

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Roberts/FOIA</i>	DATE <i>10-31-12</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000135</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>CC: Singleton, Cox, DeFede</i> <i>Cleared 11/14/12, letter</i> <i>attached</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE <i>11-14-12</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**

OCT 31 2012

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

October 29, 2012

Director Tony Keck  
South Carolina Department of Health & Human Services  
P.O. Box 8206  
Columbia, SC 29202

Dear Director Keck:

This letter is a request for access to the public records listed below pursuant to the S.C. Freedom of Information Act. I would like to review the following:

Data regarding claims for the following that have been paid by Medicaid for persons twenty-one (21) years of age and younger in fiscal year 2011-2012 or the most recent 12 month period the state has available:

1. Psychiatric hospital admissions
2. Psychiatric emergency room visits
3. Psychiatric Residential Treatment Facilities
4. Residential alcohol and substance abuse centers

The data should include a summary of the number of such claims paid.

Please contact me at (803) 252-1087 to schedule a time to examine the records.

Since this request primarily benefits the general public, I request that any search or copying fees be waived. If there is a charge for providing me access, please advise me of your estimate of the charge and the basis for the charge when you call to arrange an appointment.

Sincerely,

Annie W. Wilson  
General Counsel



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:



November 14, 2012

Ms. Annie W. Wilson, Esquire  
Capitol Consultants, Inc.  
PO Box 1763  
Columbia, SC 29202

Dear Ms. Wilson:

Enclosed is a spreadsheet which displays the information you requested in your letter of October 29, 2012. We were unable to arrange to somehow mask personal health information so you could personally examine our computer files.

Our expense for reproducing and mailing this information is thirty-five and forty-five hundredths dollars (\$35.45). 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

I hope this information is still helpful to you. Please contact me if there are any questions. My direct is (803) 898-2791.

Sincerely,



Richard G. Hepfer  
Deputy General Counsel

RGH/h

Enclosure  
cc: Lynette Willson, Receivables