

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Floyd</i>	DATE <i>5-2-08</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000567</i>	<input checked="" type="checkbox"/> Prepare reply for the Director's signature DATE DUE <i>5-12-08</i>
2. DATE SIGNED BY DIRECTOR <i>cc: Jacobs Cleared 5/14/08 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.			

LINDSEY O. GRAHAM
SOUTH CAROLINA



290 RUSSELL SENATE OFFICE BUILDING
WASHINGTON, DC 20510
(202) 224-5972

UNITED STATES SENATE

April 25, 2008

RECEIVED

MAY 02 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Ms. Emma Forkner
Director
SC Department of Health and Human Services
PO Box 8206
Columbia, SC 29202-8206

Re: Tabatha Simpson
SS# 247-45-5614

Dear Ms. Forkner:

Enclosed is a copy of correspondence I have received from the above named constituent. I believe you will find it self-explanatory.

Your reviewing this material and providing any assistance or information possible under the governing statutes and regulations will be greatly appreciated. Thank you for your attention in this matter. I look forward to hearing from you soon.

Sincerely,

A handwritten signature in dark ink, appearing to read "L. Graham", written over a horizontal line.

Lindsey O. Graham
United States Senator

LOG/lt

Please refer to case (500203) in your response.

Please reply to: Senator Lindsey Graham
530 Johnnie Dodds Boulevard, Suite 202
Mt Pleasant, South Carolina 29464

508 HAMPTON STREET
SUITE 202
COLUMBIA, SC 29201
(803) 933-0112

401 WEST EVANS STREET
SUITE 226B
FLORENCE, SC 29501
(843) 689-1505

101 EAST WASHINGTON STREET
SUITE 220
GREENVILLE, SC 29601
(864) 250-1417

530 JOHNNIE DODDS BOULEVARD
SUITE 202
MOUNT PLEASANT, SC 29464
(843) 849-3887

140 EAST MAIN STREET
SUITE 110
ROCK HILL, SC 29730
(803) 366-2828

135 EAGLES NEST DRIVE
SUITE B
SENECA, SC 29678
(894) 888-3330

APR 9 2000

AUTHORIZATION FORM

I hereby authorize United States Senator Lindsey O. Graham to receive any information from agencies pertaining to my request below. This authorization is in accordance with the provisions of the Privacy Act of 1974.

(PLEASE TYPE OR PRINT BELOW.)

Name: Tabatha Simpson Phone: (843) 879-9750 / (843) 821-215
Address: 775 Parkway Bld. Apt. 19-C
City: Summerville State: SC Zip: 29453
Social Security Number: 247-43-5614 VA Number: _____

In the space below, briefly describe the problems that you are experiencing and explain exactly what you would like Senator Graham to do on your behalf. Without this information, it will be impossible for Senator Graham to adequately assist you. (If you need more space, please use the back of this form or an additional piece of paper.)

I am trying to get help with getting medicare
a medicare for my 7yr. old daughter. I am
a single parent and attending Jernsd
Technical College trying to better our lives
and its so hard to get insurance and I
don't know what kind is out there. I can
qualify for it but can't get one of the two mentioned. I can't afford
to get it yet my job doesn't need the help through your taking time
Signature: Tabatha Simpson Date: 3-31-00 OS help one.

Please return form to:

U.S. Senator Lindsey O. Graham
530 Johnnie Dodds Boulevard, Suite 202
Mt. Pleasant, South Carolina 29464



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✓

State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

May 14, 2008

The Honorable Lindsey Graham
United States Senate
530 Johnnie Dods Boulevard, Suite 202
Mount Pleasant, South Carolina 29464

Dear Senator Graham:

Thank you for your correspondence regarding Medicaid eligibility and the healthcare needs of Ms. Tabatha Simpson and her family (case # 500203).

A member of our staff has been in direct contact with Ms. Simpson to address her questions and concerns regarding Medicaid eligibility and the rules and regulations governing the program. We also mailed her information on other programs and organizations that can assist residents in South Carolina with their healthcare services, prescriptions, inpatient hospitalization and daily living needs.

Thank you for 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,

Emma Forkner

Emma Forkner
Director

EF/fcol



State of South Carolina
Department of Health and Human Services

JMS #0507

Mark Sanford
Governor

Emma Forkner
Director

May 14, 2008

Ms. Tabatha Simpson
775 Parkway Boulevard
Apt. 19-C
Summerville, South Carolina 29483

Dear Ms. Simpson:

Senator Lindsey Graham contacted our agency on your behalf regarding Medicaid eligibility and your daughter's healthcare needs.

Medicaid eligibility is based on federal and state rules. To qualify for Medicaid, an individual must meet certain financial and categorical guidelines. We have enclosed an overview of the Medicaid program. If you feel you and your daughter may be eligible for Medicaid, please complete the enclosed application and return it to the Dorchester Medicaid Office at Post Office Box 56, St. George, SC 29477 or apply in person at 201 Johnson Street, Building 17 in St. George.

We have also enclosed information on other programs and organizations that can assist residents in South Carolina with their healthcare services, prescriptions, inpatient hospitalization and daily living needs.

If you have any questions about the Medicaid program, please contact Ms. Jennifer Lynch at (803) 898-3965, and she will be happy to assist you.

Sincerely,

Raymond J. Floyd

Raymond J. Floyd
Deputy Director

RJF/ccl
Enclosures