office; if you have any further questions please contact her at (843) 740-5925.

We apologize for any inconvenience this process may have caused you and your family. If you have additional questions about the Medicaid program please contact Sheila Chavis at (803) 898-2707 or (toll free) 1-888-549-0820 Ext. 2707. We hope this information proves helpful.

Sincerely,

Alicia Jacobs
Alicia Jacobs
Interim Deputy Director

AJ/code

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

ACTION REFERRAL

TO <i>Jacobs</i>	DATE <i>10-11-07</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
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2. DATE SIGNED BY DIRECTOR <i>CC: Singleton</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>10-22-07</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. <i>Steven Canby</i>	<i>10/19/07</i>		
2.			
3.			
4.			

Lynn Lawandaes Crooks
1025 Riverland Woods Place, Unit 909
Charleston, SC 29412
(843)345-9376

RECEIVED

OCT 11 2007

October 10, 2007

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Berkeley County DHHS
P.O. Box 13748
Charleston, SC 29422-0000
Attn: Allison Nickell

Re: Geneva C. Crooks-Recipient ID: 8780103932
Appeal letter dated July 10, 2007

*Log: Jacobs
C: Singleton
app. sign*

Dear Ms. Nickell:

I submitted an appeal of the denial of Medicaid benefits for Geneva C. Crooks three (3) months ago and have not had the courtesy of a response. A copy of my letter of July 10, 2007 with attachments is enclosed herewith.

Mrs. Crooks has exhausted all life insurance policies even though she and I were both were told by two different case workers on two separate occasions that life insurance policies with a face value of less than \$10,000 do not have to be cashed in for her to be eligible under the Resource regulations for Medicaid assisted living. Mrs. Crooks is currently residing in an assisted living facility known as Carter-May Home as she can no longer live on her own or otherwise take care of herself. The cost of the assisted living facility exceeds her income from social security and retirement. In addition to the expense of the assisted living facility, she is paying a premium each month in the amount in excess of \$200 for supplemental health insurance coverage through Blue Cross and Blue Shield.

Mrs. Crooks has worked all of her adult life with the exception of those years that she spent raising her only child after her husband suddenly died in 1957. She has not been a burden on the state and, in fact, has contributed to the state's funds during her working years. Her current income meets the requirements set forth in Section 103.10.

Mrs. Crooks and I have been extremely patient with this process that was started in February of this year. However, an appeal should have been forthcoming months ago. On behalf of Mrs. Crooks, I respectfully request that this matter be addressed immediately.

If you need supporting documentation to confirm that the life insurance funds were applied toward Mrs. Crooks' living expenses, please advise at once. However, in light of the failure of the department to hear Mrs. Crooks' appeal and the dire financial

circumstances that now face Mrs. Crooks in remaining in assisted living, I expect to have an expedited review of this case.

Sincerely,


Lynn Awandales Crooks, Esquire

LLC/

cc:

Ms. Alicia Jacobs, Deputy Director
Ms. Deirdre Singleton, General Counsel

Lynn Lavandales Crooks
1025 Riverland Woods Place, Unit 909
Charleston, SC 29412
(843)345-9376

July 10, 2007

Berkeley County DHHS
P.O. Box 13748
Charleston, SC 29422-0000
Attn: Allison Nickell

Re: Geneva C. Crooks-Recipient ID: 8780103932

Dear Ms. Nickell:

Please consider this an appeal of the denial of Medicaid benefits for Geneva C. Crooks. A copy of the denial letter is attached. The appeal is based on evidence that Mrs. Crooks' income meets the eligibility requirements. Please let me know the date of the hearing so that I may attend on behalf of Mrs. Crooks.

Thank you.

Sincerely,


Lynn Lavandales Crooks

Medicaid Letter of Action

From: BERKELEY COUNTY DHHS

P. O. Box 13748

Charleston SC 29422-0000

Date: 06/26/2007

Worker Name:

ALLISON NICKELL

Telephone: 843 740-5932

BG #: 09638310

HH #: 100972414

To: LYNN CROOKS

1025 RIVERLAND WOODS PLACE #909

CHARLESTON SC 29412

08 AAUST

Recipient Name:

GENEVA C CROOKS

Recipient ID:

8780103932

Your application has been denied for: OPTIONAL SUPPLEMENT

Reason for denial:

Your countable resources are more than policy allows.

Denied for the month(s) of: 05/2007

Manual/policy reference supporting this action: 402.02

X You may ask for a fair hearing before the Department of Health and Human Services if you believe an error was made in processing your application.

To Request A Hearing from the Department of Health and Human Services:

- Ask your Medicaid worker in writing within 30 days of this letter. Attach a copy of this letter to your request.

