

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Singlehurn</i>	DATE <i>3/25/11</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <div style="text-align: center; font-size: 2em; color: blue; font-weight: bold;">V</div> <i>000435</i>	<input type="checkbox"/> I Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Mr. Keith QMS file</i>	<input type="checkbox"/> I Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> I FOIA DATE DUE _____ <input checked="" type="checkbox"/> Necessary Action

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



MAR 23 2011

RECEIVED

MAR 25 2011

Department of Health & Human Services
OFFICE OF THE DIRECTOR

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

Dear Mr. Kerr:

Re: John P. Cottle	Pharmacist
107 Greenbriar Road	DOB: 01/10/1957
Greenwood, SC 29649	SSN: 451-11-4651
LICENSE NO.: 5641	UPIN: None
MEDICARE PROVIDER NO.: None	MEDICAID PROVIDER NO.: None
SANCTION AUTHORITY: 1128(a)(1)	NPI: None
OI File No. 4-00-41296-9	

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, Investigations Analyst, Office of Investigations, Office of Inspector General, Suite 210, 7175 Security Boulevard, Baltimore, Maryland 21244. Mrs. Pettit may be reached on (410) 281-3063.

Sincerely,

Director
Exclusions Staff
Office of Investigations



MAR 23 2011

RECEIVED

MAR 25 2011

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: John P. Cottle
107 Greenbriar Road
Greenwood, SC 29649
LICENSE NO.: 5641
MEDICARE PROVIDER NO.: None
SANCTION AUTHORITY: 1128(a)(1)
OI File No. 4-00-41296-9

Pharmacist
DOB: 01/10/1957
SSN: 451-11-4651
UPIN: None
MEDICAID PROVIDER NO.: None
NPI: None

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, Investigations Analyst, Office of Investigations, Office of Inspector General, Suite 210, 7175 Security Boulevard, Baltimore, Maryland 21244. Mrs. Pettit may be reached on (410) 281-3063.

Sincerely,

Director
Exclusions Staff
Office of Investigations