

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Mjms</i>	DATE <i>5-22-08</i>
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DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER <i>000603</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____		
2. DATE SIGNED BY DIRECTOR _____	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____		
<input type="checkbox"/> FOIA DATE DUE _____			
<input checked="" 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>Completed by</i>
2.			<i>for 6/3/08 +</i>
3.			<i>fixed -</i>
4.			<i>(closed)</i>



American Public Human Services Association

RECEIVED

MAY 22 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Cari DeSantis, President

Jerry W. Friedman, Executive Director

May 16, 2008

Emma Forkner
Director

SC Department of Health and Human Services
PO Box 8206
Columbia, SC 29202-8206

Log: Myers
N/A

Dear Ms. Forkner:

For 68 years, the American Public Human Services Association has published an annual directory, which is still the "go to" resource for accurate information about state, local, and federal public human service agencies. We are preparing the 2009 edition and would appreciate your help in providing us with the most accurate information about your agency. To that end, we have two requests.

1. Update Your Agency Description. A copy of your agency's description as it appears in the current edition is attached. Please update this description to reflect current changes in your agency structure and leadership, indicating whether the TANF, Child Welfare and Medicaid programs are administered at the state or county level.

2. Designate Contact Person. Your assistance is critical in verifying and updating information for programs in your agency. Please designate a staff person to serve as our contact by completing the attached form. Once you confirm the designation, we will be sending them the program contacts from the current directory to verify or change.

We request that the contact person you have designated and the updated agency description be sent to Amy Plotnick via e-mail to amy.plotnick@aphsa.org; call (202) 682-0100 x223; or fax to (202) 204-0071 by June 23, 2008.

We appreciate your assistance with these important tasks. Your help and input are essential to our efforts to produce an excellent publication. Thank you.

Sincerely,

Frank Solomon
Communications Director

Enclosed: Form to Designate Contact Person for 2009 Agency Program Listings
Current Agency Description in 2008 Public Human Services Directory

2009 Public Human Services Directory

Contact Person Designation

The following person will be responsible for verifying and updating program contact information for my agency for publication in the *2009 Public Human Services Directory*.

APHSA ID #: **31311 (SC DHHS)**

Name: Jan Polatty

Title: Administrative Coordinator

Agency: SC DHHS

Mailing Address: Po Box 8206
1801 Main St.

City: Columbia State: SC Zip: 29202

Tel: 803 898 2504 Fax: 803 255 8235

E-mail: polattyj@scdhhs.gov

Agency web site address: scdhhs.gov

Please send this form by June 9, 2008 to:

Amy Plotnick, Communications and Membership
American Public Human Services Association
810 First Street, NE, Suite 500, Washington, DC 20002
Tel: (202) 682-0100 x223; Fax: (202) 204-0071; E-mail: aplotnick@aphsa.org

Thank you for your assistance.

South Carolina Department of Health and Human Services

PO Box 8206

Columbia, SC 29202

Tel: (803) 898-2500

Fax: (803) 255-8235

Web: <http://www.scdhhs.gov>

Emma Forkner, Director

The **South Carolina Department of Health and Human Services** (DHHS) is an independent state agency whose director reports to the governor. The department delivers the state-administered Medicaid program, Partners for Health. Local eligibility and community long-term care services are provided through a network of regional and local offices.

Please send this updated information by June 9, 2008 to:

Amy Plotnick, Communications and Membership, American Public Human Services Association
810 First Street, NE, Suite 500, Washington, DC 20002

Tel: (202) 682-0100 x223; Fax: (202) 204-0071; E-mail: aplotnick@aphsa.org



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

FAX COVER SHEET

“CONFIDENTIAL INFORMATION ENCLOSED”

DATE: 6/2/08

TO: Amy Potnick

Telephone #: _____

Fax #: _____

FROM: Jan Polatty

Total Number of Pages Transmitted: 2 (Including Cover Sheet)

COMMENTS:

As requested -

MMW

Confidentiality Note

This message is intended for the use of the person or entity to which it is addressed and may contain information, including health information, that is privileged, confidential, and the disclosure of which is governed by applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this information is STRICTLY PROHIBITED. If you have received this in error, please notify us immediately and destroy the related message. Thank you.

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PAGE(S)
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06/03 11:30
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Agency: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Tel: _____ Fax: _____

E-mail: _____

Agency web site address: _____

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