To Get Help with Your Hearing

- You may hire an attorney to help you
- You may have someone you know come to the hearing and speak for you
- Contact your Medicaid worker in person or by phone to get help in asking for a hearing

EDIT



Constituent ID

1064

Closed? ☐

Date Closed

SSN 251-12-0511

MEDICAID ID 8780103932

First Name

MI

Last Name

Geneva

C

Crooks

Constituent Phone(s) (843) 345-9376

Constituent Phone Extension

Authorized Rep

Lynn Crooks

Rep Phone

(843) 345-9376

Relationship

Legislator/ Other

Source

Blue Log

Log No.

0193

Due Date

10/22/2007

HIPAA Authorization

Reason for Referral

Medical Appeal

Staff ID

Staff First Name

Staff Last Name

7

Sheila

Crooks

Point of Contact

Entry Date

10/12/2007

Last Update

10/16/2007

Last Update User

LYNCHJEN

Apply

Cancel

Close

Constituent# 1064

Notes ID	Entry Date	Last Update	Notes
1955	10/19/2007	10/19/2007	To Garnell for review. LYNCHJEN 10/19/2007 11:10:14 AM
1954	10/19/2007	10/19/2007	10/19/07-- Edits made to letter and given back to Jennifer CHAVISS 10/19/2007 10:57:18 AM
1953	10/19/2007	10/19/2007	10/19/07-- Edits made to letter and given to Jennifer Dabbs for review CHAVISS 10/19/2007 10:57:01 AM
1952	10/19/2007	10/19/2007	10/19/07-- Blue Log letter returned from Bob Liming with edits. CHAVISS 10/19/2007 10:56:46 AM
1951	10/19/2007	10/19/2007	10/19/07-- Blue Log Letter given to Bob Liming for Review

Division of Constituent Services

Case Tracking Information

Chronology:

Client Name: Geneva C. Crooks **Constituent ID#:** 1064

10/12/07—Received Blue Log letter from Mark Of to handle this case.

10/15/07—T/C to Ms. Lynn Crooks (843) 345-9376 (AR for Geneva Crooks)—she stated that she is disappointed in the amount of time it has taken since they originally applied for Medicaid. She has not heard anything from the Appeals and Hearings Department about a hearing date. Ms. Lynn Crooks stated that they were told on two separate occasions that she was OK on resources then they later found out that Geneva was over the resource limit. Ms. Geneva Crooks had two life insurance policies but now all the funds have been exhausted. Ms. Geneva Crooks is currently residing in an Assisted Living Facility called Carter May Home; she has been here since February 2007. Ms. Lynn Crooks stated that if any additional information is needed to contact her and she would get this to us. Ms. Lynn Crooks has my name, direct line and the toll free number if she has any further questions or concerns.

10/15/07—Email sent to Vastine Crouch to get status of this appeal

10/15/07—Received email from Vastine Crouch stating that they do not have any record of an appeal for Geneva Crooks.

10/15/07—Email sent to Cheryl McWilliams to see if this appeal was sent to their office and if so what was the status on it.

10/16/07—Received email from Cheryl McWilliams who received email from JoAnn Kearse. JoAnn stated she looked at the case record and client was denied for being over the resources. The cash value on her life insurance policy put her over the resource limit. It appears the intake worker misinformed client/AR about the exclusion of the life insurance policy. And it appears the appeal was received on 7/11/07 and Allison had called and spoke to AR and at that point

the AR stated the appeal was not needed at that time. Ms. Kearse said she would contact the AR.

10/16/07—Sent email to JoAnn Kearse asking if she talked with AR: Lynn Crooks and if so what transpired.

10/16/07—Received email from JoAnn Kearse—she stated she just spoke with Ms. Crooks. She went through the time line of the case record with her. Ms. Crooks stated she was never told about being over the resources; however, the denial is “your countable resources are more than policy allows”. There is also telephone calls documented by Ms. Nickel where resources were discussed. Ms. Kearse stated the Fair Hearing request was received, however there is also telephone conversations documented that Ms. Crooks stated the appeal was not needed at that time. Ms. Kearse said in speaking with Ms. Crooks she has advised her that the life insurance policy has been cashed in. Ms. Crooks is going to fax verification of this immediately. Ms. Kearse explained to her as soon as she receives it she will complete the budget and send request to CLTC for slot authorization. Ms. Kearse told Ms. Crooks that Ms. Lee and her would begin the appeal process that she previously requested. Ms. Crooks stated that the appeal was not necessary as long as there was no further information needed of her. Ms. Kearse explained that because the resources have changed and the income limit has increased that she will only be financially eligible from this point forward, it would not address the past months. Ms. Kearse asked Ms. Crooks to fax her in writing a letter stating she does not wish to have a Fair Hearing. Per Cheryl McWilliams if they do not have the written request to not go through with the Fair Hearing by the end of the day then Ms. Kearse must proceed with the appeal process. Ms. Kearse explained to Ms. Crooks that for OSS they will not need to do a transfer for the cash value of the life insurance policy however further down the road should they need Nursing Home care again this will be looked at and verification of the disbursement of the money will be needed to determine possible sanctions.

