


DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <b>Jacobs</b>	DATE <b>10-26-10</b>
---------------------	-------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <b>004195</b>	<input type="checkbox"/> I Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <b>Cleared 11/4/10, letter attached.</b> 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <b>11-4-10</b>  <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.			

10/26/2010 16:46 FAX 8039330957

SEN. L. GRAHAM COLA

☒ 001

LINDSEY O. GRAHAM  
SOUTH CAROLINA



280 RUSSELL SENATE OFFICE BUILDING  
WASHINGTON, DC 20510  
(202) 224-6872

## UNITED STATES SENATE Fax Transmittal Sheet

TO: Emma Forbue 898-4515

FROM: Sophie Martin

DATE: 10-26-10

**RECEIVED**

OCT 26 2010

COMMENTS:

Department of Health & Human Services  
OFFICE OF THE CLERK

3 PAGE(S) TO FOLLOW

IF THERE IS ANY PROBLEM RECEIVING THIS FAX, PLEASE  
CALL (803) 933-0112.

**Confidentiality:** This message is intended solely for the use of the addressee and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the person responsible for delivering it to the recipient, you are put on notice that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by phone and return the original message at the address via U.S. Postal Service. Thank you.

808 HAMPTON STREET  
SUITE 202  
COLUMBIA, SC 29201  
(803) 933-0112

401 WEST EVANS STREET  
SUITE 228B  
FLORENCE, SC 29501  
(843) 669-1505

101 EAST WASHINGTON STREET  
SUITE 220  
GREENVILLE, SC 29601  
(864) 260-1417

530 JOHNNIE DODD BOUL AVARD  
SUITE 202  
MOUNT PLEASANT, SC 29464  
(843) 849-3887

140 EAST MAIN STREET  
SUITE 110  
ROCK HILL, SC 29730  
(803) 366-2808

125 EAGLES NEST DRIVE  
SUITE B  
SEAFORD, SC 29078  
(804) 886-5330

10/26/2010 04:37PM

10/26/2010 16:46 FAX 8039330957

SEN. L. GRAHAM COLA

☒ 002

LINDSEY O. GRAHAM  
SOUTH CAROLINA



290 RUSSELL SENATE OFFICE BUILDING  
WASHINGTON, DC 20510  
(202) 724-5972

## UNITED STATES SENATE

October 26, 2010

**RECEIVED**

OCT 26 2010

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

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

Dear Emma:

The attached letter concerns an issue outside of my official jurisdiction. Therefore, as a courtesy to my constituent, I am sending this correspondence to you.

Thank you for your attention to this matter. I ask that you please respond directly to the individual.

Sincerely,

A handwritten signature in dark ink, appearing to read "L. Graham".

Lindsey O. Graham  
United States Senator

LOG/si

Enclosure

508 HAMPTON STREET  
SUITE 202  
COLUMBIA, SC 29201  
(803) 938-0712

401 WEST EVANS STREET  
SUITE 111  
FLAMMERT, SC 29901  
(843) 688-1806

130 SOUTH MAIN STREET  
SUITE 700  
GREENVILLE, SC 29601  
(864) 250-1417

530 JOHNNIE DODD BOULEVARD  
SUITE 202  
MOUNT PLEASANT, SC 29484  
(843) 848-3887

140 EAST MAIN STREET  
SUITE 110  
ROCK HILL, SC 29730  
(803) 388-2128

124 EXCHANGE STREET  
SUITE A  
PENDLETON, SC 29670  
(854) 506-6080

10/26/2010 04:37PM

LINDSEY O. GRAHAM  
SOUTH CAROLINA

RECEIVED OCT 18 2010

290 RUSSELL SENATE OFFICE BUILDING  
WASHINGTON, DC 20510  
12021274-5872

RECEIVED

## UNITED STATES SENATE

OCT 26 2010

## AUTHORIZATION FORM

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

By providing the information below and signing this form, I hereby authorize the appropriate agency to furnish the office of U.S. Senator Lindsey Graham information pertaining to my claim or request. This authorization is in accordance with the Privacy Act of 1974.

Name: Patricia Holt Phone: 1-803-477-6377  
 Address: 13 Strawberryfield Ln P.O. Box 4834  
 City: Elgin State: S.C. Zip: 29045  
 Social Security Number: 087-34-6092 VA Number (if applicable): \_\_\_\_\_

In the space below, briefly describe the problems that you are experiencing and explain exactly what you would like Senator Graham to do on your behalf. Without this information, it will be impossible for Senator Graham to adequately assist you. (If you need more space, please use the back of the form).

