

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

ACTION REFERRAL

TO <i>Wells/Stensland</i>	DATE <i>11-8-07</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000248</i>	<input checked="" type="checkbox"/> Prepare reply for the Director's signature DATE DUE <i>11-16-07</i>
2. DATE SIGNED BY DIRECTOR <i>cc: Quinton cleaned 11/9/07 letter attached.</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <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.			



HUGH K. LEATHERMAN, SR.

SOUTH CAROLINA STATE SENATE
DISTRICT 31, FLORENCE
AND DARLINGTON COUNTIES

111 GRESSETTE SENATE OFFICE BUILDING
COLUMBIA, SOUTH CAROLINA 29202

(803) 212-6640

November 6, 2007

RECEIVED

NOV 08 2007

Department of Health & Human Services
OFFICE OF THE DIRECTOR

FLORENCE ADDRESS
1817 Pineland Avenue
Florence, South Carolina 29501
(843) 667-1152

Emma Forkner, Director
Department of Health & Human Services
1801 Main Street
Columbia, South Carolina 29201

A handwritten signature in black ink, appearing to read "Emma Forkner".

Dear Ms. Forkner:

I am enclosing herewith a copy of a letter that I have received from my constituent, Lesia McKenzie, with Honorage Nursing Center, relative to the transporting of Medicaid recipients. I know that your agency has been working on this problem, and I would very much appreciate your updating me on the progress made to date and what further improvements will be made. I would also appreciate your response to Ms. McKenzie's specific concerns.

Thank you for your assistance in this matter.

Very truly yours,

A handwritten signature in black ink, appearing to read "Hugh K. Leatherman".

Hugh K. Leatherman, Sr.

HKL:dsm

Enclosure

CC: Ms. Lesia McKenzie, RN/NAC

13-HO/1

*Honorage Nursing Center
1207 North Cashua Drive
Florence, SC 29501
843-665-6172
Fax 843-665-1233*

September 25, 2007

Senator Hugh K. Leatherman, Sr.
District 31 - Darlington & Florence Cos.
1817 Pineland Ave.
Florence, 29501

Attention: Senator Hugh K. Leatherman, Sr.

Dear Senator Leatherman:

This letter is being written in response to a request from Mr. Randy Lee with the South Carolina Health Care Association. I recently received an email requesting comments from our facility regarding the current issues surrounding South Carolina's Medicaid Transportation and Logisticare, the brokerage firm hired by the SC Department of Health and Human Services.

Currently, I am the Nurse Assessment Coordinator for Honorage Nursing Center; however, I have been granted the wonderful task of interpreting the new Medicaid transportation system. Given the training that any of our facilities employees have received, this is miraculous in itself.

First, let me say that in my opinion the transition into using Logisticare was handled very unprofessionally. This facility was in no way informed of any changes that were pending regarding the use of our transportation system. We were not informed of appropriate policies and procedures for obtaining Medicaid scheduled transportation nor were we permitted to express our interpretation of how this was going to affect the care of our residents. We were not informed of when this was going to become effective until a representative from Logisticare stepped into my office and informed me that we should have already been utilizing their brokerage services. The utilization of Logisticare directly interferes with specific contracts that were already in place with our primary ambulance services, which again we were not consulted about. In faxing the transports to Logisticare, it placed honoring that contract in jeopardy because we never knew which transport service they were going to send.

Second, myself as well as other members of this facility feel that Skilled Nursing Facilities should never have been placed into the category that all Medicaid transports have been placed in statewide. CMS regulations mandate that this facility provide for all transportation needs of our residents without regard to pay status. This is the view that our nursing staff is taking. For example, our physician's make rounds on the weekend and will often say on Sunday afternoon that Mrs. Smith needs to be in his office first thing Monday morning to have a skin lesion removed. We have to ensure that those arrangements are made. We have to remain on hold for 30-45 minutes to make this happen. In long term care, it is very difficult to maintain staffing required on second, third, and weekends much less to ensure that someone on duty has the time to dedicate to arranging for transports. This is something that we just are not funded for. Further, I was personally informed by representatives for Logisticare that Medicaid would not cover transports to a Dentist office for my residents. Could they be serious in that it is in the opinion of Medicaid that a 92 year old male invalid resident that is suffering from an abscessed tooth NOT be covered for transport from a SNF to a Dentist office for the purpose of confirming that an abscess exists and determining the appropriate course of treatment? I was informed that Medicaid will only cover the visit for extraction purposes. This is highly unprofessional and does not even begin to meet the needs of thousands of skilled nursing facility residents statewide.

Third, how does the state of SC wish for us to make these arrangements? We've been handed about 4 different protocols on how to make those transportation arrangements since this began last May. First we were told that they could only be faxed to Logisticare, then to fax them to both Logisticare and our primary ambulance service so that our current binding contract would be honored, then to fax them only to our ambulance company and make it their responsibility to obtain authorizations, and then we were told that this was a conflict of interest and only to fax them to Logisticare. This has been the biggest mess handed to facilities that I personally have witnessed in my 12 years of employment in this facility regarding Medicaid residents and I am the Care Plan Coordinator. If the

arrangements have to be made with less than 72 hours advanced notice, we have to call those arrangements in and this has yet to require less than 30 minutes minimum.

Community Long Term Care is the office charged with the responsibility of ensuring that all Medicaid residents in a skilled nursing facility meet the requirements for either intermediate or skilled level of care. The method of transportation should not even be an issue for those residents already determined by one state office to meet the level of care to even be approved for Medicaid to cover their stay in a skilled nursing facility. These residents have already been determined to require 24 hour per day medical care. Curb to Curb services, taxi cabs, PDRTA, and private transports should never be considered appropriate means of transport for those residents.

Let's not forget infection control. I recently attended an in-service education given by Dr. Shea the Epidemiologist for Carolinas Hospital Systems who informed us all that Community Acquired Methacillin Resistant Staph Aureus (MRSA) has surpassed Hospital Acquired in occurrence. It is also a known fact that somewhere between 60-75% of Dialysis patients either already are or will become carriers of this organism which is resistant to many antibiotics. These are the patients that will be transported by way of taxi cabs, PDRTA, etc. Those patients have their blood directly accessed during those treatments. One small band-aid can contaminate an entire vehicle that the taxi driver may be using to take his children to school each morning. This can potentially lead to infection transmission in the school systems. This is but one example of the implications of those types of transports. Was this mentioned by Logisticare and has it even been considered before? Who will be liable for this oversight?

I have attended public meetings held in our local library regarding Logisticare and have been involved in various stages since this was implemented. Would it not have been much more financially prudent for the state to have created an office and hired several individuals to monitor and review these Medicaid Non-Emergent Transports themselves (and performed a "survey" on transport facilities to review their records) instead of sending millions of SC dollars out of our state and into the hands of persons hundreds of miles away that could personally care less about South Carolina's most vulnerable citizens? I am quite certain that the annual operating cost of a "monitoring" office maintained in the state of SC would have been far less than the contract amount awarded to Logisticare, especially given the fact that CMS has finalized the Revisit Fees.

Who has been appointed to ensure that the Medicaid beneficiaries in this state do not have their rights violated? Who has been appointed to ensure that the 74 year old End Stage Renal Disease patient who suffers from hearing deficits is able to sit on hold for the 45 minutes that is required to make his transportation arrangements to his life saving treatments or graft declotting? Who is going to monitor as to whether this resident of our state that is used to having his dialysis treatments three times per week at 4 hours of treatment and 30 minutes travel time to and from is now forced to endure 2 1/2 hours of travel time to and from his treatments because Logisticare thinks it is ok for him to have to sit on a "route" for his transportation keeping him from being able to use the bathroom or keep himself adequately hydrated at his age?

It is our Medicaid recipients in this state that are the most vulnerable. They cannot afford to use anything else and this is the primary reason they have qualified as a Medicaid beneficiary in the first place. They have absolutely no options. Their choices have been taken completely away from them. They are being forced to endure this transition. Who has asked them their opinions?

Sincerely,



Mrs. Lesia McKenzie, RN/NAC

CC: Administration
Governor Mark Sanford
Mr. J. Randal Lee, President SCHCA
U. S. Congressman, James E. Clyburn
Senator Hugh Leatherman, Sr.
Alicia Jacobs, Deputy Director for SC HHS



State of South Carolina
Department of Health and Human Services

Log 248 ✓

Mark Sanford
Governor

November 19, 2007

Emma Forkner
Director

The Honorable Hugh K. Leatherman, Sr.
South Carolina State Senate
111 Gressette Senate Office Building
Columbia, South Carolina 29202

Dear Senator Leatherman:

I have received your recent letter inquiring about the Honorage Nursing Center related to the Medicaid non-emergency transportation system. I am pleased to report that the staff at the Department of Health and Human Services is working diligently to resolve any issues that may arise during the transition to the new transportation system. To date, the agency has done the following to address the Honorage Center's concerns:

