

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
<i>Baeding/Grisse/Dr. Bursten</i>	<i>6-4-07</i>

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER  000755	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR  <i>Cleand 6/21/07, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>6-13-07</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.			

# LEXINGTON Women's Care

RECEIVED

MAY 29 2007

2868

7091168

OBSTETRICS &  
GYNECOLOGY

James E. Estes,  
M.D. FACOG

G. Patrick Gallery,  
M.D. FACOG

William E. Pyle,  
M.D. FACOG

David J. Stallard,  
M.D. FACOG

Valerie A. Skinner,  
M.D. FACOG

Frederick B. Thompson,  
M.D. FACOG

Miriam A. Wilcox,  
M.D. FACOG

CERTIFIED NURSE  
MIDWIVES

Marie Bridges,  
CNM, MSN

Deborah Holland,  
CNM, MSN

Rhonda Johnson,  
CNM, MSN

Beverly Nedbalick,  
CNM

Terre Shankle,  
CNM, MN

Wendy Walker,  
CNM, MSN

Lexington Medical  
Park 1

2728 Sunset Boulevard  
Suite 201

W. Columbia, SC 29169  
Phone: (803) 936-8100  
Fax: (803) 936-8130

Referred to Duncan  
Answered Copy to  
Ms. Gies



Lexington Medical Center  
Your partner for health and wellness®

May 21, 2007

From Susan

Governor Mark Sanford  
P. O. Box 12267  
Columbia, South Carolina 29211

Duncan, Gail's  
Office

Dear Governor Sanford:

784-578-1

I am writing this letter to voice a concern for my patients. I am an OB/GYN with Lexington Women's Care, practicing at Lexington Medical Center. My group delivers nearly 2,000 babies each year and a substantial number of our patients are receiving Medicaid for their health care coverage. It is my understanding that Dr. Marion Burton, Medical Director with the Department of Health and Human Services recently indicated that he is considering dropping coverage for preterm labor services. This would have a devastating impact on our patients. He has stated that among his reasons for dropping coverage are: (1) that other state Medicaids are discontinuing coverage for home uterine activity monitoring and subcutaneous terbutaline pump therapy and (2) that there is insufficient data to support the use of such therapy.

As to the first statement, it is simply not true. Georgia Medicaid started covering preterm labor services a year ago. North Carolina started covering preterm labor services last year and California, now also covers preterm labor services.

As to the second reason, there are 43 studies that have been done on subcutaneous terbutaline pump therapy with all but 2 showing benefits of pregnancy prolongation. Of the two studies that did not show benefit, individual dosing in titrating, as well as, home uterine activity monitoring were not performed. A critical component of the management of preterm labor is a total system of care that is included with the administration of subcutaneous terbutaline. The combination of titrating the medication based on an end organ response, patient education and surveillance including daily nursing contact and patient compliance are critical components of this total system of care. Without a comprehensive approach, many of my patients will not only deliver premature infants at a great cost to the individual and to the State, but also need to be managed in the hospital without the option of home care. The cost of our Medicaid system and to the medical system as a whole will be greatly increased.

RECEIVED

JUN 04 2007

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

06/04/2007 11:08AM

Jun-04-07

10:42

From: Gov. Mark Sanford

+803 734 5187

T-578 P.002/002 F-681

Governor Mark Sanford

May 11, 2007

Page 2

It is estimated that the return investment of preterm labor services is approximately \$5 for every \$1 spent. My practice, Lexington Women's Care, has long been an advocate of preterm labor monitoring and aggressive therapy and we have had great success with such therapy. I would really hate to see my patients lose that treatment option which would certainly be open if Medicaid were to drop coverage for preterm labor services.

If you have interest in learning more about this topic, Dr. Roger Newman in Charleston has done extensive research and would be very happy to discuss this with you.

Sincerely,



James E. Estes, MD

/ksd

Leg.  
Giese/Dr. Bunker

06/04/2007 11:08AM



*State of South Carolina*  
*Department of Health and Human Services*

Mark Sanford  
Governor

Robert M. Kerr  
Director

June 21, 2007

James E. Estes, MD  
Lexington Women's Care  
Lexington Medical Park 1  
2728 Sunset Boulevard, Suite 201  
W. Columbia, SC 29169

Dear Dr. Estes:

Thank you for corresponding to relate your concerns regarding South Carolina Department of Health and Human Services (SCDHHS) payment for Home Preterm Labor services. Let me assure you that there are no plans to discontinue this Agency's support for this care. Specifically, tocolysis and home nursing support are vital components of prenatal care for some high-risk pregnancies. SCDHHS has been reviewing the overall scope of these services, however, and are in discussions regarding the bundling or packaging of some of these items of care. We are working closely with the Ob/Gyn physician community to assure that any further decisions will continue to offer providers of this care the support that is needed.

If you would like to discuss this in more detail, please call me at 803-898-2500 or 803-255-3400. Thank you for your insights relating to this issue and for caring for South Carolina Medicaid beneficiaries.

Sincerely,

A handwritten signature in dark ink, appearing to read "Marion Burton".

O. Marion Burton, MD  
Medical Director

OMB/k