


DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Single for</i>	DATE <i>7-6-10</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>101006</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Singleton, Stensland</i> 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE <i>7-20-10</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.			

**Brenda James - please log - Fwd: RE: Bryon Kost e-mail is kostbr@scdhhs.gov. Thank you.**

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**From:** Bryan Kost  
**To:** Brenda James  
**Date:** 7/2/2010 1:38 PM  
**Subject:** please log - Fwd: RE: Bryon Kost e-mail is kostbr@scdhhs.gov. Thank you.

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we may have already logged it ...

**RECEIVED**

JUL 06 2010

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Bryan Kost  
DHHS Senior Consultant  
803.898.2865  
cell- 429.3201  
kostbr@scdhhs.gov

>>> "Ronald Nelson" <ronaldnel@charter.net> 7/2/2010 12:58 PM >>>  
To Whom It May Concern:

I hope you are all doing very well. Around March 2009, I contacted you regarding possible Medicaid issues with the Beaufort County School District. Around October 2009, the issue was resolved and at that of the 32 files pulled by the SCDHHS, 100% were not in compliance, which includes my daughter, Suzie Carolina Nelson. In the meantime, I requested about one+ months ago, the SCDHHS' interview with the director of Special Education for the Beaufort County School District, Ms. Brenda Hunt. May I again request that interview as a SC FOIA? Furthermore, I request any other interviews involving individuals involved during this investigation. I appreciate your consideration of this matter and look forward to your response. I appreciate your consideration of this matter and look forward to your response.

Regards,

Ron Nelson, (843) 575-0364

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**From:** Caprise Young-Graham [mailto:YOUNGC@scdhhs.gov]  
**Sent:** Friday, July 02, 2010 11:53 AM  
**To:** ronaldnel@charter.net  
**Subject:** Bryon Kost e-mail is kostbr@scdhhs.gov. Thank you.

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: \_\_\_\_\_



Log# 000006

✓  
Emma Forkner • Director  
Mark Sanford • Governor

July 27, 2010

CERTIFIED MAIL

Mr. Ron Nelson  
2604 Live Oak Circle  
Beaufort, SC 29902

Re: Request for Information

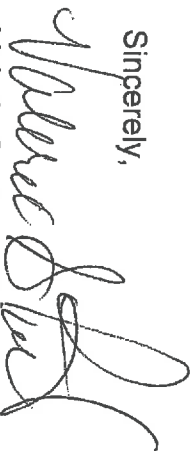
Dear Mr. Nelson:

Thank you for your request, received by the Division on July 6, 2010. I apologize for the delay in responding. We do have a tape of an informal conference with the provider relative to the recoupment of funds based upon a post-payment review of services. In addition, we have some notes of regarding the chronology of events which may have some notes regarding conversations with School district staff on the mechanics of the review.

This information can be copied and redacted of personally identifiable information and other information exempt from the Freedom of Information Act and made available to you. We estimate that the cost of producing a transcript and redacting the individual information would be about two hundred dollars (\$200.00) and we would ask for a deposit in that amount before we begin the process. Of course, we will request that you supplement your payment if the cost exceeds that amount and refund any excess payment.

Again, thank you for your interest in these matters and please contact me if you have any questions.

Sincerely,



Valerie S. Pack, Department Head  
Department of Medical & Ancillary Service Review  
Division of Program Integrity