

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Robert/Hutto/FOIA</i>	DATE <i>9-24-13</i>
--------------------------------	------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000120</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>CC: Cox</i> <i>cleared, 10/3/13, letter attached</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE <i>10-8-13</i> <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**

**Brenda James**

SEP 24 2013

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

**From:** Lauren Young  
**Sent:** Tuesday, September 24, 2013 12:33 PM  
**To:** Melissa Simmons  
**Cc:** Brenda James  
**Subject:** RE: FOI Request Georgetown Healthcare--need log number assigned to this request

Melissa,

All FOIAs need to be sent to Brenda James so they can be logged. It is important to send the electronic requests to her first, since the FOIA time clock begins when the request is received. I've cc'ed Brenda as well.

Thanks

---

**From:** Melissa Simmons  
**Sent:** Tuesday, September 24, 2013 11:59 AM  
**To:** Lauren Young  
**Subject:** FW: FOI Request Georgetown Healthcare--need log number assigned to this request

Lauren

Could I get a log number assigned for this FOIA request?

This request was email to Brandy. Also, do you know who I should have this acct email when he has future FOIA requests?

Melissa

---

**From:** Brandy Gilbert  
**Sent:** Friday, September 20, 2013 7:36 AM  
**To:** Melissa Simmons  
**Subject:** FW: FOI Request Georgetown Healthcare

---

**From:** Terry Schmoyer [<mailto:tschmoyer@schmoyercpa.com>]  
**Sent:** Thursday, September 19, 2013 5:28 PM  
**To:** Lisa Jackson  
**Cc:** Brandy Gilbert  
**Subject:** FOI Request Georgetown Healthcare

Lisa

Good afternoon.

We are working on updating the historical cost depreciation schedules for Georgetown Healthcare Center.

Under FOI could I please get a copy of the following:

- 1) Copy of the Fixed asst MCD cost report pages for the years ended 9/30/06 – 9/30/2011.
- 2) Copy of the cost of capital calculation and work papers used for the 9/30/11 MCD cost report
- 3) A copy of the % level A calculation that will be used for the 10/1/12 and 10/1/13 MCD rate calculations.

Please bill our office for coping charges as needed.

Please advise if you have any questions.

Thank you,

Terry

Brandy

Once approved would you please let me know when I can come over and pick this info up.

Many thanks

Terry

---

Terry K. Schmoyer, Jr. CPA  
Managing Partner



**Schmoyer and Company, LLC**  
CERTIFIED PUBLIC ACCOUNTANTS

**Schmoyer and Company, LLC**

1330 Lady Street Suite 507

Columbia, SC 29201

☎ (803) 254-2050

📠 (803) 256-9080

✉ [tschmoyer@schmoyercpa.com](mailto:tschmoyer@schmoyercpa.com)

Visit us on the Web: [www.schmoyercpa.com](http://www.schmoyercpa.com)

**Confidentiality Notice**

The information and/or any attachments to this e-mail contain confidential information that is legally privileged. This information is intended only for the use of the individual or entity named in the e-mail. The above authorized recipient of this information is prohibited from disclosing this information to any other party unless required to do so by law or regulation and is required to destroy the information after its stated need has been fulfilled. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or action taken in reliance on the contents of these documents is strictly prohibited. If you have received this information in error, please notify the sender immediately and arrange for the return or destruction of these documents.

**IRS CIRCULAR 230 NOTICE:** Any federal tax advice contained in this communication (or in any attachment) is not intended or written to be used, and cannot be used, for the purpose of (i) avoiding penalties under the Internal Revenue Code or (ii) promoting, marketing or recommending any transaction or matter addressed in this communication.



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:	_____	\$_____
<b>Total Amount Due SCDHHS:</b>		<b>\$_____</b>

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:



October 03, 2013

Terry Schmoyer, Jr. CPA  
Schmoyer & Company, LLC  
1330 Lady Street, Suite 507  
Columbia, SC 29201

Dear Mr. Schmoyer:


This is in response to your request for information from the South Carolina Department of Health and Human Services (DHHS) pursuant to the South Carolina Freedom of Information Act (FOIA) dated September 19, 2013 and received by DHHS on September 24, 2013. We have enclosed the cost report information requested for Georgetown Healthcare.

Our expense for extracting this information is Ten and 40/100 dollars (\$10.40). Please make the check payable to the Department of Health and Human Services and send it to:

Department of Health and Human Services  
Department of Receivables  
Post Office Box 8297  
Columbia, SC 29202-8297

Thank you for your request. If you have any questions, you may contact Ms. Beth Hutto, Interim Deputy Director and Chief Financial Officer, at (803) 898-2955.

