

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Jacobs</i>	DATE <i>9-13-07</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000149	<input checked="" type="checkbox"/> Prepare reply for the Director's signature DATE DUE <i>9-20-07</i>
2. DATE SIGNED BY DIRECTOR <i>Cleared 9/26/07, letter attached.</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <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.			
3.			
4.			



House of Representatives

State of South Carolina

RECEIVED

SEP 13 2007

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Michael A. Pitts

District No. 14 - Greenwood-
Laurens Counties
372 Bucks Point Road
Laurens, SC 29360

327-A Blatt Building
Columbia, SC 29211

Tel. (803) 734-2830

September 7, 2007

Ms. Emma Forkner, Director
SC Department of Health and Human Services
Post Office Box 8206
Columbia, SC 29202-8206

Log:
Jacob's
"duh dig"



Dear Ms. Forkner:

I would ask that you review the denial for Mr. Greg T. Vaughn, 2519 Sam Hodges Road, Greenwood, South Carolina 29653, Recipient ID 0244053201. It is my understanding there was a question in the amount of money he receives, and his expenditures.

Thank you in advance for any assistance you can give in this matter, I am

Sincerely,

Michael A. Pitts

MAP/jhm/September-7-07-11

cc: Ms. Emily Nicholson, Richland County DHHS, Post Office Box 128, State Park, SC 29147



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

September 26, 2007

Mr. Greg T. Vaughn
2519 Sam Hodges Road
Hodges, South Carolina 29653

Dear Mr. Vaughn:

Representative Michael Pitts contacted our agency on your behalf regarding the denial of your recent Medicaid Aged, Blind or Disabled (ABD) application.

Generally, individuals receiving Social Security benefits receive a Cost of Living Adjustment (COLA) each January. If the COLA affects the applicant's Medicaid eligibility, the adjustment can be disregarded.

We have reassessed your eligibility determination, disregarded your January 2007 COLA and are pleased to inform you that your application for Medicaid has been approved retroactively to July 1, 2007. You should be receiving the approval letter within the next two weeks. Please report any changes to your address, household status, income or resources to your eligibility worker whose name will be listed on your Medicaid approval letter.

Our records indicate you have Medicare Part A (hospital insurance). With ABD coverage, Medicaid will pay your Medicare Part B premium (currently \$93.50). Please notify SSA that you are Medicaid eligible and sign up for Part B (medical insurance). Their office is located at 115 Enterprise Court, Suite C, Greenwood, SC 29649, or you may telephone (864) 223-1711 between the hours of 9:00 a.m. – 4:00 p.m. If you have questions about your Medicaid benefits, please call our Greenwood County Medicaid Office at (864) 229-5258. We hope this information is helpful.

Sincerely,

A handwritten signature in cursive script, reading "Alicia Jacobs".

Alicia Jacobs
Interim Deputy Director

AJ/cde

149



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

September 26, 2007

The Honorable Michael A. Pitts
South Carolina House of Representatives
372 Bucks Point Road
Laurens, South Carolina 29360

Dear Representative Pitts:

Thank you for contacting us on behalf of Mr. Greg T. Vaughn regarding his concerns about Medicaid eligibility and the application process.

A member of our staff has been in direct contact with Mr. Vaughn to assist with his healthcare needs, and we believe his concerns have been addressed.

We appreciate your continued interest and support of the South Carolina Medicaid program. If I may be of further assistance on this or any other matter, please let me know.

Sincerely,

A handwritten signature in cursive script, appearing to read "Emma Forkner".

Emma Forkner
Director

EF/jcde

9/20/07

Will be in 2
Perry

Generally, individuals receiving Social Security benefits receive a Cost of Living Adjustment (COLA) each January. If the COLA affects the applicant when determining Medicaid eligibility, the adjustment is disregarded.

Quarson
2

We have reassessed your eligibility determination and are pleased to inform you that your application for Medicaid has been approved retroactively to July 1, 2007. You should be receiving the approval letter and Medicaid card within the next two weeks. ~~There is no~~
~~meaning, if you need health care services, please share your Medicaid~~

Suggested
Revision

EDIT



Constituent ID

Closed? ☐

Date Closed

SSN

MEDICAID ID

First Name

MI

Last Name

Constituent Phone(s)

Constituent Phone Extension

Authorized Rep

Rep Phone

Relationship

Source

Log No

Due Date

HIPAA Authorization

Reason for Referral

Staff ID

Staff First Name

Staff Last Name

Point of Contact

Legislator/ Other

Entry Date

Last Update

Last Update User

Apply

Cancel

Close

Constituent# 979

	Notes ID	Entry Date	Last Update	Notes
▶	1391	9/19/2007	9/19/2007	Jimmy said Mr. Vaughn has been found eligible for ABD retro to July 1, 2007, and his record has been transferred to the Greenwood Ofc. I called Mr. Vaughn and let him know everything I mentioned in the response letter. He said he can sign up for Part B in January. He was appreciative and is going to thank Rep. Pitts for assisting him as well. Gave draft letters to Bob for review before going to Jenny. EPPSDEN 9/19/2007 1:17:08 PM
	1361	9/18/2007	9/18/2007	Heard back from Jimmy. They will take a look at this tonight and let me know if Mr. Vaughn was receiving COLA or not as of Dec. 31, 2006. I will contact Mr. Vaughn by phone to ask about Part B and doublecheck mailing address. His phone # is 864.456.7148. I will then prepare a response letter to both Rep. Pitts and Mr. Vaughn. EPPSDEN 9/19/2007 1:18:04 PM

Case Notes ID	Entry Date	Last Update	Last Update User	Notes
1361	9/18/2007	9/18/2007	EPPSDEN	Heard back from Jimmy. They will take a look at this ton
1360	9/18/2007	9/18/2007	EPPSDEN	Jimmy Hampton sent me an email saying that all 3 kids dr
1347	9/17/2007	9/17/2007	EPPSDEN	Rec'd response from EW who copied Pat McWhite. Em
1346	9/17/2007	9/17/2007	EPPSDEN	

EDIT

Case Notes ID

Notes

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EPPSDEN 9/18/2007 1:19:04 PM

Constituent Data

Constituent ID

SSN

MEDICAID

First Name

Middle Initial

Last Name

Legislator / Other

Staff Data

Staff ID

Identifier

Spell Check

Entry Date

9/18/2007

Grammar Check

Last Update

9/18/2007

Print this Form

Last Update User

EPPSDEN

Case Notes ID	Entry Date	Last Update	Last Update User	Notes
1360	9/18/2007	9/18/2007	EPPSDEN	Jimmy Hampton sent me an email saying that all 3 kids do
1347	9/17/2007	9/17/2007	EPPSDEN	Rec'd response from EW who copied Pat McWhite. Em
1343	9/17/2007	9/17/2007	EPPSDEN	Sent email to Emily Richardson & copied supvr (Rosetta
1300	0/1/2007	0/1/2007	1300111111	T. D. ...

EDIT

Case Notes ID

Constituent Data

Constituent ID

SSN

MEDICAID

First Name

Middle Initial

Last Name

Legislator / Other

Staff Data

Staff ID

Spell Check

Grammar Check

Print this Form

Entry Date

Last Update

Last Update User

Jimmy Hampton sent me an email saying that all 3 kids do have PHC (both mother and a child have the same name). He also said that he doesn't have Medicare; however, in MEDS, it shows he has Part A. -- yet, his recent SLMC application was denied for "not having Part A." (I will ask Mr. Vaughn about Part B.) Jimmy spoke with Carolyn on Friday after Emily rec'd Rep. Pitts' letter. Carolyn could find no favorable answer under current policy. Since then, Carolyn has re-checked and determined if someone applies for ABD, use income as of Dec. 31 of prior year, provided affected by SSA COLA. (I believe this is right -- Carolyn will send email to supvrs re: interpretation of policy.) Mr. Vaughn had ABD from 11/1/01 - 12/1/03 that ended for failing to return review form (or incomplete.) Jimmy will send another email to say if he is eligible for ABD or not, then I can call him and share the good news, if any.

Case Notes ID	Entry Date	Last Update	Last Update User	Notes
1343	9/17/2007	9/17/2007	EPPSDEN	Sent email to Emily Richardson & copied supvr (Rosetta Evans)
1302	9/14/2007	9/14/2007	LYNCHJEN	To Denise to handle. She is out today, but will be in on Mon.

EDIT

Case Notes ID

Notes

Sent email to Emily Richardson & copied supvr (Rosetta Evans) asking to verify income as \$1 over ABD limit and provide any other background.
EPPSDEN 9/17/2007 1:47:06 PM

Constituent Data

Constituent ID

SSN

MEMCARD

First Name

Middle Initial

Last Name

Legislator / Other

Staff Data

Staff ID

Entry Date

Last Update

Last Update User

Case Notes ID	Entry Date	Last Update	Last Update User	Notes
1347	9/17/2007	9/17/2007	EPSPDEN	Rec'd response from EW who copied Pat McWhite. Emily ju
1343	9/17/2007	9/17/2007	EPSPDEN	Sent email to Emily Richardson & copied supvr (Rosetta Ever
1302	9/14/2007	9/14/2007	LYNCHJEN	To Denise to handle. She is out today, but will be in on Mon.

EDIT

Case Notes ID 1347

Notes

Constituent Data

Constituent ID 979

SSN 000000000

MEDICAID 024405320100

First Name Greg

Middle Initial T

Last Name Vaughn

Legislator / Other Rep. Michael Pitts

Rec'd response from EW who copied Pat McWhite. Emily just verified income \$1 over for ABD. I sent another email asking (1) when SSA disability began, (2) background into SLMB denial, & (3) why 3rd child in HH doesn't have PHC. I will call Mr. Vaughn after I hear back from Emily &/or Pat. EPSPDEN 9/17/2007 3:10:52 PM

Staff Data

Staff ID 2

Jennifer

Dabbs

Spell Check

Entry Date 9/17/2007

Grammar Check

Last Update 9/17/2007

Print this Form

Last Update User

EPSPDEN

EDIT



Constituent ID

879

Closed? ☐

Date Closed

SSN

000-00-0000

MEDICAID ID

0244053201

First Name

MI

Last Name

Greg

T

Vaughn

Constituent Phone(s)

() -

() -

Constituent Phone Extension

Authorized Rep

Rep Phone

() -

Relationship

Source

Blue Log

Log No.

0149

Due Date

9/20/2007

HIPAA Authorization

Reason for Referral

Medicaid Denial

Staff ID

Staff First Name

Staff Last Name

2

Jennifer

Dabbs

Point of Contact

Legislator/ Other

Rep. Michael Pitts

Entry Date

9/14/2007

Last Update

9/14/2007

Last Update User

LYNCHJEN

Apply

Cancel

Close

Constituent# 979

	Notes ID	Entry Date	Last Update	Notes
►	1302	9/14/2007	9/14/2007	To Denise to handle. She is out today, but will be in on Monday. LYNCHJEN 9/14/2007 10:08:35 AM



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Constituent Notes