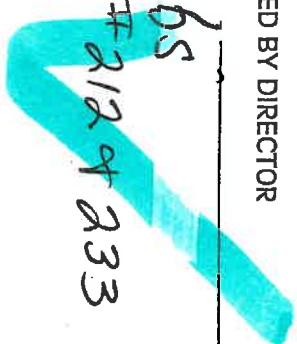


DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>-Jubells</i>	DATE <i>1-21-11</i>
-----------------------	------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>100315</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc Jacobs</i> <i>Ref log # 212 of 233</i> 	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input checked="" 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.			

Gale Lyons · 1850 Atlantic Drive, Unit 632 · Columbia, SC 29210 · (803) 546-3827

January 19, 2011

Alicia Jacobs, Deputy Director  
Department of Health and Human Services  
P.O. Box 8206  
Columbia, SC 29202



Medicaid No.: 1000812  
Appeal No.: 10-MAO-315255-8212

Dear Ms. Jacobs:

I attached a copy of my letter addressed to Robert M. Cannon, Bureau Chief for your review. On January 27, I submitted my application and medical reports to Toya Lewis of your office via U.S. Priority Mail, on the same date that I was admitted to Lexington Medical Center for a thoracentesis procedure to remove fluid from the space between the lining of my lungs. Then, after my second hospitalization at Providence Hospital, I submitted additional documents to Ms. Lewis and Ms. Parker while recovering from a second thoracentesis procedure. Please Google the details of a thoracentesis procedure and the combination of the active impact that Systemic lupus erythematosus (SLE) and rheumatoid arthritis has on the body, and then, maybe your responses of my complaints as inconsequential may change your sensitivity or future responses.

In addition to your failure to acknowledge Ms. Lewis and Ms. Parker's noncompliance of state and federal guidelines, you also neglected and/or failed to inform me of an Evidentiary Hearing (see attached copy of Mr. Cannon's letter). Therefore, I am submitting my complaint to federal and local authorities in positions to produce a reasonable response in compliance of said procedures. Please send future responses to the address on the top of this letter.

Sincerely,

Gale Lyons

cc: Honorable Governor Nikki Haley  
Honorable Senator Jim DeMint  
Honorable Senator Lindsey Graham  
Honorable United States Congressmen Jim Clyburn  
Honorable United States Senator Tom Harkin  
Honorable Commissioner of Social Security Administration Michael J. Astrue

December 13, 2010

Ms. Gale Lyons  
Post Office Box 211201  
Columbia, SC 29221

RE: Gale Lyons v. SCDHHS - Appeals' Case # 10-MAO-315 (ABD-D)  
Medicaid # 101008102


Dear Ms. Lyons:

I am writing in response to your letter dated November 11, 2010 to the South Carolina Department of Health and Human Services' Director, Emma Forkner. After reviewing your letter and discussing this matter with the Appeals and Hearings Division Director, it is my understanding that you have requested a Fair Hearing in response to the denial of your Aged, Blind, and Disabled (ABD) Medicaid benefits. While you may feel that there were medical records not examined when the disability decision was made, the proper forum to address those concerns is the evidentiary Fair Hearing.

Please understand that South Carolina Medicaid decisions are based on Social Security Administration (SSA) Disability criteria that can be found in the Title 20 Code of Federal Regulations and those regulations direct the Medicaid agency in its requests for medical records when someone applies for ABD Medicaid benefits.

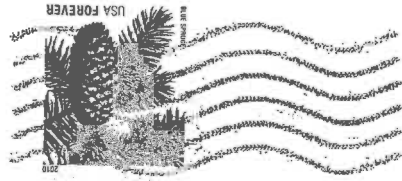
In closing, since you have appealed the denial of your ABD Medicaid benefits, the Division of Appeals and Hearings will process your appeal by scheduling an evidentiary Fair Hearing; however, your application will not be sent back for another initial disability determination. You may certainly reapply at anytime for ABD Medicaid benefits.

Sincerely,

  
Robert M. Carrion, Bureau Chief  
Administrative Services

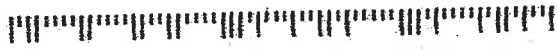
RMC:

cc: Robert French, Appeals



COLUMBIA SC 292  
20 JAN 2011 PM 2 T

Alicia Jacobs, Deputy Director  
Department of Health and Human Services  
P.O. Box 8206  
Columbia, SC 29202



29202+8206

**RECEIVED**

JAN 21 2011

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Gale Lyons  
1850 Atlantic Drive, Unit 632  
Columbia, SC 29210

FAX TRANSMISSION

January 19, 2011

To: Robert M. Cannon, Bureau Chief - Bureau of Administration  
Fax: 803-255-8212

From: Gale Lyons  
Phone: 803-546-3827

Pages including the cover: 24 *pgs.*

**Comments:** Please see letter in respond to your letter dated December 13, 2010.

**Gale Lyons · 1850 Atlantic Drive, Unit 632 · Columbia, SC 29210 · (803) 546-3827**

---

January 19, 2011

Robert M. Cannon, Bureau Chief  
Bureau of Administration  
Post Office Box 8206  
Columbia, South Carolina 29202

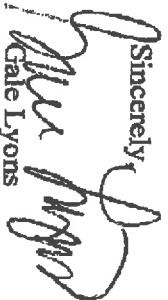
Medicaid No.: 1000812  
Appeal No.: 10-MAO-315255-8212