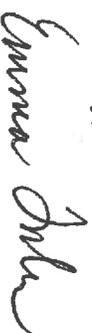
- DHHS staff arranged a conference call on 10/15/07 with several of our executive staff members, LogistiCare staff, Honorage Nursing Center staff and an ambulance provider. Non-emergency transportation procedures as they relate to nursing homes were discussed at length. DHHS staff also informed Honorage Center staff that reimbursement to nursing homes for escorts would be retroactive to October 1.
- DHHS staff followed-up with a second call to the facility on 10/19/07 to arrange for an on-site meeting with Honorage Center staff and an official from LogistiCare, the non-emergency transportation broker responsible for the Florence area.
- A DHHS executive staff member, accompanied by a LogistiCare official, visited the facility on 10/23/07 to further discuss issues related to non-emergency transportation. Issues related to transportation to and from dental appointments were discussed at length at this meeting. DHHS made the Honorage Center staff aware that non-emergency transportation for preventive and restorative dental services for beneficiaries over 21 is not allowable under the South Carolina State Medicaid Plan. However, any facility may be reimbursed through Medicaid for on-site dental consultations.

The Honorable Hugh K. Leatherman, Sr.
November 19, 2007
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- Subsequent to the 10/23/07 meeting, our staff instructed LogistiCare to abide by DHHS policy regarding authorized signatures on medical necessity forms, which does not necessarily require a signature from a physician. Honorage Center staff was concerned that a more rigid standard was being applied. Facility staff were satisfied with this resolution.
- DHHS and LogistiCare staff are working with the facility, including Ms. McKenzie, on a continuing basis to ensure non-emergency transportation needs of Medicaid clients are being met.

In addition to the above, I have personally contacted Ms. McKenzie to affirm DHHS' commitment to assist her facility during this transition. Please do not hesitate to call me directly to discuss this, or any other Medicaid issue. I look forward to meeting with you soon. I have no doubt that we can establish a fruitful relationship that will benefit the people of our state. Thank you again for your letter and for your advocacy on behalf of the residents of South Carolina.

Sincerely,



Emma Forkner
Director

EF:jp



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

November 19, 2007

Emma Forkner
Director

Mrs. Lesia McKenzie, RNNAC
Honorage Nursing Center
1207 North Cashua Drive
Florence, South Carolina 29501

Dear Mrs. McKenzie:

I received an inquiry from the office of Sen. Hugh K. Leatherman regarding a letter you sent to him dated 9/25/07. I wanted to follow-up with you to ensure you were apprised of the steps taken by the SC Department of Health and Human Services to ameliorate the Honorage Nursing Center's difficulties with the new non-emergency transportation system. To date, the agency has done the following to address your concerns:

- DHHS staff arranged a conference call on 10/15/07 with several of our executive staff members, LogistiCare staff, Honorage Nursing Center staff and an ambulance provider. Non-emergency transportation procedures as they relate to nursing homes were discussed at length. DHHS staff also informed Honorage Center staff that reimbursement to nursing homes for escorts would be retroactive to October 1.
- DHHS staff followed-up with a second call to the facility on 10/19/07 to arrange for an on-site meeting with Honorage Center staff and an official from LogistiCare, the non-emergency transportation broker responsible for the Florence area.
- A DHHS executive staff member, accompanied by a LogistiCare official, visited the facility on 10/23/07 to further discuss issues related to non-emergency transportation. Issues related to transportation to and from dental appointments were discussed at length at this meeting. DHHS made the Honorage Center staff aware that non-emergency transportation for preventive and restorative dental services for beneficiaries over 21 is not allowable under the South Carolina State Medicaid Plan. However, any facility may be reimbursed through Medicaid for on-site dental consultations.

Mrs. Lesia McKenzie, RN/NAC
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- Subsequent to the 10/23/07 meeting, our staff instructed LogistiCare to abide by DHHS policy regarding authorized signatures on medical necessity forms, which does not necessarily require a signature from a physician. The following are authorized to sign the form: attending physician, physician assistant, nurse practitioner, clinical nurse specialist or registered nurse.
- DHHS and LogistiCare staff are working with the facility on a continuing basis to ensure non-emergency transportation needs of Medicaid clients are being met.

In addition to the above, I also had the pleasure of speaking with you directly about the issues your facility has experienced and shared our commitment to help you during this transition period. Please feel free to contact me if you have further concerns.

Sincerely,



Emma Forkner
Director

EF:jp