

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

RECEIVED

JUL 15 2014

Bureau of Long Term Care Services
SC Department of Health and Human Services

EA

ACTION REFERRAL

TO <i>Piggott / Mary</i>	DATE <i>7/15/14</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000023	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cleared 7/24/14, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>7/20/14</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>THREAT</i> <i>NICOLE MITCHELL</i>	<i>NMT</i>		
2. <i>ALEXIS MARTIN</i>	<i>AM</i>		
3.			
4.			

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JUL 15 2014

Bureau of Long Term Care Services
SC Department of Health and
Human Services

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

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1.			
2.			
3.			
4.			



FLORENCE COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

1211 National Cemetery Road • Florence, South Carolina 29506
Phone: 843.667.5007 • 800.340.4028 • Fax: 843.678.8573
www.fcdasn.org

RECEIVED

JUL 08 2014

Department of Health & Human Services
OFFICE OF THE DIRECTOR

July 3, 2014

SC Department of Health and Human Services
Post Office Box 8206
Columbia, SC 29202-0191

Dear Sir or Madam:

Our auditors, Burch, Oxner, Seale Co., CPA's, PA, will be conducting an audit of our financial statements as of June 30, 2014. Please send directly to them a detailed list of payments made to, or for the benefit of, Acline Place and Carolina Place from July 1, 2013 to June 30, 2014. Also, please list any amounts due to or from our agency, but not yet remitted as of June 30, 2014.

Please mail your reply directly to our auditor:

Burch, Oxner, Seale Company
Post Office Drawer 4707
Florence, South Carolina 29502

Thank you for your cooperation.

Sincerely,

Dawn S. Johnson
Executive Director

7/8/14
ASK Annie About
this... do we need
to log
RC1257 + 1258

Nikki Haley GOVERNOR
Anthony Keck DIRECTOR
P.O. Box 8206 Columbia, SC 29202
www.scdhhs.gov

July 24, 2014

Burch, Oxner, Seale Company
Post Office Drawer 4707
Florence, South Carolina 29502

To Whom It May Concern

We received a notice from Ms. Dawn Johnson of the Florence County Disabilities and Special Needs Board requesting that we send you financial statements of Acline Place and Carolina Place. Enclosed you will find the aforementioned information in detailed list form as requested. In summary, the total amounts of payments provided to each facility are as follows:

Acline Place: \$47,502.05
Carolina Place: \$54,416.66

You will find more detailed information enclosed. We sincerely hope that this information is of use to you. Please let us know if there is any other way that we may be of assistance.

Sincerely,



Alexis Martin
SCDHHS
OSS Program Coordinator



MMDPRV26

S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES

07/22/14

PROVIDER PAYMENT HISTORY FOR: **RC1257** DEBIT BALANCE: **0.00**

MONTH	TOTAL AMOUNT CHECKS	TOTAL AMOUNT CREDIT	TOTAL AMOUNT DEBIT	TOTAL AMOUNT CERTIFIED
07/14	3,633.20	0.00	0.00	0.00
06/14	3,632.70	0.00	0.00	0.00
05/14	3,633.20	0.00	0.00	0.00
04/14	3,632.72	0.00	0.00	0.00
03/14	2,195.20	0.00	1,438.00	0.00
02/14	4,298.15	0.00	0.00	0.00
01/14	4,296.00	0.00	0.00	0.00
12/13	4,298.15	0.00	0.00	0.00
11/13	4,296.00	0.00	0.00	0.00
10/13	3,697.37	0.00	0.00	0.00
09/13	3,697.37	0.00	0.00	0.00
08/13	3,095.40	0.00	0.00	0.00
07/13	3,096.59	0.00	0.00	0.00
06/13	3,095.40	0.00	0.00	0.00

PAGE: 0001

PF4->INQUIRY

PF7->PREV PAGE
PF10->PREV MENU

PF8->NEXT PAGE

Acline Place

MMDPRV26

S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES

07/22/14

PROVIDER PAYMENT HISTORY FOR: RC1258 DEBIT BALANCE: 0.00

MONTH	TOTAL AMOUNT CHECKS	TOTAL AMOUNT CREDIT	TOTAL AMOUNT DEBIT	TOTAL AMOUNT CERTIFIED
07/14	3,612.12	0.00	0.00	0.00
06/14	4,009.80	0.00	0.00	0.00
05/14	4,010.16	0.00	0.00	0.00
04/14	5,409.60	1,400.00	0.00	0.00
03/14	4,057.90	0.00	0.00	0.00
02/14	4,674.18	0.00	0.00	0.00
01/14	4,672.20	0.00	0.00	0.00
12/13	4,674.18	0.00	0.00	0.00
11/13	4,672.20	0.00	0.00	0.00
10/13	3,973.27	0.00	0.00	0.00
09/13	3,973.27	0.00	0.00	0.00
08/13	3,271.50	0.00	0.00	0.00
07/13	3,406.28	0.00	0.00	0.00
06/13	3,790.20	0.00	0.00	0.00

PAGE: 0001

PF4->INQUIRY

PF7->PREV PAGE
PF10->PREV MENU

PF8->NEXT PAGE

Carolina Place

BURCH, OXNER, SEALE CO., CPA'S, PA
P.O. DRAWER 4707
FLORENCE, SOUTH CAROLINA 29502

COLUMBIA
SC 29202
07 JUL 2014
PM 4:11

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Department of Health & Human Services
OFFICE OF THE DIRECTOR

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JUL 07 2014

SCDHHS
Office of General Counsel

SC Department of Health and Human Services
Post Office Box 8206
Columbia, SC 29202-0191



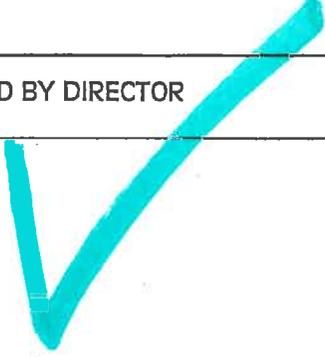
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