

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Myers & Hamilton</i>	DATE <i>2-19-09</i>
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DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER <i>100456</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____		
2. DATE SIGNED BY DIRECTOR <i>Changed due date to 3/12/09, Ber. H. area will answer instead of Dr. Burton</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>3-12-09</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. <i>Cleared 3/16/09, letters attached.</i>			
2.			
3.			
4.			

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Myers/Dr. Burford</i>	DATE <i>2-19-09</i>
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2. DATE SIGNED BY DIRECTOR 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>3-2-09</i>
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	<input type="checkbox"/> Necessary Action

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APPROVALS <small>(Only when prepared for director's signature)</small>	APPROVE	* DISAPPROVE <small>(Note reason for disapproval and return to preparer.)</small>	COMMENT
<i>1. Jennie Campbell</i>			
<i>2. Roy Hess</i>			
<i>3. Beverly Hamilton</i>			
<i>4.</i>			



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

March 16, 2009

Emma Forkner
Director

Oscar F. Lovelace, Jr, MD
Lovelace Family Medicine, PA
Highway 76
PO Box 630
Prosperity, South Carolina 29127

Dear Dr. Lovelace:

We are in receipt of your letter dated February 12, 2009 to CHCcares of South Carolina regarding denial of payment for services to your patient, Tara Young, on February 3, 2009. We welcome the opportunity to be of assistance.

Jeff Bryson, Program Manager for the department assigned to CHCcares of South Carolina, contacted Mr. Gary Ries, General Manager, on March 9, 2009 upon receipt of your letter. The managed care plan has begun the company's internal appeal process to review their decision. Under this process, the case will be reviewed by their medical staff and should be promptly resolved. If this case is not resolved to the satisfaction of the member/members' parents at the conclusion of that process, an appeal and request for a fair hearing can be made to the South Carolina Department of Health and Human Services and the State Fair Hearing process can be utilized, if needed.

We will continue to work with CHCcares to ensure that a timely decision is made. If you have any questions about this letter or need further assistance, please contact Mr. Bryson at (803) 898-2823.

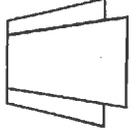
Sincerely,


Felicity Myers
Deputy Director

FM/hhc

cc: Gary Ries, General Manager, CHCcares of South Carolina
Sam Jeffcoat, Attorney at Law

Sam: Ben Campbell
Lamy February
Bruce H.



LoveLace Family Medicine, P.A.
Our Mission since 1988
Compassionate Quality Care to the Glory of God

Address all correspondence to:
P.O. Box 630
Prosperity, SC 29127

Highway 76
2001 Dutch Fork Road
White Rock, SC
Office: (803) 409-0000
Fax: (803) 409-0002

Highway 76
600 North Wheeler Avenue
Prosperity, SC
Office: (803) 364-4852
Fax: (803) 364-2014

February 12, 2009
CHC Cares of SC
Wellpath of SC
140 Stoneridge Drive 200
Columbia, SC 29210-8200

Re:
TARA YOUNG
2512 PINE STREET
NEWBERRY, SC 29108
Medicaid #: 5563314201 Wellpath # 0054645107

FEB 18 2009
Department of Health & Human Services
OFFICE OF THE DIRECTOR

To whom it may concern:

It has come to my attention that you denied payment for out of network services for Tara Young's office visit 02/03/09. When we sent a copy of the attached office visit note, you apparently decided again to deny the office visit.

Your letter stated:

The information the office provided does not show that the requested service is medically necessary. The office did not provide a diagnosis or condition that calls for further follow up. There is no information about any planned treatments that will be based on the genetic testing results. There is no information showing that the office visit will prevent your child from going to the hospital. This information is needed to get the follow up visit covered.

In the office note it clearly states that her geneticist's opinion:

"Tara's duplication at 22q11 likely explains why she has developmental delay and especially problems with speech. Some of her facial features and her high-arched palate also fit with the diagnosis. People with this duplication can have heart anomalies, submucous clefts, and renal malformations as well as behavioral difficulties, intellectual disability, and speech problems. I would recommend Tara have an echocardiogram and renal ultrasound to rule-out any subtle abnormalities. She also should have formal audiology evaluation if her right-sided hearing problems persist after the excess fluid has resolved."

For this reason she was advised to come to our office for evaluation and received blood work and referrals for an echocardiogram and renal ultrasound.

While I understand that insurance companies such as yours make money by holding on to public money through your denial process and you further drive up the cost of medical care by causing me to type this letter after our office has already sent you the appropriate documentation, I find it most deplorable that you are withholding medically necessary care for an indigent child with a genetic defect.

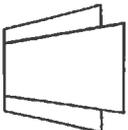
I look forward to your response.

Sincerely,

Oscar F. Lovelace, Jr.
Oscar F. Lovelace, Jr. MD

CC:
Sam Jeffcoat, Attorney at Law
Emma Fortner, Director of SCDHHS

→ I think I have been given this as a log to help me with my thoughts.
RECEIVED



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I look forward to your response.

