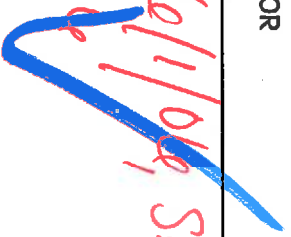


DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Bouding</i>	DATE <i>7-17-06</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000091</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cleaved on 6/11/06, Same as Log # 2016</i> 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>7-26-06</i> <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.			

DHHS

FAX COVER SHEET

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JUL 17 2006

Department of Health & Human Services
OFFICE OF THE DIRECTORDr. Michael Harless
Andrea Trader FNP701 Medical Park Drive
Suites 301
Hartsville, SC 29550Phone: (843) 383-5191
Fax: (843) 332-9229

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To: Dr. Marcia BurtonFrom: A. Trader FNP / BarbaraFax #: 803-255-3435Date: 5-23-06↑
mailedPages: 2 including cover

DOB

RE: Ana Benjamin DOB 3-30-56 ac: _____

G-1-06

no visits

Comments:

fax to manager -
 message do log - letter should
 need attending physician must be signed
 to me -

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 no visits
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**The
Medical Group**

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Healthcare for the Entire Family
Post Office Box 1896
Hartsville, South Carolina 29551
(843) 383-5191

JUL 17 2006

May 18, 2006

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Attention Marion Burton:

This letter concerns Ms. Ann Benjamin, DOB 03/30/56. She is covered by Medicaid and it has come to my attention that she needs approval for more than 12 visits per year. This woman has multiple medical problems, and requires frequent follow up by her primary care as well as specialty providers. Ms. Benjamin suffers from recurrent seizures and is on multiple medications for this. Her seizures have become more frequent recently and she has been unable to follow up as needed with her neurologist, Dr. Shijun Pan, because she has not enough Medicaid visits and obviously cannot afford to pay out of pocket.

Ann Benjamin also suffers from a disk herniation in her neck, hypertension, migraine headaches, Gerd and a history of traumatic brain injury.

Therefore, considering her multiple medical problems, we request that her number of Medicaid visits be increased so that she can be monitored appropriately.

Thank you for your attention to this matter.

Andrea Trader, FNP

Michael F. Ambrose, M.D., Family Practice
Abraham Arcephanthu, M.D., Family Practice
T. J. Bell, Jr., M.D., Family Practice
William A. Davis, Jr., D.O., Family Practice
Robert L. Elder, M.D., Family Practice
Michael E. Hartless, M.D., Family Practice
William H. Long, M.D., Family Practice
John C. Ropp, III, M.D., Family Practice
Tresha Taylor Ward, M.D., Family Practice

M. B. Nickles, M.D., Family Practice/Industrial Medicine
Susan D. Reynolds, M.D., FACP Internal Medicine
William H. Woodberry, M.D., Internal Medicine
Shant K. Carter, FNP
Andrea B. Trader, FNP
Donna L. Driggers, MS, APRN, BC, ADM, CDE

TRANSMISSION VERIFICATION REPORT

TIME : 05/23/2006 16:03
NAME : USC UNITV
FAX : 803-255-3435
TEL : 803-255-3400

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