

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

EA

TO <i>Roberts/Dan/FOIA</i>	DATE <i>7-10-14</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000017</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>CC: Cox, Mallis</i> <i>Cleared 7/18/14, letter attached.</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE <i>7-24-14</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

From: Kim Cox
Sent: Thursday, July 10, 2014 8:58 AM
To: Brenda James
Subject: FW: Medicaid Cost Report

Hi Brenda,
Could you please log and route this FOIA request?
Thank you,
Kim

Kim Cox
Strategic Stakeholder Relations, Office of Chief of Staff
COXKIM@scdhhs.gov
803.898.4439
1801 Main Street
Columbia, SC - 29201
www.scdhhs.gov



Healthy Connections and the Healthy Connections logo are trademarks of South Carolina Department of Health and Human Services and may be used only with permission from the Agency.

From: Carol Winward [<mailto:cwinward@htgconsultants.com>]
Sent: Thursday, July 10, 2014 6:56 AM
To: Kim Cox
Subject: Medicaid Cost Report

In accordance with the Freedom of Information Act, I would like a copy of the most recent Medicaid cost report for the following nursing facilities.

- Sumter Valley Nursing and Rehabilitation Center, 1761 Pinewood Road, Sumter, SC
- Georgetown Healthcare and Rehab, 2715 South Island Road, Georgetown, SC

I would like the reports sent electronically.

Please contact me with any questions.

Thanks.

Carol L. Winward
Director of Research
HTG Consultants, LLC
2 Penn's Way, Suite 300

New Castle, DE 19720
302-322-4100
www.htgconsultants.com



Nikki Haley GOVERNOR

Anthony Keck DIRECTOR

P.O. Box 8206 • Columbia, SC 29202

www.scdhhs.gov

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: _____ \$ _____

Total Amount Due SCDHHS: \$ _____

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:

Nikki Haley GOVERNOR
Anthony Keck DIRECTOR
P.O. Box 8206 • Columbia, SC 29202
www.scdhhs.gov

July 18, 2014

Ms. Carol L. Winard, Director of Research
HTG Consultants, LLC
2 Penn's Way, Suite 300
New Castle, Delaware 19720

Dear Ms. Winward:

This is in response to your request for information from the South Carolina Department of Health and Human Services (SCDHHS) pursuant to the South Carolina Freedom of Information Act (FOIA) dated July 9, 2014 and received by SCDHHS on July 9, 2014. Enclosed is the copy of the SC Nursing Home Medicaid cost report that you requested.

Our expense for extracting this information is \$19.30. 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

Thank you for your request. If you have any questions, please feel free to contact me at (803)-898-0062.

Sincerely,

Constance D. Holloway
Constance D. Holloway
Assistant General Counsel

CDH/lb

CC: Kim Cox

Nikki Haley GOVERNOR

Anthony Keck DIRECTOR

P.O. Box 8206 > Columbia, SC 29202

www.scdhhs.gov

July 11, 2014

TO: Ms. Carol L. Winward, Director of Research

FROM: Adriana Day
Deputy Director and CFO

SUBJECT: Cost of Processing FOIA Request # 017

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	<u>1</u> Hours	\$ <u>10.00</u>
Pages copied at \$.10 per page	<u>93</u> Pages	\$ <u>9.30</u>
Pages faxed at \$.20 per page	<u> </u> Pages	\$ <u> </u>
Shipping and Handling Costs		\$ <u> </u>
Other costs associated with the FOIA request:	<u> </u>	\$ <u> </u>
Total Amount Due SCDHHS:		\$00.00

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

Signature_____
Date

Constance / Linda B

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

RECEIVED

JUL 11 2014

ACTION REFERRAL

SODHHS
Office of General Counsel

TO	DATE
Roberts/Dag/FOIA	7-10-14

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000017	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR cc: Conf, Mullis	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input checked="" type="checkbox"/> FOIA DATE DUE 7-24-14
	<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.			Actual Due Date 7-30-14
2.			
3.			
4.			

Brenda James

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RECEIVED

JUL 11 2014

SCDHHS
Office of General Counsel

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