Sincerely,


Oscar F. Lovelace, Jr. MD

CC:
Sam Jeffcoat, Attorney at Law
Emma Fortner, Director of SCDHHS

Progress Notes

Page: 1

Date Printed: 02/12/09

Name: Young, Tara

ID: 25443

SEX:F

AGE:6

Date: 02/03/09

Title: NEW PROBLEM

Providers: OFL

Nurse: LKD,RN

ALLERGIES:

Allergy: NKDA

SUBJECTIVE:

6 yr year old female presents for well child examination. Here with her mother. Toria Young.

Tara Young did not keep her follow up appointment as recommended after her last visit. We have now received the consultation from Dr. Strauss at the Greenwood Genetics Center on 01/16/09. OFL advised DHR to make a follow up appointment for her so that we can arrange appropriate follow up testing.

Tara's duplication at 22q11 likely explains why she has developmental delay and especially problems with speech. Some of her facial features and her high-arched palate also fit with the diagnosis. People with this duplication can have heart anomalies, submucous clefts, and renal malformations as well as behavioral difficulties, intellectual disability, and speech problems.

Dr. Strauss recommends Tara have an echocardiogram and renal ultrasound to rule-out any subtle abnormalities, She also should have formal audiology evaluation.

She saw Dr. Scates on 12/11/08 for follow-up of her right TM perforation which was not really giving her any trouble. Her right TM perforation did appear to be closing spontaneously. There was no evidence of any active middle ear space disease. He recommended that we continue to watch and observe while having her parents continue to follow strict dry ear precautions. She was advised to follow-up in 4-6 months.

Mother stated 02/03/09 that her daughter was diagnosed as having a hole in her heart at 2 months of age by cardiac ultrasound at PRMH.

Mother stated she is making progress in kindergarten. She is able to read words but she cannot spell them. She seems to get frustrated easily and is fidgety in class. She is hyperactive unless she is asleep.

PAST MEDICAL HISTORY:

1. Gastric Reflux-previously on Zantac. Started approx. February 2004. Not currently requiring meds.

2. Constipation since birth, previously tx with Crystallose in powder form. Resolved.

3. Pneumonia January, 2004-NCMH X one week. Follow-up CXR was completed.

4. Contusion - Bruise noted to left eyelid after falling at daycare. Injury appropriate to story. No sign of orbital or zygomatic Fx or intraocular trauma.

5. Esotropia - Hx of corrective eye surgery at age 6 months. Followed by Dr. White. Next f/u due 05/14/04. Now has rx for glasses but only to wear as tolerated. She does wear glasses for her right lazy eye. Follow up with Dr. White in August 2008.

6. Conjunctivitis - Advised Polyttrim eye gtt's 1 gtt qid X 7 days OU w/ med review on 04/19/04. Again given 03/25/05 for similar symptoms. Probably a bit more prone to this than average with Allergic rhinitis and possibly prior esotropia correction.

7. Allergic Rhinitis - Advised Zyrtec 5mg/5ml, 1/2 tsp po qhs w/ dinner meal, med review on 04/19/04.

8. Congestion - Advised Dytan Suspension 1/4 to 1/2 tsp q12 hrs prn for nasal congestion, #2 sample bottles w/ med review on 02/08/05. Also advised purchase of OTC plain saline to irrigate nasal passages w/ bulb syringe. Rec. Humidifier in home. EHO w/ discussion on 02/08/05. f/u prn

9. Heart Murmur - apparently investigated at PRMH at age 2 months - records requested 02/03/09

Name: Young, Tara

ID: 25443

SEX:F AGE:6

Surgical History:

1. Adenoidectomy , February, 2004. Dr. Scates. Completed follow-up July 2004 . Per mother was told everything is fine. Next f/u in 6 months.
2. Corrective eye surgery at 6 months of age-Crossed eye. Under care of Dr White(same office as Dr. Christmann). She does wear glasses for her right lazy eye. Follow up with Dr. White in August 2008.

OBJECTIVE:

Vitals 1: Syst. BP 88 : Diast. BP 44 : P. 88 :

Vitals 2: T : Ht. : Wt. 46 :

Vitals 3: OFC : 20 Res

General: Well appearing, in no distress.

Head: Normocephalic, atraumatic. Scalp clear.

Eyes: PERRL. EOMI. Fundi benign.

Evidence of strabismus: no

Ears: EACs clear, TMs nl with nl color and landmarks. Hearing intact grossly. Preauricular noted.

Nose: Mucosa non-inflamed, no apparent discharge.

Mouth: No mucosal lesions. Teeth

Neck: Supple, no adenopathy, no masses, no TM.

Chest: Symmetrical, no deformity. Lungs clear in all fields.

Heart: Regular rate and rhythm, no murmur or gallop.

Abdomen: Normal Bowel sounds, soft, nontender, nondistended, no organomegaly or masses.

Extremities: No deformities.

Skin: No rash or prominent lesions.

Neuro: hyperactive but cooperative.

ASSESSMENT/PLAN:

Major Problem: ATOPIC DERMATITIS : 691.8

Elocon cream q hs x 2 weeks and Zyrtec 1/2 tsp po qd pm itching 11/06/06

dove soap

Resolved

Major Problem: ANEMIA OTHER UNS : 285.9

dx with anemia on 11/06/06 and treated with Icar Pediatric chewable - take one po qd .

HGB 11.3 on 11/06/06

Given diet instruction on foods high in iron

If HGB has not improved need to consider ordering anemia panel: Serum iron, total IRC, transferrin saturation and serum ferritin.

CBC pending 02/03/09

Other Problem: DYSURIA : 788.1

UA requested 07/07/06 but not able to obtain in the office - encouraged to bring in when able to collect or if she develops fever may need to perform cath UA

UA and renal ultrasound pending 02/03/09

Other Problem: DEVELOPMENT DELAYS OT : 315.8

Diagnosis: CHROMOSOMAL ANOMALIES : 758

She was able to crawl and walk appropriate but was nearly one year of age before she talked
Chromosomes and fragile X testing were normal, but there was duplication at 22q11 09/18/08 .
his means that Tara has 3 copies of genetic information on part of chromosome 22, instead of the usual 2 copies. (We all carry two copies of most of our chromosomes, one from our mother and one from our father.)

Tara's duplication at 22q11 likely explains why she has developmental delay and especially problems with speech. Some of her facial features and her high-arched palate also fit with the diagnosis.

People with this duplication can have heart anomalies, submucous clefts, and renal malformations as well as behavioral difficulties, intellectual disability, and speech problems.

Tara's developmental and speech problems are unlikely to resolve completely.

Given the genetic cause of her difficulties, these are probably going to be life-long issues, although she may improve greatly with appropriate therapy.

Continue DSN services and special education classes at school long term.

Tara will most probably not "outgrow" her problems entirely, although she has not yet had IQ testing, this would confirm these findings.

Name: Young, Tara

ID: 25443

SEX:F

AGE:6

Records requested from RMH Pediatric Cardiology due to history of heart murmur evaluation at age 2 mo
Scheduled 2D echocardiogram and renal ultrasound 02/03/09 to rule-out any subtle abnormalities
Formal audiology evaluation recommended with Dr. Scates in April 2009
TSH, T4, CMP pending 02/03/09

Other Problem: PERFORAT TYMPANIC MEMBRANE : 384.2
Consulted Dr. Scates on 12/11/08 for follow-up of her right TM perforation which is not really giving her any trouble. Her right TM perforation does appear to be closing spontaneously.

There is no evidence of any active middle ear space disease.
He recommended doing to simply recommend that we continue to watch and observe while having her parents continue to follow strict dry ear precautions.

TMs normal on exam 02/03/09

Follow up with Dr. Scates in April 2009 with formal audiology evaluation

Diagnosis: ADD W/HYPERACTIVITY : 314.01

Conner Rating Scales given to mother, MGM, teacher and teacher's aid to complete 02/03/09

She may benefit from medical therapy based on review of rating scales given 02/03/09

Diagnosis: CONSTIPATION, OTHER : 564.09

Mother noted constipation improved with Metamucil

TSH, T4 pending 02/03/09

HEALTH MAINTENANCE

Last CHC November 2006

Fluvax 02/03/09

FOLLOW UP in 4 - 6 weeks March 2009 for 6 yr WCC after CBC, CMP, TSH, T4, UA return from 02/03/09, records from RMH Pediatric Cardiology, Conner Rating Scales are completed, renal ultrasound, 2Dechocardiogram then for formal hearing screen with Dr. Scates in April 2009

SIGNED BY OSCAR F LOVEFACE, JR, MD (OFL) 02/03/2009 02:17PM

Progress Notes

Name: Young, Tara

ID: 25443 SEX:F AGE:6

Date Printed: 02/12/09

Date: 02/03/09 : 03:36pm

Title: Referral-echo

Appointment is scheduled for 2D echocardiogram with Palmetto Richland on 02/10/09 at 10:00 a.m. in Columbia

Address: 6 RMP, Ste 2320

Office Phone Number: 434-6301

Ordered by: OFL

Diagnosis: 315.8, 758

Wellpath insurance authorization # n/a

Authorization expires n/a for visits

Faxed order to Fax # 434-2713

Order given to patient - - no

Spoke to patient's mother about this appointment.

SIGNED BY LINDSAY BOWERS (LB) 02/03/2009 03:41PM

Progress Notes

Page: 1

Name: Young, Tara

ID: 25443 Date Printed: 02/12/09
SEX:F AGE:6

Date: 02/05/09 : 01:26pm

Title: records

Faxed over sign auth to Richland Ped. Cardiology

SIGNED BY JANA F LIVINGSTON (JFL) 02/05/2009 01:26PM