

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

**ACTION REFERRAL**

<b>TO</b>  <i>Jacobs</i>	<b>DATE</b>  <i>1-20-09</i>
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<b>DIRECTOR'S USE ONLY</b>	<b>ACTION REQUESTED</b>
1. LOG NUMBER  <i>100384</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE <i>1-27-09</i>
2. DATE SIGNED BY DIRECTOR   <i>CC: Emma Cleared 1/26/09, letter attached.</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action

<b>APPROVALS</b> <small>(Only when prepared for director's signature)</small>	<b>APPROVE</b>	<b>* DISAPPROVE</b> <small>(Note reason for disapproval and return to preparer.)</small>	<b>COMMENT</b>
1.			
2.			
3.			
4.			



House of Representatives  
Washington, DC 20515

January 15, 2009

**RECEIVED**

JAN 20 2009

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

SCIENCE AND TECHNOLOGY  
FOREIGN AFFAIRS

BOB INGLIS  
4TH DISTRICT, SOUTH CAROLINA

Emma Forkner  
State Director  
SC Dept of Health and Human Services  
PO Box 8206, 1801 Main Street  
Columbia, SC 29202-8206

Dear Ms. Forkner:

I am writing on behalf of my constituent, Tola W. Bruce, Jr. (213-46-2626), about his Medicaid benefit.

Tola would like to know if he is eligible for Medicaid to resume paying for his Medicare insurance premiums. Your full and fair consideration, consistent with the governing rules and regulations of you agency, would be most appreciated as you review this matter.

Thank you, in advance, for your assistance. I hope you will not hesitate to call me or Dwayne Hatchett of my Spartanburg office at 864-582-6422 if you have any questions or need more information.

I look forward to hearing from you soon.

Sincerely,

A handwritten signature in blue ink that reads "Bob".

Bob Inglis  
Member of Congress

B/dh

Enclosure

cc: Tola W. Bruce, Jr.

WASHINGTON, DC  
330 CANNON HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515  
PHONE: (202) 225-6030  
FAX: (202) 226-1177

SPARTANBURG, SC  
464 EAST MAIN STREET, SUITE B  
SPARTANBURG, SC 29302  
PHONE: (864) 582-6422  
FAX: (864) 573-9478

UNION, SC  
PHONE: (864) 427-2205  
www.house.gov/inglis

GREENVILLE, SC  
105 NORTH SPRING STREET, SUITE 111  
GREENVILLE, SC 29601  
PHONE: (864) 232-1141  
FAX: (864) 233-2160



House of Representatives  
Washington, DC 20515

BOB INGLIS  
4TH DISTRICT, SOUTH CAROLINA

SCIENCE  
FOREIGN AFFAIRS

Privacy Act Release Form

TO WHOM IT MAY CONCERN:

I am aware that the Privacy Act of 1974 prohibits the release of information in my file without my approval. I, Tola W Bruce Jr do hereby authorize Congressman Bob Inglis and/or his staff to all information in my files.

Tola W Bruce Jr  
Signature

324 Quirk Hills Lane  
Address  
Landonville SC 29356

213-446-2626 8/18/46  
Social Security Number Date of Birth

JR. BRUCE @windstream.net  
Email

864-457-3643  
Telephone Number

mailed in Renewal no contact  
Reason for Inquiry

Previous assistance was received from the Members of Congress listed above.

WASHINGTON, DC  
330 CANNON HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515  
PHONE: (202) 225-6030  
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UNION, SC

GREENVILLE, SC  
105 NORTH SPRING STREET, SUITE 111  
GREENVILLE, SC 29601  
PHONE: (864) 232-1141  
FAX: (864) 233-2180



Log # 0384  
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*State of South Carolina*  
*Department of Health and Human Services*

Mark Sanford  
Governor

Emma Forkner  
Director

January 26, 2009

The Honorable Bob Inglis  
United States House of Representatives  
464 East Main Street, Suite 8  
Spartanburg, South Carolina 29302

Dear Congressman Inglis:

Thank you for contacting our agency on behalf of Mr. Tola W. Bruce, Jr., regarding the payment of his Medicare Part B premium by Medicaid.

A member of my staff is assisting Mr. Bruce and will let him know if his application for the *Qualifying Individuals* (QI) program is approved. If eligible, he will receive a refund from the Social Security Administration for premiums deducted since January 1, 2009.

We appreciate your continued interest and support of the South Carolina Medicaid program. If I may be of further assistance on this or any other matter, please let me know.

Sincerely,

A handwritten signature in cursive script that reads "Emma Forkner".

Emma Forkner  
Director

EF/jcle



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

Mark Sanford  
Governor

Emma Forkner  
Director

January 26, 2009

Mr. Tola W. Bruce, Jr.  
324 Irish Hills Lane  
Landrum, South Carolina 29356

Dear Mr. Bruce:

Congressman Bob Inglis contacted our agency on your behalf regarding the payment of your Medicare Part B premium.

The South Carolina Department of Health and Human Services has received your application for the *Qualifying Individual (QI)* program that pays your Medicare Part B premium. Unfortunately, we have a large backlog of applications. We are working to accurately process these applications as quickly as possible. Within 2-3 weeks, you should receive written notice from our agency regarding your eligibility determination. If you are found eligible for the QI program, you will receive a refund from the Social Security Administration for premiums deducted since January 1, 2009.

In South Carolina, QI beneficiaries are only eligible from January through December and must re-apply each year. In October each year, individuals currently eligible for the QI program will receive communication from our agency letting them know to reapply for this benefit in the next calendar year.

If you have any questions, please contact Denise Epps at (803) 898-2505 or (toll-free) at 1-888-549-0820, Ext. 2505, and she will be happy to assist you.

Sincerely,

A handwritten signature in cursive script that reads "Alicia Jacobs".

Alicia Jacobs  
Deputy Director

AJ/cle