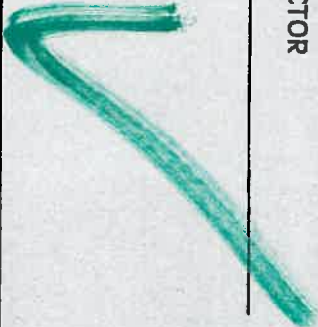


**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Singleton</i>	DATE <i>7-7-08</i>
------------------------	---------------------------

DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER <i>300013</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____ <input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input checked="" type="checkbox"/> Necessary Action		
2. DATE SIGNED BY DIRECTOR 			

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



DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of Inspector General

Washington, D.C. 20201

JUL 01 2008

*Log: Singletary
N/A*

RECEIVED

JUL 03 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Robert M. Kerr
Medicaid Director
Department of Health and Human Services
Post Office Box 8206
Columbia, SC 29209-8206

Dear Mr. Kerr:

Re: Jonathan R. Strange
221 Providence Way
Easley, SC 29642
SANCTION AUTHORITY: 1128(a)(1)
OI File No. 4-03-40615-9

Dentist
DOB: 05/30/1961
SSN: 238-15-7371
LICENSE NO: 30-3576

Effective with the date of this notice, the subject has been reinstated as a provider of services covered under the title XVIII (Medicare) program.

Pursuant to Federal regulations at 42 CFR 1001.3003(b), you are hereby requested to reinstate the subject as a provider of services covered under the title XIX (Medicaid) program. This action makes Federal matching funds available for payments made to the subject for services rendered after the effective date of reinstatement under title XIX. However, if the State has imposed a sanction under its own authority independent from our action under section 1128, reinstatement to the title XIX program is not mandatory.

If you have any questions about this reinstatement, please contact Kathy Pettit, Investigative Analyst, Office of Investigations, Room N2-01-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. The telephone number for that office is (410) 786-5198.

Sincerely,

Maureen R. Byer

Maureen R. Byer
Director
Exclusions Staff
Office of Investigations



DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of Inspector General

Washington, D.C. 20201

JUL 01 2008

Robert M. Kerr
Director
Department of Health and Human Services
P.O. Box 8206
Columbia, SC 29202-8206

Dear Mr. Kerr:

Re: Jonathan R. Strange
221 Providence Way
Easley, SC 29642
SANCTION AUTHORITY: 1128(a)(1)
OI File No. 4-03-40615-9

Dentist
DOB: 05/30/1961
SSN: 238-15-7371
LICENSE NO: 30-3576

Effective with the date of this notice, the subject has been reinstated as a provider of services covered under the title XVIII (Medicare) program.

You are hereby requested to reinstate the subject as a provider of services covered under the title XX program for covered services rendered after the effective date of this reinstatement to the title XX program. However, if the State has imposed a sanction under its own authority independent from our action under section 1128, reinstatement to the title XX program is not mandatory.

If you have any questions about this reinstatement, please contact Kathy Pettit, Investigative Analyst, Office of Investigations, Room N2-01-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. The telephone number for that office is (410) 786-5198.

Sincerely,

Maureen R. Byer

Maureen R. Byer
Director
Exclusions Staff
Office of Investigations