*I'm 66 years old and I ~~don't~~ need to get about to help pay for my bills my medicines and my food. I receive \$655 a month from 5-55 and don't have any more to pay all my bills or buy food.*

Signed: Patricia Holt Date: 10.15.10

NOTE: Those requesting assistance from Senator Graham should note that if they are represented by an attorney, that attorney must contact the Senator's office by letter or telephone before action can proceed. This is to eliminate any confusion and it is in the best interest of the client.

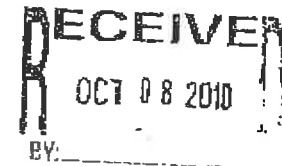
If represented by an attorney, please give attorney's name \_\_\_\_\_

Please return form to:

U.S. Senator Lindsey O. Graham  
 508 Hampton Street, Suite 202  
 Columbia, South Carolina 29201  
 Phone: (803) 933-0112  
 Fax: (803) 933-0957

508 HAMPTON STREET  
SUITE 202  
COLUMBIA, SC 29201  
(803) 933-0112401 WEST EVANS STREET  
SUITE 2208  
FLORENCE, SC 29501  
(843) 668-1505101 EAST WASHINGTON STREET  
SUITE 220  
GREENVILLE, SC 29601  
(864) 250-1417530 JOHNNIE DODDS BOULEVARD  
SUITE 201  
MOUNT PLEASANT, SC 29464  
(843) 948-3407140 EAST MAIN STREET  
SUITE 110  
ROCK HILL, SC 29730  
10/26/2010126 EAGLE NEAR  
SUITE B  
SENECA, SC 29  
04:37PM3X

The Honorable Lindsey Graham  
United States Senator  
Post Office Box 1801  
Columbia, South Carolina 29202



Dear Senator Graham:

First, may I take this opportunity to congratulate you on your victorious win and to thank you for running a very positive and statesman like campaign, where all South Carolinians can appreciate you as their United States Senator.

Also, to offer my continuum support in any of your endeavors in making this state and country a great place to live.

Secondly, to introduce myself to you, I am a retired disabled Gas Station Attendant will 5 years of services with private companies, I was diagnosed with Breast Cancer, Hypertension, Asthma, Diabetes and Lymphatic which has cause me to not be able to hold a full time job

Attached are copies of my medical reports

I have encounter a problem with the South Carolina Department of Health and Human Services, regarding being approved for the Age, Blind & Disabled (ABD) program I solicit your help in be fairly and equally being reviewed for Disability under the Social Security /Medicaid program.

I may be reached for further information regarding this matter by mail at Post Box 434, Elgin, South Carolina (29045) or by telephone at (803)477 -6377

Again, thanks for being elected our United States Senator. And if I can be of help or service to your Administration please feel free to contact me at addresses mention above.

**RECEIVED**

OCT 26 2010

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

10/26/2010 04:37PM

10/26/2010 16:46 FAX 8039330957

SEN. L. GRAHAM COLA

003



November 4, 2010

Joanne Ash  
Post Office Box 434  
Elgin, South Carolina 29045

Dear Ms. Ash:

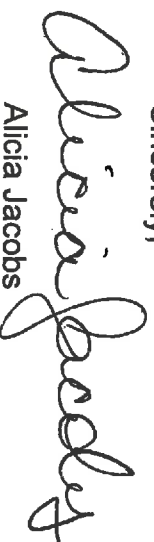
United States Senator Lindsey Graham contacted our agency on your behalf regarding Medicaid eligibility and other assistance programs that you may be eligible for.

You were approved for Medicaid's Aged, Blind or Disabled program effective October 1, 2010 which is secondary to your Medicare coverage. Be sure to ask your provider before receiving medical services if they will accept both Medicare and Medicaid as payment. In addition, Medicaid pays your monthly Medicare Part B premium.

You may wish to contact the Department of Social Services (DSS) regarding the Supplemental Nutrition Assistance Program (SNAP). Eligible individuals receive a card that helps them pay for food. Enclosed is an application. Please contact DSS toll-free at 1-800-768-5700 if you have any questions regarding SNAP.

Also enclosed is information on other programs and organizations that can assist residents in South Carolina with their daily living needs. If you have questions about the Medicaid program, please contact Jennifer Lynch in Constituent Services at (803) 898-3965. I hope this information is helpful.

Sincerely,

  
Alicia Jacobs  
Deputy Director

AJ/jgl  
Enclosures