

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO Wells	DATE 10-17-07
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <div style="text-align: center; font-size: 1.2em;">000207</div>	<input checked="" type="checkbox"/> Prepare reply for the Director's signature DATE DUE 10-24-07 <input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action
2. DATE SIGNED BY DIRECTOR <div style="text-align: center;"> Cleared 10/19/07, letter attached </div>	

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.			

October 12, 2007

Ms. Emma Forkner, Director of HHS
1801 Main Street
Columbia, SC 29201

Dr. Stan Butkus, Director of DDSN
3440 Harden Street Ext.
Columbia, SC 29203

re: Thomas P. Hering, SSN 305-72-8323

Dear Ms. Forkner and Dr. Butkus;

We are requesting a fair hearing on the proposed termination of our son's Medicaid benefits. Attached is a copy of the notice of termination. We are also requesting a written explanation of why our son's benefits are being terminated.

We are requesting a "de nova" hearing at the Department of Health & Human Services. We are also requesting that our son's benefits continue during this appeal.

*Richard Hering
Yvette Hering*

Yvette & Richard Hering
10 Haven Ridge Place
Columbia, SC 29212

RECEIVED

OCT 16 2007

Department of Health & Human Services
OFFICE OF THE DIRECTOR

*Log: Wells
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Date: 10/03/2007

Payee Name: YVETTE DIANE HERING
 Recipient Name: THOMAS P HERING
 Mailing Address: 10 HAVEN RIDGE PL
 COLUMBIA SC 29212-2882

Budget Group: 47305306
 HH#: 100253880
 ID Number: 4730530601
 SS Number: 305-72-8323
 32FTATE

The Social Security Administration has told us that your Supplemental Security Income (SSI) check has stopped. Your Medicaid will stop, too. Your Medicaid will end on 11/01/2007. This action is required by the code of Federal Regulations Section 435.1003 and Medicaid Policy Manual section 9.02.02.

If you disagree with the decision to stop your SSI check you should contact your local Social Security office at once to ask for a hearing.

You may continue to get Medicaid if you:

- Are a patient in a hospital or nursing home;
- Need nursing home care or intermediate care in a mental retardation facility, but you decide to stay home and receive Home and Community Based services;
- Live in a licensed residential care facility;
- Are a pregnant woman or child under age 19 or have children living with you; or
- Are 65 or older, blind, or disabled and have low income.

You may be eligible for Medicaid to pay your Medicare Part B premium if you have low income.

If you believe you may be eligible because you may meet one of the groups described above, you should contact your county Department of Health and Human Services at:

Address: Lexington City Hall
 112 West Hospital Drive
 West Columbia SC 29169-0000

Telephone: 803 785-2966

If your SSI check has not stopped, contact your county Department of Health and Human Services at once.

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OFFICE OF THE DIRECTOR

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Log 0807

State of South Carolina

Department of Health and Human Services

Mark Sanford
Governor

October 19, 2007

Emma Forkner
Director

Yvette & Richard Hering
10 Haven Ridge Place
Columbia, South Carolina 29212

RE: Appeal Request of Thomas P. Hering
Medicaid ID# 4730530601
Appeals Case #07-U-107

Dear Mr. and Ms. Hering:

Your letter concerning the termination of your son's Medicaid benefits has been forwarded to the Division of Appeals. I have attempted to reach you by telephone to discuss this with you directly, but I have been unable to reach you.

Based on the information you provided, the decision to terminate Thomas's Medicaid was based on the termination of his Supplemental Security Income (SSI) benefits by the Social Security Administration. Under Section 1634 of the Social Security Act, states may enter into an agreement with the Social Security Administration to accept their determination of eligibility for medical assistance (Medicaid) for aged, blind or disabled individuals. The state of South Carolina has entered such an agreement. Therefore, as an SSI recipient, Thomas was also eligible for Medicaid. Now that the Social Security Administration has terminated his SSI, he is no longer Medicaid eligible under the SSI category.

The decision to terminate SSI was not made by the Department of Health and Human Services. Therefore, we lack jurisdiction to grant your request for an administrative fair hearing. As the matter now stands, your only avenue of possible relief in this matter is to seek remedy through the Social Security Administration's appeal process.


However, the "Medicaid Benefit Changes" notice of October 3, 2007, advises you that Thomas may be eligible to continue receiving Medicaid under a category other than SSI if you contact the Lexington County Department of Health and Human Services and make an application. Their address and phone number are listed in the notice. (Based on the information in our data match with Social Security, his income appears to be below the income limit of the Aged, Blind or Disabled (ABD) category of Medicaid.) Also, as a Medicare recipient, if he is not eligible to continue receiving Medicaid under the ABD category, he can request Lexington County

Mr. and Ms. Hering
October 19, 2007
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DHHS evaluate his eligibility under the Specified Low-Income Medicare Beneficiaries (SLMB) program. This program is not Medicaid, but it will allow the state of South Carolina to continue to pay his Medicare premiums rather than Social Security deducting them from his check.

Should there be any questions, please feel free to contact me at (803) 898-2600.

Sincerely,


Hastine G. Crouch
Director, Division of Appeals

Cc: William Wells, Deputy Director, Office of Finance and
Administration, SCDHHS