10/17/07—Sent email to JoAnn Kearse asking if she received the letter from Ms. Crooks saying the appeal was no longer needed and if not what will transpire from this point.

10/17/07—Received email from JoAnn Kearse—She stated as of 4 PM yesterday she had not received any faxed information from Ms. Crooks. Ms. Kearse proceeded with the appeal process; it is written up and ready to be sent. Ms. Kearse stated she just got in the office and there is still no documentation from Ms. Crooks. Ms. Kearse called Mr. Crooks and asked had she faxed the information and she stated “No, not yet but she is going to scan and send through and email right now”. Ms. Kearse stated as soon as she receives the information she will let me know how they will handle the appeal.

10/17/07—Received email from JoAnn Kearse—She stated she just received an email with scanned attachments from Ms. Crooks. The email also states she wishes to withdraw her request for an appeal. Ms. Kearse is completing the OSS budget now and will forward the request for slot authorization to CLTC right away.

10/17/07—T/C to Ms. Lynn Crooks—She stated that after talking with JoAnn Kearse she would rather move forward with this case. Ms. Crooks stated that she did not want to re-apply for services because it has been a long process. She stated that JoAnn has received all the documentation needed for Ms. Geneva Crooks. I explained to her the steps that have to transpire from this point (retrieved from the Manual). I asked Ms. Lynn Crooks again if she no longer wanted the appeal and she said No. I asked what relationship was Geneva to her and she said Geneva is her mother in law. Ms. Geneva Crooks is able to talk and read but she does not comprehend very much. I explained that a letter would be mailed addressing the above issues. I told Ms. Crooks that if she has any other questions or concerns to contact me. She has my direct telephone number and the toll free number.

10/17/07—Staffed this case with Jennifer—She suggested contacting JoAnn Kearse to see how long the slot authorization would take and to see if Ms. Crooks was income and resource eligible for OSS. Jennifer stated that since Lynn Crooks handles all of Geneva's affairs we would send the letter addressed to her.

10/17/07—Sent email to JoAnn Kearse to find out if Ms. Crooks was income and resource eligible for OSS and how long it would take before she is approved for Medicaid.

10/18/07—Received email from JoAnn Kearse—she stated Ms. Crooks is financially eligible, at this time we are waiting on slot authorization from CLTC before OSS Medicaid can be completed.

10/18/07—Email sent to JoAnn Kearse asking if she knows how long it will take to get the slot authorization.

10/18/07—Received email from JoAnn Kearse—she said she does not know how long it will be. CLTC has to authorize the slot. She will send email to JoAnn Nesbitt to see if she can give a time frame.

10/18/07—Received email from JoAnn Kearse—she said Cindy Peek stated there is a day turn around.

10/19/07—Checked MEDS and Ms. Geneva Crooks OSS case is still pending.

10/19/07—Blue Log Letter given to Bob Liming for Review

10/19/07—Blue Log letter returned from Bob Liming with edits

10/19/07—Edits made to letter and given to Jennifer Dabbs for review

10/19/07—Letter returned from Jennifer with Edits; Edits made to letter and given back to Jennifer.

From: Vastine Crouch
To: Sheila Chavis
Date: 10/15/2007 2:05 PM
Subject: Re: Geneva C. Crooks RCP#8780103932

CC: George Burnett; Jennifer Dabbs
Apparently Ms. Lynn Crooks has decided to wake up and start asking questions, because I rec'd an inquiry regarding Ms. Geneva Crooks from General Counsel this morning. The response to both inquiries is the same, we have no record of an appeal for Geneva Crooks.
Has anyone thought to check with Berkeley?

>>> Sheila Chavis 10/15/2007 2:01 PM >>>
Vastine,

I spoke with Ms. Lynn Crooks, AR for Geneva Crooks, and she wants to know why she has not received any information about an appeal. This case was appealed because Ms. Crooks feels that Geneva Crooks is within the income eligibility limits for Medicaid. Ms. Crooks stated that if any other documentation is needed she would be glad to assist us. She mailed an appeals letter to the Berkeley County DHHS on July 10, 2007 attached with a copy of the Medicaid denial letter which was sent to Ms. Crooks June 26, 2007. Can you give me the status of this appeal? Thanks for your assistance in this matter.

Sheila Chavis
Div. of Constituent Services
(803) 898-2707

From: Sheila Chavis
To: Cheryl McWilliams
Date: 10/15/2007 2:45 PM
Subject: Geneva Crooks RCP#8780103932

CC: Jennifer Dabbs

Cheryl,
I received a letter from Ms. Lynn Crooks, AR for Geneva Crooks, wanting to know the status of her appeal. I checked with Vastine Crouch, Appeals and Hearings Division, and he stated they do not have this appeal. Ms. Lynn Crooks sent the appeal letter to Allison Nickell on July 10, 2007 along with a copy of the Medicaid Denial letter dated June 26, 2007. Ms. Lynn Crooks is appealing this decision because she feels Geneva Crooks is eligible for Medicaid based on her income. Could you please check this file and see if this appeals paperwork was sent to your office and what was done with it once it was received? Thanks for your assistance in this matter.