Sincerely,

  
Constance D. Holloway  
Assistant General Counsel

CDH/lb

cc: Lynette Wilson

Enclosures



October 03, 2013

TO: Terry Schmoyer, Jr., CPA  
FROM: Beth Hutto  
Interim Deputy Director  
SUBJECT: Cost of Processing FOIA Request # 129

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	<u>1</u> Hours	<u>\$10.00</u>
Pages copied at \$.10 per page	<u>4</u> Pages	<u>\$0.40</u>
Pages faxed at \$.20 per page	<u>      </u> Pages	<u>\$      </u>
Shipping and Handling Costs		
Other costs associated with the FOIA request:	<u>      </u>	<u>\$      </u>
<b>Total Amount Due SCDHHS:</b>		<b>\$10.40</b>

Please remit the above amount to the following address:

South Carolina Department of Health and Human Services  
Department of Receivables  
Post Office Box 8297  
Columbia, South Carolina 29202-8297

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Constance/Linda P

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

RECEIVED

SEP 25 2013

ACTION REFERRAL

SCDHHS  
Office of General Counsel

TO	DATE
Robert/Hutto/FOIA	9-24-13

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000120	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR CC: Cox	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input checked="" type="checkbox"/> FOIA DATE DUE 10-8-13
	<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.			



**Brenda James**

**RECEIVED**

SEP 24 2013

**From:** Lauren Young  
**Sent:** Tuesday, September 24, 2013 12:33 PM  
**To:** Melissa Simmons  
**Cc:** Brenda James  
**Subject:** RE: FOI Request Georgetown Healthcare--need log number assigned to this request

Department of Health & Human Services  
**OFFICE OF THE DIRECTOR**

Melissa,

All FOIAs need to be sent to Brenda James so they can be logged. It is important to send the electronic requests to her first, since the FOIA time clock begins when the request is received. I've cc'ed Brenda as well.

Thanks

**From:** Melissa Simmons  
**Sent:** Tuesday, September 24, 2013 11:59 AM  
**To:** Lauren Young  
**Subject:** FW: FOI Request Georgetown Healthcare--need log number assigned to this request

Lauren

Could I get a log number assigned for this FOIA request?

This request was email to Brandy. Also, do you know who I should have this acct email when he has future FOIA requests?

Melissa

**From:** Brandy Gilbert  
**Sent:** Friday, September 20, 2013 7:36 AM  
**To:** Melissa Simmons  
**Subject:** FW: FOI Request Georgetown Healthcare

**From:** Terry Schmoyer [<mailto:tschmoyer@schmoyercpa.com>]  
**Sent:** Thursday, September 19, 2013 5:28 PM  
**To:** Lisa Jackson  
**Cc:** Brandy Gilbert  
**Subject:** FOI Request Georgetown Healthcare

Lisa

Good afternoon.

We are working on updating the historical cost depreciation schedules for Georgetown Healthcare Center.

Under FOI could I please get a copy of the following:

- 1) Copy of the Fixed asst MCD cost report pages for the years ended 9/30/06 – 9/30/2011.
- 2) Copy of the cost of capital calculation and work papers used for the 9/30/11 MCD cost report
- 3) A copy of the % level A calculation that will be used for the 10/1/12 and 10/1/13 MCD rate calculations.

Please bill our office for coping charges as needed.

Please advise if you have any questions.

Thank you,

Terry

**RECEIVED**

SEP 25 2013

SCDHHS  
Office of General Counsel



Brandy

Once approved would you please let me know when I can come over and pick this info up.

Many thanks

Terry

**RECEIVED**

SEP 25 2013

SCDHHS  
Office of General Counsel

---

Terry K. Schmoyer, Jr. CPA  
Managing Partner



**Schmoyer and Company, LLC**

1330 Lady Street Suite 507

Columbia, SC 29201

☎ (803) 254-2050

📠 (803) 256-9080

✉ [tschmoyer@schmoyercpa.com](mailto:tschmoyer@schmoyercpa.com)

Visit us on the Web: [www.schmoyercpa.com](http://www.schmoyercpa.com)

**Confidentiality Notice**

The information and/or any attachments to this e-mail contain confidential information that is legally privileged. This information is intended only for the use of the individual or entity named in the e-mail. The above authorized recipient of this information is prohibited from disclosing this information to any other party unless required to do so by law or regulation and is required to destroy the information after its stated need has been fulfilled. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution, or action taken in reliance on the contents of these documents is strictly prohibited. If you have received this information in error, please notify the sender immediately and arrange for the return or destruction of these documents.

**IRS CIRCULAR 230 NOTICE:** Any federal tax advice contained in this communication (or in any attachment) is not intended or written to be used, and cannot be used, for the purpose of (i) avoiding penalties under the Internal Revenue Code or (ii) promoting, marketing or recommending any transaction or matter addressed in this communication.



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:	_____	\$ _____
<b>Total Amount Due SCDHHS:</b>		<b>\$ _____</b>

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: