

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Ries</i>	DATE <i>12-21-06</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>UC0419</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cleved 1/4/07, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>1-5-07</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.			
2.			
3.			
4.			



House of Representatives
Washington, DC 20515

BOB INGLIS
4th District, South Carolina

JUDICIARY
EDUCATION AND WORKFORCE
SCIENCE

FAX TRANSMITTAL

TO: Bryan Kost

FAX NUMBER: (803) 255-8235

DATE: Dec. 20, 2006

FROM: Spartanburg District Office of Congressman Bob Inglis
464 East Main Street Ste 8, Spartanburg SC 29307
TELEPHONE: 864.582.6422 FAX: 864.573.9478

RECEIVED

DEC 20 2006

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Dwayne Hatchett

SPECIAL REMARKS:

Re: Jonathan Teide

Politz: Lisa

Opprop. DWR

3 pages, including covers

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WASHINGTON, DC
330 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
PHONE: (202) 226-6930
FAX: (202) 226-1177

SPARTANBURG, SC
464 EAST MAIN STREET, SUITE 8
SPARTANBURG, SC 29302
PHONE: (864) 582-4422
FAX: (864) 573-9478

GREENVILLE, SC
105 NORTH SPRING STREET, SUITE 1111
GREENVILLE, SC 29601
PHONE: (864) 232-1141
FAX: (864) 232-2160

UNION, SC
PHONE: (864) 427-2205
www.house.gov/inglis



House of Representatives
Washington, DC 20515

BOB INGILIS
4TH DISTRICT, SOUTH CAROLINA

December 20, 2006

JUDICIARY
EDUCATION AND WORKFORCE
SCIENCE

VIA FACSIMILE

Bryan Kost
Government Liaison
South Carolina Department of Medicaid
South Carolina Department of Health and Human Services
PO Box 8206
Columbia, SC 29202-8206

Dear Bryan:

I am writing on behalf of my constituent, Bill Teide (POA for his son, Johnathan Wayne Teide, 247-67-9948) about the termination of Johnathan's Medicare insurance coverage.

Bill states that Johnathan's coverage was terminated in June 2006 with no prior notice or explanation. As a result, his other insurance coverage has been affected. Will you please provide an explanation for the termination of the coverage? Your full and fair consideration, consistent with governing rules and regulations, would be most appreciated as you review this matter.

Thank you, in advance, for your assistance. I hope you will not hesitate to call me or Dwayne Hatcher of my Spartanburg office at 864-582-6422 if you have any questions or need more information.

I look forward to hearing from you soon.

Sincerely,

Bob Inglis
Member of Congress

BV/dh

Enclosure

WASHINGTON, Bill Teide
330 CANNON HOUSE CHIEFS BUILDING
MONTANA STATION DC 20515
PHONE: (202) 225-8030
FAX: (202) 225-1177

SPARTANBURG, SC
404 EAST MAIN STREET, SUITE B
SPARTANBURG, SC 29302
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House of Representatives
Washington, DC 20515

BOB INGLIS
4th District, South Carolina

JUDICIARY
EDUCATION AND WORKFORCE
SCIENCE

Privacy Act Release Form

TO WHOM IT MAY CONCERN:

I am aware that the Privacy Act of 1974 prohibits the release of information in my file without my approval. I, Bob Inglis ~~Wayne Teide~~ do hereby authorize Congressman Bob Inglis and/or his staff to all information in my files.

Signature Bob Inglis POA for Jonathan Wayne Teide

Address 281 Holden Rd
INMAN SC 29349

Social Security Number 247-67-9948 Jonathan Wayne Teide

Telephone Number 864 472 2672

WASHINGTON, DC
330 Cannon House Office Building
Washington, DC 20515
PHONE: (202) 225-6190
Fax: (202) 225-1177

SPARTANBURG, SC
464 EAST MAIN STREET, SUITE 8
SPARTANBURG, SC 29302
PHONE: (864) 582-6422
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LINCOLN, SC
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www.house.gov/inglis

GREENVILLE, SC
109 NORTH SPRING STREET, SUITE 1111
GREENVILLE, SC 29601
PHONE: (864) 232-1141
Fax: (864) 233-2160

MEMDMS54 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 12/20/06
MEDSPROD RECIPIENT INFORMATION ACTION:

MEMBER PERIOD START: 12/23/04 END: PAGE: 0001

NAME: TIEDE JOHNATHAN W HH NAME: TIEDE JOHNATHAN W

RCP NUMBER: 6726687601 HH NUMBER: 100067374 ACTION TYPE: MAINTENANCE

SSN: 247-67-9948 VC: V APL STATUS: ACTION DATE: 05/22/02

PRIMARY INDIVIDUAL: APL CO: 42 WORKER ID: KFIELD LOCATION: 003

281 HOLDER ROAD SSCN: 227666978C1 RRN:

INMAN RACE: 01 SEX: M MARITAL STATUS: S

CORRECT RCP NUMBER: SC 29349-9565 TPL INSURANCE: N RELATION: SELF

DOB: 09/20/1976 DOD:

LIV ARRANGEMENT: HOME INCOME TRUST: PROVIDER:

BG	BEG	END	PCAT	QCAT	TYPE	IND	IND	LEVEL	CHIP
S	NUMBER	ELIG	ELIG	PCAT	QCAT	TYPE <td>IND</td> <td>IND</td> <td>NUMBER</td>	IND	IND	NUMBER
67266876	04/01/1996	80	50						.00

UPDATED: USER ID: _____ DATE: _____ SYSTEM ID: BUY1000 DATE: 08/30/06
ME900063 RECIPIENT RECORD FOUND

PF2->HH BG PF3->HH MBR DTL PF4->REFH PF5->ELD02 PF6->RETURN PF7->PREV

PF8->NEXT PF9->HH NOTES PF15->RCP SEARCH PF17->ELD00 PF18->HH MBR BGS



State of South Carolina
Department of Health and Human Services

#419 ✓

Mark Sanford
Governor

Robert M. Kerr
Director

January 4, 2007

Mr. Bill Teide
281 Holden Road
Inman, South Carolina 29349

Dear Mr. Teide:

Representative Bob Inglis asked the Medicaid agency to assist you with the problems regarding the health insurance and Medicare coverage for your son, Johnathan Wayne Teide.

To resolve the problems you are having with Johnathan's Medicare health insurance coverage, please call Medicare at 1-800-999-1118. Inform Medicare that they became Johnathan's primary health insurance coverage as of September 2005, with Tricare, his secondary.

Johnathan has been receiving Medicaid benefits without a break in coverage through our Supplemental Security Income program since April 1, 1996. When a beneficiary is covered by another health insurance program, Medicaid is the last carrier to pay on medical claims.

If the billing offices of Johnathan's physicians encounter difficulty in Medicaid paying on his medical claims, please contact Christopher Lykes in our Division of Physician Services at 1-888-549-0820, Ext. 2660. If you have any questions or concerns about Johnathan's Medicaid coverage, please call Denise Epps in Constituent Services at Ext. 2505.

Sincerely,

A handwritten signature in black ink, appearing to read "Gary Ries".

Gary Ries
Deputy Director

GR/ode



419

State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Robert M. Kerr
Director

January 4, 2007

Mr. Bill Teide
281 Holden Road
Inman, South Carolina 29349

*Bryan - could
you call Inglis' -
office w/ closure
thx! Jan*

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Sincerely,

Gary Ries
Gary Ries
Deputy Director

GR/code



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Robert M. Kerr
Director

Mr. Bill Teide
281 Holden Road
Inman, South Carolina 29349

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Sincerely,

Gary Ries
Deputy Director

GR/ode

LEGISLATIVE LOG #	0419
LEGISLATOR/INQUIRER	Bob Inglis
CONSTITUENT	Bill Teide for Johnathan Wayne Teide
SSN	247-67-9948
BC ASSIGNED LOG	Jacobs
DATE REC'D BY AGENCY	12/21/2006
DATE DRAFT DUE GR	1/4/2007
LOG LETTER DUE DATE	1/5/2007
DATE REFERRED TO BC	12/21/2006

Brief Description of Issue/Problem	Date	Staff Person	Phone #	Action Taken
Mr. Teide wants to know why his son's SSI coverage ended in June 2006 with no prior notice of explanation.	12/21/2006	Jill	8-8936	Gave folder to Mark to distribute (30m)
	12/27/2006	Denise	8-2505	Mark gave to me to research, then give to Jerry tomorrow
	12/27/2006	Denise		I sent an email to Interfaces to see if they have been notified that Johnathan Wayne Teide's coverage was ending according to his father's letter to Cong. Inglis, SSI ended 6/06 but MEDS shows it as still active.
	12/27/2006	Denise	8-2505	According to Renee Johnson in Dept. of Interfaces, as of 12/27/06, SSI coverage for Johnathan Wayne Teide is still open. Mr. Teide said someone at Medicaid told him the coverage had ended and this is why his son's claims since before June 06 have not been paid. I contact Chris Lykes in Physician Services who will research and call Mr. Teide.
	12/27/2006	Denise	8-2505	According to Chris, Mr. Teide's son's doctors have been billing Tricare, thinking it was still his primary insurance co. but Medicare became his primary with Tricare his supplemental as of Sept 06 so this problem with claims has been ongoing. His son does indeed have Medicaid coverage and it pays last on claims. Mr. Teide has Chris's name & if he has more questions. This problem should be resolved as Chris has also talked with the physicians.
	12/28/2006	Denise	8-2585	Drafted response letters & gave to Jenny for approval.
				(see email from Chris Lykes.)

CHECKLIST

Family Size	
Income/Resources	
Other Resources:	
Communicare	
FQHCs	
Free Medical Clinics	
Medicare	
MIAP	
Prescription Drug Programs	
Social Security	
Together Rx	

Programs:

ABD (32)	
Foster Children (31,60)	
General Hospital (14)	
HCBS (15)	
LIF (59)	
MBCCP (71)	
Nursing Home (10)	
OSS (85,86)	
PHC (88)	
Pregnant Women & Infants (12,87)	
QMB (90)	
SILVERCARD (92)	
SLMB (48,52)	
SSI (80)	x
TEFRA (57)	
Transitional (11)	
Working Disabled (40)	

Instructions:

Jan creates new worksheet for each log by copying template into workbook & changing name of worksheet to proper log #. Each user finds log # on bottom tab & enters "date/action taken" in shaded cells. (Once entered, user must exit document.) If question about current status of a log letter, contact previous user. Jan & Linda will update upon each log's return and, as a log is closed, they will cut and paste each worksheet into the archive file. Path: GROUPS/Constituent Services/Log Letters & Transmittals/Aides for Creating-Tracking/Trackers-Tools/Excel Log Tracker

From: CHRISTOPHER LYKES
To: Denise Epps
Date: 12/27/2006 4:25 PM
Subject: Tiede-6726687601 - Congressman Englis

CC: William Feagin

Hey Ms. Epps, Johnathan had Tricare through his dad but eventually got Medicare. Once he received Medicare, someone should have contacted Medicare so it could be primary instead of secondary to Tricare. I spoke with Palmetto GBA and a young lady named Terka said the father should call them at this #(800 999 1118) and ask the coordination of benefits to make Medicare primary over Tricare. After this, all the doctors offices can begin billing Medicare first. I've spoken to Mr. Bill Tiede and he said he would give Medicare a call. I also gave him my number if he had anymore problems.

Christopher Lykes
Division of Physician Services
1801 Main St.
Columbia, SC 29202
Tel: 803-898-2547
Fax: 803-255-8255

From: Denise Epps
To: Renee H Johnson
Date: 12/27/2006 11:58 AM
Subject: Re: cong. bob inglis inquiry

thank you !!

>>> Renee H Johnson 12/27/2006 11:57 AM >>>
Shouldn't be. I can't swear 100% that he is eligible for SSI because I don't have direct access to their system but what they send us very recently shows that he remains eligible for SSI and therefore Medicaid.

>>> Denise Epps 12/27/2006 11:56:06 AM >>>
thank you, renee. so, in this case, he can't be ineligible on their end but eligible on ours, right?

>>> Renee H Johnson 12/27/2006 11:54 AM >>>
His Medicaid is still open.

>>> Denise Epps 12/27/2006 11:53:32 AM >>>
i'm assuming it means that his eligibility will continue?

>>> Renee H Johnson 12/27/2006 11:52 AM >>>
We received an eligible transaction on 12/22/06. He may be confusing it with something else.

>>> Denise Epps 12/27/2006 11:47:57 AM >>>
can you tell me if social security has sent notification to us that Johnathan w tiede is no longer eligible for SSI coverage? medcs doesn't show this yet (HH# 100067374 and SS# 247-67-9948) but his father told cong. Inglis that the coverage ended June 2006 with no prior notice or explanation.

thank you,
denise

Denise M. Epps
Constituent Services
Bureau of Eligibility Policy & Oversight
(803) 898-2505 direct; (803) 255-8350 fax
eppsden@scdhhs.gov

DATE: 12/21/05
ACTION: 0001
PAGE: 0001

HEALTH AND HUMAN SERVICES
PATIENT INFORMATION

PATIENT NAME: TIEDE JOHNATHAN W
ACTION TYPE: MAINTENANCE
ACTION DATE: 05/22/02
HH NAME: ACTION DATE: 003
LOCATION: 003

NUMBER: 100067374
STATUS: 42

WORKER ID: KFEELD
SSCN: 227666978C1
RACE: 01 SEX: M
TPL INSURANCE: N
DOB: 09/20/1976
LIV ARRANGEMENT: HOME INCOME TRUST:
PROVIDER: QMB RETRO % OF POV CHIP
BENEFITS IND IND LEVEL NUMBER
TYPE

29349-9565
PCAT QCAT DATE: 08/30/06
80 50

SYSTEM ID: BUY1000
DATE: 08/30/06

FOUND PF4->REFH PF5->ELD02 PF6->RETURN PF7->PREV
DTL PF15->RCP SEARCH PF17->ELD00 PF18->HH MBR BGS
PF15->RCP SEARCH