Sheila Chavis
Div. of Constituent Services
(803) 898-2707

From: Cheryl McWilliams
To: Sheila Chavis
Date: 10/16/2007 10:35 AM
Subject: Re: Fwd: Geneva Crooks RCP#8780103932
Attachments: Re: Fwd: Geneva Crooks RCP#8780103932

CC: Helen Thomas; Janise Wright; Jennifer Dabbs
Please see attached from Supervisor Joann Kearse.
Cheryl

From: JoAnn Kearse
To: Cheryl McWilliams
Date: 10/16/2007 10:01 AM
Subject: Re: Fwd: Geneva Crooks RCP#8780103932

CC: Janise Wright

I have looked at the case record and client was denied for being over the resources. The cash value on her life insurance policy put her over the resource limit. It appears the intake worker misinformed client/AR about the exclusion of the life insurance policy. And it also appears the appeal was received on 071107 and Allison had called and spoke to AR and at that point the AR stated the appeal was not needed at that time. I will contact AR.

JoAnn G. Kearse
Region 8 Medicaid Eligibility
Adult Medicaid Processing Supervisor
phone: 843-740-5925
fax: 843-740-5921

>>> Cheryl McWilliams 10/15/07 3:04 PM >>>

Joann;
Please see attached. Can you shed some light on this inquiry? Clara has the maintenance file, perhaps what you will need will be in her file.
Thanks

From: Sheila Chavis
To: JoAnn Kearse
Date: 10/16/2007 2:30 PM
Subject: Re: Fwd: Geneva Crooks RCP#8780103932

Did you talk with AR: Ms. Lynn Crooks? If so, can you tell me what transpired? Thanks

Sheila Chavis

>>> JoAnn Kearse 10/16/2007 10:01 AM >>>
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Thanks

From: JoAnn Kearse
To: Sheila Chavis
Date: 10/16/2007 2:47 PM
Subject: Re: Fwd: Geneva Crooks RCP#8780103932

CC: Cheryl McWilliams; Helen Thomas; Janise Wright
I have just spoken with Ms. Crooks. I went through the time line of the case record with her. She stated she was never told about being over the resources; however, the denial letter dated 06/26/07 states reason for denial is "your countable resources are more than policy allows". There is also telephone calls documented by Ms. Nickel where resources were discussed. Yes the fair hearing request was received, however there is also telephone conversations documented that Ms. Crooks stated the appeal was not needed at this time.

In speaking with Ms. Crooks today she has advised me that the life insurance policy has been cashed in. She is going to fax me verification of this immediately. I explained to her as soon as I receive it I will complete the budget and send request to CLTC for slot authorization. I also stated that Ms. Lee and I will begin the appeal process that she previously requested. Ms. Crooks stated that the appeal was not necessary as long as there was no further information needed of her. I explained that because the resources have changed and the income limit has increased that she will only be financially elig from this point forward, it would not address the past months. I then asked Ms. Crooks to fax me in writing a letter stating she does not wish to have a fair hearing. Per Cheryl McWilliams if we do not have the written request to not go through with the fair hearing by the end of the day then I must proceed with the appeal process. Please note that I explained to Ms. Crooks that for OSS we will not need to do a transfer for the cash value of the life insurance policy however further down the road should they need Nursing Home care again this will be looked at and verification of the disbursement of the money will be needed to determine possible sanctions.

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Adult Medicaid Processing Supervisor
phone: 843-740-5925
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From: Sheila Chavis
To: JoAnn Kearse
Date: 10/17/2007 9:04 AM
Subject: Re: Fwd: Geneva Crooks RCP#8780103932

CC:

Cheryl McWilliams; Helen Thomas; Janise Wright

Did you receive the letter from Ms. Crooks saying that the appeal was no longer needed? If not, what will transpire from this point? Thanks

Sheila Chavis

>>> JoAnn Kearse 10/16/2007 2:47 PM >>>

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>>> Cheryl McWilliams 10/15/07 3:04 PM >>>

Joann,
Please see attached. Can you shed some light on this inquiry? Clara has the maintenance file, perhaps what you will need will be in her file.
Thanks

From: JoAnn Kearsse
To: Sheila Chavis
Date: 10/17/2007 10:48 AM
Subject: Re: Fwd: Geneva Crooks RCP#8780103932

CC: Cheryl McWilliams; Helen Thomas

At 4pm yesterday I still had not received any faxed information from Ms. Crooks. I proceeded with the appeal process, it is wrote up and ready to send.

I have just gotten into the office and there still has been nothing faxed. I called Ms. Crooks and asked had she faxed the information and she stated, "No, not yet but she is going to scan and send through and email right now." As soon as I receive the information I will let you know how we are handling the appeal. As I stated previously the appeal is written and ready to send should she not fax the statement to discontinue her request. I will keep you informed.

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CC: Cheryl McWilliams; Helen Thomas
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JoAnn,
Did you find that Ms. Geneva Crooks was income and resource eligible for OSS?
Also do you know the how long it will be before she is approved for Medicaid?
Thanks for all your assistance in this matter.

Sheila Chavis

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To: Sheila Chavis
Date: 10/18/2007 9:24 AM
Subject: Re: Fwd: Geneva Crooks RCP#8780103932

CC: Cheryl McWilliams; Helen Thomas

No I am not certain how long that will be. CLTC has to authorize the slot. I can send an email to Joann Nesbitt and see if she can give us an idea.

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Do you know how long it will take to get the slot authorization?

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To: Sheila Chavis
Date: 10/18/2007 1:55 PM
Subject: Re: Fwd: Geneva Crooks RCP#8780103932

CC: Cheryl McWilliams; Helen Thomas
Cindy Peek stated there is a day turn around.

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MEDHMS04 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 10/12/07
 MEDSPROD PRIMARY INDIVIDUAL ACTION:

HH NAME: CROOKS GENEVA C ACTION TYPE: MAINTENANCE
 HH NUMBER: 100972414 APL STATUS: ACTION DATE: 05/23/07
 APL EFF DATE: 05/22/2007 WKR: CLSMA CARO L SMALLS WKR'S CNY: 10 CHARLESTON
 MAIL IN(Y/N): N APL SITE: SPNSR: _____
 APPLICANT'S CNY: 10 CHARLESTON
 COURTESY APPLICATION(Y/N): N PRIMARY LANGUAGE: E ENGLISH
 MAILING ADDRESS: REASON FOR APPLICATION:
 1025 RIVERLAND WOODS PLACE ADULT WITH CHILDREN(Y/N): N
 UNIT 909 CHILDREN 1 AND OVER(Y/N): N
 INFANTS UNDER AGE 1(Y/N): N

CHARLESTON SC 29412- PREGNANT(Y/N): N
 RESIDENCE ADDRESS: BLIND/DISABLED(Y/N): N
 NARTER MAY RCF AGED(Y/N): Y
 1660 INGRAM RD INMATE(Y/N):

CHARLESTON SC 29407- LIMITED DATA COLLECTION: 00 NONE
 PHONE: H: 843-345-9376 W: - FIRST SIGNATURE OBTAINED(Y/N): Y
 UPDATED: USER ID: CLSMA DATE: 05/23/07 SYSTEM ID: HMS5000 DATE: 05/23/07
 ME900049 HOUSEHOLD RECORD FOUND WITHDRAW APPLICATION(W/C/N): N

PF1->HELP PF3->NEXT SCR PF4->REFRESH PF6->RETURN PF9->HH NOTES
 PF10->PREV MENU PF13->FIELD LEVEL HELP PF21->HIST- PF22->HIST+

MEDHMS05 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 10/12/07
MEDSPROD AUTHORIZED REPRESENTATIVE ACTION:

HH NAME: CROOKS GENEVA C ACTION TYPE: MAINTENANCE
HH NUMBER: 100972414 APL STATUS: ACTION DATE: 05/23/07

AUTHORIZED REP/RESPONSIBLE PARTY MAILING ADDRESS:
NAME: LYNN CROOKS

ADDRESS: 1025 RIVERLAND WOODS PLACE #909
RELATIONSHIP: C7 INLAWSD - *Mother*
Daughter is law

LEGAL RELATIONSHIP:
CHARLESTON SC 29412- COMMITTEE/CONSERVATOR
HOME PHONE: 843-345-9376 GUARDIAN
WORK PHONE: - - X POWER OF ATTORNEY
E-MAIL: HOME=CELL-OK LYNN CROOKS

UPDATED: USER ID: CLSMA DATE: 05/23/07 SYSTEM ID: HMS5000 DATE: 05/23/07
ME900049 HOUSEHOLD RECORD FOUND

PF1->HELP PF3->NEXT SCR PF4->REFRESH PF6->RETURN PF10->PREV MENU
PF13->FIELD LEVEL HELP PF21->HIST- PF22->HIST+

MEDHMS06 P
MEDSPROD

S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES
HOUSEHOLD MEMBER DETAIL

DATE: 10/12/07
ACTION:

MEMBER PERIOD START: 05/22/07 END:

NAME: CROOKS GENEVA C

HH NAME: CROOKS GENEVA C

RCP NUMBER: 8780103932

HH NUMBER: 100972414

ACTION TYPE: MAINTENANCE

SSN: 251-12-0511

VC: V

APL STATUS:

ACTION DATE: 05/23/07

APPLYING(A/NA): A

DOB: 05/06/1919

AGE: 88

DOD:

SEX: F FEMALE

RACE: 01 WHITE

REL: SFI SELF

SSI APPLICATION DATE:

