

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
Wells/FOIA	5-12-09

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 100634	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR cc: Singletan, Ms. Farley Spensland Cleared 5/19/09, letter attached.	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE 5-26-09 <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.			

RECEIVED

MAY 12 2009

Department of Health & Human Services
OFFICE OF THE DIRECTOR

From: "DeDe Nichols" <dnichols@mslcpa.com>
To: <info@scdhs.gov>
Date: 5/11/2009 10:41 am
Subject: Public Records Request

Good morning.

I've been trying to reach someone in the long-term care division and the phone rings with no answer. I'd like to obtain copies of the two most recent Medicaid cost reports of the following facilities under the Freedom of Information Act:

Laurel Baye Healthcare of Williston

Laurel Baye Healthcare of Blackville

Laurel Baye Healthcare of Greenville (formerly known as Grady Hipp)

Laurel Baye Healthcare of Ridgeway (Fairfield)

Laurel Baye Healthcare of Orangeburg (formerly known as Edisto Convalescent Center)

Please have someone contact me at any of the numbers listed below or via response to this e-mail.

Thanks so much.

DeDe

DeDe G. Nichols
Principal
MOORE STEPHENS LOVEFACE, P.A.
Certified Public Accountants
Serving Clients Since 1974

577 Mulberry Street, Suite 500
Macon, Georgia 31201
Direct: 478.787.0527
Cell: 478.957.6490
Fax: 866.290.6362

dnichols@mslcpa.com <mailto:dnichols@mslcpa.com>

<http://www.mslcpa.com> <<http://www.mslcpa.com>>

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From: Bryan Kost
To: Brenda James
Date: 5/11/2009 1:41 pm
Subject: FOIA - Fw: Fwd: Public Records Request (Forward from Info ID)

Please log. Thanks,



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

Emma Forkner
Director

May 19, 2009

Ms. DeDe G. Nichols
Moore, Stephens, Lovelace, P.A.
577 Mulberry Street, Suite 500
Macon, GA 31201

Dear Ms. Nichols:

Enclosed you will find the information and the billing for processing your recent Freedom of Information Act request from our office.

I hope this information is helpful to you. If you should have any questions, please contact Brandy Putnam at (803) 898-1040.

Sincerely,

William L. Wells, CPA
Deputy Director

WLW/bp
Enclosures



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

May 19, 2009

TO: Ms. Dede G. Nichols
Moore, Stephens, Lovelace, P.A.

FROM: William L. Wells, CPA
Deputy Director

SUBJECT: Cost of Processing FOIA Request # 634

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	1	Hours	\$10.00
Pages copied at \$.10 per page	450	Pages	\$45.00
Pages faxed at \$.20 per page		Pages	\$
Shipping and Handling Costs			\$ 8.55
Other costs associated with the FOIA request:	0634		\$

Total Amount Due SCDHHS:

\$63.55

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 Brandy Putnam at (803) 898-1040 should you have any questions.

William L. Wells
Signature

5-19-09
Date