

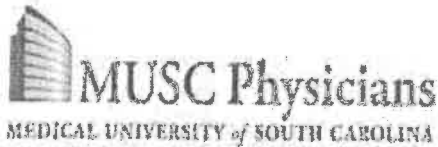
DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
Roberts/Supra/FOIA	3-29-13

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000302	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR cc: Coy, DeFede Cleared 4/2/13, letter attached.	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE 4-12-13 <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.			



RECEIVED

MAR 29 2013

Department of Health & Human Services
OFFICE OF THE DIRECTOR

MUSC Physicians
Compliance Department
150 Ashley Ave
PO BOX 250583
Charleston, SC 29425
(843) 876-1321

SC Dept. of Health and Human Services
Bureau of Public Information
P.O. Box 8206
Columbia, SC 29202-8206

March 25, 2013

Good Morning,

This letter is a request for information under the FOIA (Freedom of Information ACT). I would like to obtain the South Carolina Medicaid produce code utilization broken down by specialty and code. The specific codes I am interested in are the Evaluation and Management codes 99201-99215, 99221-99233, 99241-99255, and 99281-99285 for all specialties. Attached is a one-page example of what I need. I am interested in the calendar year 2011. These codes will be used for statistical analysis. Please send the information to my attention at the address or email listed below. If there are any questions or concerns, I can be reached at (843) 876-1321. Thank you for your assistance.

Sincerely,

Christina Spivey, CPC

Christina Spivey, CPC
Compliance Reviewer
MUSC Physicians
Medical University of South Carolina
150 Ashley Ave, Room 401
Charleston, SC 29425
Phone: 843-876-1321
Fax: 843-876-1322
Email: spiveycc@muscc.edu

Example

Time Period		2010							
Provider Specialty Code	Provider Specialty	Procedure Code	Procedure	Net Payment*	Units				
02	ALLERGY AND IMMUNOLOGY	99202	E/M OFFICE/OP SERV NEW PATIENT	\$205.24	4				
02	ALLERGY AND IMMUNOLOGY	99203	E/M OFFICE/OP SERV NEW PATIENT	\$5,884.53	87				
02	ALLERGY AND IMMUNOLOGY	99204	E/M OFFICE/OP SERV NEW PATIENT	\$61,852.97	604				
02	ALLERGY AND IMMUNOLOGY	99205	E/M OFFICE/OP SERV NEW PATIENT	\$7,805.95	66				
02	ALLERGY AND IMMUNOLOGY	99211	E/M OFFICE/OP SERV EST PATIENT	\$186,910.21	12,640				
02	ALLERGY AND IMMUNOLOGY	99212	E/M OFFICE/OP SERV EST PATIENT	\$8,330.95	303				
02	ALLERGY AND IMMUNOLOGY	99213	E/M OFFICE/OP SERV EST PATIENT	\$225,939.89	4,990				
02	ALLERGY AND IMMUNOLOGY	99214	E/M OFFICE/OP SERV EST PATIENT	\$194,489.68	2,931				
02	ALLERGY AND IMMUNOLOGY	99215	E/M OFFICE/OP SERV EST PATIENT	\$9,770.74	113				
02	ALLERGY AND IMMUNOLOGY	99221	E/M IP SERV INITIAL HOSP CARE	\$84.42	4				
02	ALLERGY AND IMMUNOLOGY	99222	E/M IP SERV INITIAL HOSP CARE	\$588.11	14				
02	ALLERGY AND IMMUNOLOGY	99223	E/M IP SERV INITIAL HOSP CARE	\$309.96	6				
02	ALLERGY AND IMMUNOLOGY	99231	E/M IP SERV SUBSEQ HOSP CARE L	\$253.97	12				
02	ALLERGY AND IMMUNOLOGY	99232	E/M IP SERV SUBSEQ HOSP CARE L	\$1,885.50	138				
02	ALLERGY AND IMMUNOLOGY	99233	E/M IP SERV SUBSEQ HOSP CARE L	\$233.34	28				
02	ALLERGY AND IMMUNOLOGY	99241	OFFICE CONSULT.-NEW OR ESTAB.-	\$2.73	1				
02	ALLERGY AND IMMUNOLOGY	99242	OFFICE CONSULT.-NEW OR ESTAB.-E	\$364.50	5				
02	ALLERGY AND IMMUNOLOGY	99243	OFFICE CONSULT.-NEW OR ESTAB.-	\$16,232.65	181				
02	ALLERGY AND IMMUNOLOGY	99244	OFFICE CONSULT.-NEW OR ESTAB.-	\$171,480.81	1,204				
02	ALLERGY AND IMMUNOLOGY	99245	OFFICE CONSULT.-NEW OR ESTAB.-	\$18,809.06	114				
02	ALLERGY AND IMMUNOLOGY	99252	E/M CONSULT INITIAL IP CONSULT	\$62.10	1				
02	ALLERGY AND IMMUNOLOGY	99253	E/M CONSULT INITIAL IP CONSULT	\$94.41	1				
02	ALLERGY AND IMMUNOLOGY	99254	E/M CONSULT INITIAL IP CONSULT	\$1,777.36	13				
02	ALLERGY AND IMMUNOLOGY	99255	E/M CONSULT INITIAL IP CONSULT	\$166.46	1				

MUSC
MEDICAL UNIVERSITY
OF SOUTH CAROLINA

University Medical Associates
Compliance Department
150 Ashley Avenue
P.O. Box 250583
Charleston • SC 29425

RETURN SERVICE REQUESTED

D S AUTH 12
COLUMBIA

Handwritten signature

Hasler
03/25/2013
US POSTAGE



FIRST-CLASS MAIL
PRSR
\$00.43
ZIP 29403
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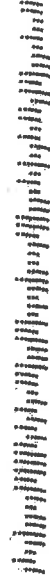
SC. Dept Health and Human
P.O. Box 8206
Columbia SC 29202-8206

RECEIVED

MAR 29 2013

Department of Health & Human Services
OFFICE OF THE DIRECTOR

2520288206





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:

Log #302



April 12, 2013

Christina Spivey
MUSC Physicians Compliance Department
150 Ashley Avenue
Post Office Box 250583
Charleston, South Carolina 29425

Ms. Spivey,

This is in response to your request for information from the South Carolina Department of Health and Human Services (DHHS) pursuant to the South Carolina Freedom of Information Act (FOIA) dated March 25, 2013 and received by DHHS on March 29, 2013. Enclosed is a document with the information requested.

Our expense for extracting and mailing this information is forty nine and 95/100 dollars (\$49.95). These documents are true and accurate copies kept in the normal course of the Department's business. 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, you may contact Mr. John Supra, Deputy Director and Chief Information Officer, at (803) 898-2502.

Sincerely,



Shealy Reibold
Assistant General Counsel

SR/lb

Enclosures