ALTERNATE RECIPIENT NUMBER:
SC RES(Y/N): Y QUESTIONABLE(Y/N): N
MEDICARE COVERAGE(Y/N): Y 251120511A
SS CLAIM NUMBER(Y/N): Y 251120511A
RAILROAD NUMBER(Y/N): N

MARITAL STATUS: W WIDOWED

LIV ARRANGEMENT: HOME HOME

STUDENT STATUS:

GRADE:

PROVIDER NAME:

PREGNANT(Y/N): N EDC:

#:

ADMISSION DATE:

DATE OF DISCHARGE:

BLIND/DISABLED(Y/N): N

RSP(Y/N): N

CHILD SUPPORT/ALIMONY PAID(Y/N): N

DISABILITY ONSET:

VC:

CHILD CARE/INCAPACITATED EXPENSE(Y/N):

VETERAN(Y/N): N

INSURANCE(Y/N): Y

EARNED INC(Y/N): N UNEARNED INC(Y/N): Y

US CITIZEN(Y/N): Y

ALIEN#:

REGISTER TO VOTE(Y/N): N

US ENTRY:

BIRTH CNTRY:

REASON: G

UPDATED: USER ID: CLSMA

DATE: 05/23/07

SYSTEM ID: TTR1004

DATE: 09/14/07

ME900063 RECIPIENT RECORD FOUND

2>BUY 3>NEXT 4>REFH 5>ESC 9>BENDEX 11>HH BGS 12>DED REL 14>RCP INFO
15>EINC 16>UINC 17>PAR 18>HH MBR BGS 19>REQ CRD 20>UCB 23>SDX 24>SRS

MEDHMS49 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 10/17/07
 MEDSPROD HOUSEHOLD BUDGET GROUPS

HH NAME: CROOKS GENEVA C PAGE: 0001
 HH NUMBER: 100972414 APL STATUS: ACTION TYPE: MAINTENANCE
 ACTION DATE: 10/17/07

BG		NEXT		LAST		BG
S	NUMBER	CATEGORY	WORKER	CNTY	LOC	STATUS
-	69823895	OSS	JKEAR	08	001	PENDING
-	89562721	SLMB2	CPLUT	10	053	ACTIVE
-	49529074	MAONH	EMILL	10	057	CLOSED
-	88033528	GAPS	TRAWL	47	055	CLOSED
-	09638310	OSS	AAUST	08	001	DENIED
-	69561246	SLMB2	EMILL	10	057	DENIED

UPDATED: USER ID: JKEAR DATE: 10/17/07 SYSTEM ID: HMS5000 DATE: 10/17/07
 ME904675 HOUSEHOLD BUDGET GROUPS FOUND
 PF1->HELP PF3->HH MEMBERS PF5->BG DETERMINATION
 PF6->RETURN PF7->PREV PF8->NEXT PF10->PREV MENU PF17->EILD00

MEDHMS49 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 10/12/07
 MEDSPROD HOUSEHOLD BUDGET GROUPS

HH NAME: CROOKS GENEVA C PAGE: 0001

HH NUMBER: 100972414 APL STATUS: ACTION TYPE: MAINTENANCE
 ACTION DATE: 05/23/07

BG		CATEGORY		WORKER		CNTY LOC		SPNSR REVIEW		NEXT		LAST		BG	
S	NUMBER														STATUS
-	89562721	SLMB2		CPLUT		10	053			03/27/2008					ACTIVE
-	49529074	MAONH		EMILL		10	057			03/26/2008					CLOSED
-	88033528	GAPS		TRAWL		47	055			06/15/2007		06/15/2006			CLOSED
-	09638310	OSS		AAUST		08	001			06/25/2008					DENIED
-	69561246	SLMB2		EMILL		10	057			03/26/2008					DENIED

UPDATED: USER ID: CLSMA DATE: 05/23/07 SYSTEM ID: HMS5000 DATE: 05/23/07
 ME904675 HOUSEHOLD BUDGET GROUPS FOUND

PF1->HELP PF3->HH MEMBERS PF5->BG DETERMINATION
 PF6->RETURN PF7->PREV PF8->NEXT PF10->PREV MENU PF17->EILD00

MEDELD01 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 10/12/07
MEDSPROD MEDICAID ELIGIBILITY DECISION ACTION:

DATES-FROM: 03 / 2007 THRU: _ / _ PAGE: 2 OF 3

HH NAME: GENEVA C CROOKS

HH NUMBER: 100972414

BGN: 89562721 PCAT: SLMB2 SPN:

ACT TYPE: MAINTENANC

BG: A BGP: A

WKR: CPLUT CLARA PINTO

ACT DATE: 03/27/07

COUNTABLE BG MEMBERS: 1

COUNTABLE INCOME: 1076.00

COUNTABLE RESOURCES: 671.86

INCOME LIMIT: 1149.00

RESOURCE LIMIT: 4000.00

POV-LVL: +1.26 %

HLTH INS PREM: 0.00

RECURRING INC: 0.00

TOTAL ALLOC: 0.00 OSS AWARD: 0.00

MEETS NON-FINANCIAL?

(Y/N): Y

ACT ON DECISION COMPLETE? (Y/N): Y

MEETS INCOME?

(Y/N): Y

DECISION ACCEPTED DATE: 03/27/07

MEETS RESOURCES?

(Y/N): Y

NEXT REVIEW DATE: 03/27/08

MEETS OTHER CONDITIONS? (Y/N): Y

ANTICIPATED CLOSURE DATE:

REASON(S) FOR DENIAL/CLOSURE/CHANGE:

ELIGIBILITY DECISION APPEALED? (Y/N) _ CONTINUE BENEFITS? (Y/N): _
APPEAL REQUEST DATE: _ COUNTY DECISION UPHELD? (Y/N): _

UPDATED: USER ID: EMILL DATE: 03/27/07 SYSTEM ID: ELD3000 DATE: 03/27/07

ME900115 BUDGET GROUP PERIOD INFORMATION FOUND

PF1->HELP PF3->NEXT SCR PF6->RETURN PF10->MENU PF13->FIELD HELP

PF15->MAKE DECISION PF16->BG DET PF21->HIST- PF22->HIST+ PF24->ACT ON DECISION

MEDEL02 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 10/12/07
MEDSPROD MEDICAID ELIGIBILITY DECISION ACTION:

HH NAME: GENEVA C CROOKS DATES-FROM: 03 / 2007 THRU: ____ / ____ PAGE: 3 OF 3

BGN: 89562721 PCAT: SLMB2 SPN: HH NUMBER: 100972414

BG: A BGP: A WKR: CPLUT CLARA PINTO ACT TYPE: MAINTENANC

RCP NAME: GENEVA C CROOKS ACT DATE: 03/27/07

PREVIOUS BG: NEW BG: RCP NUMBER: 8780103932

IT: _ PING-PONG: _ RETRO: N EXPARTE: N QMB: N CORRECT RCP NUMBER: _

ACTUAL ELIGIBILITY DATES PROT PER DATE: _

LIMITED

---BENEFIT DATES---

--MEDICAID+QMB DATES--

BEGIN	END	BEGIN	END	SERVICE TYPE	REASON CODE 1	REASON CODE 2
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04/01/2007						
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12/01/2006	01/01/2007					
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UPDATED: USER ID: EMILL DATE: 03/27/07 SYSTEM ID: ELD3000 DATE: 03/27/07

ME900115 BUDGET GROUP PERIOD INFORMATION FOUND

PF1-HELP PF2-PREV MBR PF3-NEXT MBR PF5-HH MBR DTL PF6-RETURN PF10-MENU

PF11-HH MBR PF15-MD PF16-BG DET PF18-RCP INFO PF21-HIST- PF22-HIST+ PF24-AOD

MEDEL01 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 10/12/07
 MEDSPROD MEDICAID ELIGIBILITY DECISION ACTION:

HH NAME: GENEVA C CROOKS DATES-FROM: 03 / 2007 THRU: ____ / ____ PAGE: 2 OF 3
 BGN: 49529074 PCAT: MAONH SPN: HH NUMBER: 100972414

BG: C BGP: C WKR: EMILL ACT TYPE: MAINTENANC
 ACT DATE: 03/27/07

COUNTABLE BG MEMBERS: 1 EMILY LEE

COUNTABLE INCOME: 1096.00 COUNTABLE RESOURCES: 671.86
 INCOME LIMIT: 1869.00 RESOURCE LIMIT: 2000.00

POV-LVL: +1.28 % HLTH INS PREM: 212.63

RECURRING INC: 853.37 TOTAL ALLOC: 0.00 OSS AWARD: 0.00

MEETS NON-FINANCIAL? (Y/N): N ACT ON DECISION COMPLETE? (Y/N): Y

MEETS INCOME? (Y/N): Y DECISION ACCEPTED DATE: 03/27/07

MEETS RESOURCES? (Y/N): Y NEXT REVIEW DATE: 03/26/08

MEETS OTHER CONDITIONS? (Y/N): Y ANTICIPATED CLOSURE DATE: ____

REASON(S) FOR DENIAL/CLOSURE/CHANGE:
 050 You are no longer eligible due to a change in your living arrangements.

ELIGIBILITY DECISION APPEALED? (Y/N) - CONTINUE BENEFITS? (Y/N): -
 APPEAL REQUEST DATE: COUNTY DECISION UPHELD? (Y/N): -

UPDATED: USER ID: EMILL DATE: 03/27/07 SYSTEM ID: ELD3000 DATE: 03/27/07
 ME900115 BUDGET GROUP PERIOD INFORMATION FOUND

PF1->HELP PF3->NEXT SCR PF6->RETURN PF10->MENU PF13->FIELD HELP

PF15->MAKE DECISION PF16->BG DET PF21->HIST- PF22->HIST+ PF24->ACT ON DECISION

MEDEL01 P
MEDSPROD

S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES
MEDICAID ELIGIBILITY DECISION

DATE: 10/12/07
ACTION:

HH NAME: GENEVA C CROOKS

DATES-FROM: 05 / 2007 THRU: ____ / ____

PAGE: 2 OF 3

BGN: 09638310 PCAT: OSS

HH NUMBER: 100972414

BG: D BGP: D

WKR: AAUST

ACT TYPE: MAINTENANC

COUNTABLE BG MEMBERS: 1

ALLISON NICKELL

ACT DATE: 06/25/07

COUNTABLE INCOME:

0.00

INCOME LIMIT:

1056.00

COUNTABLE RESOURCES:

8920.01

POV-LVL:

+ .00 %

RESOURCE LIMIT:

2000.00

RECURRING INC:

0.00

TOTAL

ALLOC:

0.00

OSS AWARD:

0.00

MEETS NON-FINANCIAL?

(Y/N) : Y

MEETS INCOME?

(Y/N) : Y

MEETS RESOURCES?

(Y/N) : N

MEETS OTHER CONDITIONS? (Y/N) : N

REASON(S) FOR DENIAL/CLOSURE/CHANGE:

ACT ON DECISION COMPLETE? (Y/N) : Y
DECISION ACCEPTED DATE: 06/25/07
NEXT REVIEW DATE: 06/25/08
ANTICIPATED CLOSURE DATE: ____

052 Your countable resources are more than policy allows.

ELIGIBILITY DECISION APPEALED? (Y/N) -
APPEAL REQUEST DATE:

CONTINUE BENEFITS?

(Y/N) : -

UPDATED: USER ID: AAUST

DATE: 06/25/07

COUNTY DECISION UPHELD? (Y/N) :

ME900115 BUDGET GROUP PERIOD INFORMATION FOUND

SYSTEM ID: ELD3000

DATE: 06/25/07

PF1->HELP PF3->NEXT SCR PF6->RETURN

PF15->MAKE DECISION PF16->BG DET PF21->HIST- PF22->HIST+ PF24->ACT ON DECISION

MEDHMS08 P
MEDSPROD

S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES
MEDICARE COVERAGE

DATE: 10/12/07
ACTION:

NAME: CROOKS GENEVA C

RCP NUMBER: 8780103932

HH NAME: CROOKS GENEVA C

SSN: 251-12-0511

HH NUMBER: 100972414
APL STATUS:

ACTION TYPE: MAINTENANCE

MCN: 251120511A

VALIDATED BY: BUY IN

ACTION DATE: 05/23/2007
ON: 10/07/2007

PART A - BEGINNING DATE: 05/01/1984

ENDING DATE:

BY: MMA

PART B - BEGINNING DATE: 05/01/1984

ENDING DATE:

BY: MMA

PART C - BEGINNING DATE: 03/01/2006

ENDING DATE:

BY: MMA

PART D - BEGINNING DATE: 01/01/2006

ENDING DATE:

BY: MMA

LOW INC- BEGINNING DATE: 12/01/2006

ENDING DATE: 12/31/2008

BY: MMA

SUBSIDY

UPDATED: USER ID:

DATE:

ME900063 RECIPIENT RECORD FOUND

SYSTEM ID: BUY200B DATE: 10/07/07

PF3->NEXT SCR

PF4->REFH

PF6->RETURN

PF10->PREV MENU

PF13->FIELD HELP

PF16->BUY IN

PF17->BENDEX INFO

PF18->MMA01

PF19->COB01

PF21->HIST-

ME900024 P
MEDSPROD

S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES
HOUSEHOLD NOTES

DATE: 10/16/07
ACTION:

HH NAME: CROOKS GENEVA C

HH NUMBER: 100972414 HH APL STATUS:

HH ACT TYPE: MAINTENANCE
HH ACT DATE: 2007-05-23

WKR: AAUST

NAME: NICKELL ALLISON

CTY: 08 DATE: 06/25/07 14:13

OSS DENIED DUE TO EXCESS RESOURCES. LIFE INS FV >\$1500; THEREFORE, CV IS COUNT
D PLUS POLICY EARNIS ACCUMULATED DIVIDENDS. CLT HAS FAILED TO REAPPLY & ACCEPT
ALL BENEFITS FROM OPM. APPL DENIED SOLELY BASED ON EXCESS RESOURCES.

WKR: CLSMA NAME: SMALLS CAROL L

CTY: 10 DATE: 05/23/07 10:03

1233: AR-COMPLETED APP FOR OSS-PENDEED AWAITING TO BE DETERMINED FINANCIALLY
ELIGIBLE. CLT'S OPM INCOME HAS BEEN VOLUNTARILY REDUCED FROM \$214 TO \$164

ME900024 LAST PAGE - NO MORE RECORDS TO DISPLAY

PF1->HELP PF2->NEW NOTE PF4->REF PF6->RETURN PF7->PREV PF8->NEXT

PF10->PREV MENU