Dear Mr. Cannon:

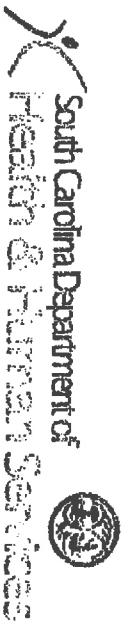
I am in receipt of your letter on behalf of Director of DHHS, Emma Forkner. In your letter, you stated, "SC Medicaid decision is based on SSA criteria, and an Evidentiary Hearing is necessary since you feel that medical notes were excluded" in the initial process of my Medicaid application. Please be aware that I do not feel that pertinent medical notes were excluded from the initial examination process of my Medicaid Application, my complaint is based on the copy of my file in your office and documented receipts from the United States Postal Service for Priority Mail. It is evident that Toya Lewis at the Medicaid office did not submit medical notes to Jeri Parker at the Social Security Disability Determination office. When the file was transferred to Ms. Parker, I submitted medical notes and a list of current physicians to her, and she excluded important information from the initial determination process.

As a citizen of the state, I expect state and local government agencies to operate in accordance to state and federal government procedures. Intentionally, abridging and maneuvering standard procedures and negatively affecting the initial process is harmful to me and to other citizens of the state. It is also demoralizing for persons in authority to resolve the problem to calculate letters directing me into alternate directions, with awareness that Ms. Lewis and Ms. Parker did not follow initial federal or state procedures in processing my application. Therefore, I am sending my complaint and copies of Alicia Jacobs's and your response to the authorities of the state and federal government for a reasonable resolution.

For future correspondence, please use the mailing address to the address at the top of this letter.

Sincerely,  
  
Gale Lyons

cc: Honorable Governor Nikki Haley  
Honorable Senator Jim DeMint  
Honorable Senator Lindsey Graham  
Honorable United States Congressmen Jim Clyburn  
Honorable United States Senator Tom Harkin  
Honorable Commissioner of Social Security Administration Michael J. Astrue



Emma Fortner • Director  
Mark Sanford • Governor

November 22, 2010

Gale Lyons  
PO Box 211201  
Columbia, South Carolina 29221

Dear Ms. Lyons:

Thank you for contacting this agency regarding your June 2010 Medicaid denial.

Your application for Medicaid's Aged, Blind or Disabled program was denied on June 17, 2010 because you did not meet disability criteria. Your appeal request was received on June 29, 2010 and a hearing was scheduled. Since your initial request, your hearing date has been rescheduled several times and it is currently scheduled for November 24, 2010.

Your hearing officer, Robert French, plans to continue with the hearing date as scheduled. You may bring any documentary and testimonial evidence that you feel supports your disability claim. Any information you provide will be used in the final appeal decision. Although your application cannot be returned to its initial status, you may reapply for Medicaid benefits at any time. If you have any questions regarding the appeals process, please contact Mr. French at (803) 898-2600.

An alternate health insurance option called *Augeo Benefits* offers a variety of health insurance plans from top-rated insurance carriers at *affordable* rates. These plans include major medical, basic medical, critical illness, dental, accidental and term life insurance. Some plans are available regardless of pre-existing conditions. To inquire about their insurance premium rates, please call 1-866-273-5613.

Enclosed is information on other programs and organizations that can assist residents in South Carolina with their healthcare needs, prescriptions and daily living expenses. If you have additional questions or concerns about the Medicaid program, please contact Jenny Lynch in Constituent Services at (803) 898-3965.

Sincerely,

Alicia Jacobs  
Deputy Director

AJ/I  
Enclosures

Medicaid Eligibility and Beneficiary Services  
P.O. Box 8206 • Columbia, South Carolina 29202-8206  
(803) 898-2502 • Fax (803) 255-8235



Emma Forster • Director  
Mark Sanford • Governor

January 4, 2011

Gale Lyons  
Post Office Box 211201  
Columbia, South Carolina 29221

Dear Ms. Lyons:

Thank you for contacting this agency regarding your June 2010 Medicaid denial and appeal process.

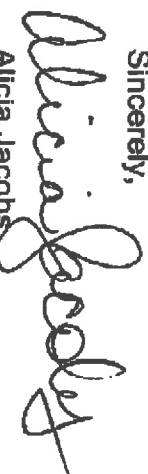
After several rescheduled dates, your hearing was scheduled for November 24, 2010 at 11:00 AM. Because you did not appear at your scheduled hearing, your appeal was dismissed and you were notified via certified mail dated December 6, 2010.

As our previous letter mentions, the fair hearing process allows the beneficiary to provide any documentary and testimonial evidence that may support the original decision. Although your application cannot be returned to its initial status as you requested, you may reapply for Medicaid benefits at any time.

You continue to receive limited benefits through the *Family Planning* program which covers services such as birth control, pap smears when you are receiving birth control, lab work, doctor visits, exams and family planning counseling.

If you have additional questions or concerns about the Medicaid program, please contact Jenny Lynch in Constituent Services at (803) 898-3965.

Sincerely,

  
Alicia Jacobs  
Deputy Director

AJ/jl

Medicaid Eligibility and Beneficiary Services  
P.O. Box 8206 • Columbia, South Carolina 29202-8206  
(803) 898-2602 • Fax (803) 255-8235

01/20/2011 02:18PM