

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

ACTION REFERRAL

TO <i>Bowling</i>	DATE <i>7-26-06</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOC NUMBER <i>CC0114</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cleved Spaford letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>8-4-06</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.			

Ros. Bowling
"Approp. Sign"

RECEIVED

JUL 26 2006

Department of Health & Human Services
OFFICE OF THE DIRECTOR

To Val Wins

Val, I do not think
physical therapy is
subject to limit,
in center limit,
and I don't see
what they are
asking for?



School of Medicine
Department of Orthopaedic Surgery

Walton W. Curl, M.D.
Chairman

Spine Surgery
Norman Chutkan, M.D.

Sports Medicine
D. Monte Hunter, M.D.
Walton W. Curl, M.D.
Joel S. Brenner, M.D.
Marc E. Ward, M.D.

Hand & Upper Extremity
Marcus Fulcher, M.D.

Pediatric Orthopaedic Surgery
Styles Bertrand, M.D.
Jonathan Pellett, M.D.

Orthopaedic Trauma
Michael Tucker, M.D.
Patrick B. Leach, M.D.

Total Joint Replacement
Scott Corpe, M.D.
Marc E. Ward, M.D.
Timothy Young, D.O.

Podiatry
Janaki Nadarajah, D.P.M.

Shoulder / Elbow Surgery
Marc E. Ward, M.D.

Foot and Ankle
Patrick B. Leach, M.D.

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JUL 25 2006

MEDICAL SERVICES
DHHS

RECEIVED

JUL 26 2006

Department of Health & Human Services
OFFICE OF THE DIRECTOR

June 29, 2006

Medicaid Physicians Services
P. O. Box 8206
Columbia, South Carolina 29202

RE: Joshua VanBuren
DOB: 9/13/84

To Whom It May Concern:

Please accept this letter of medical necessity on behalf of Joshua Van Buren for physical therapy. Joshua has cerebral palsy complicated by complex regional pain syndrome. Therapy is needed to improve his symptoms and to prevent regression of the CRPS.

If there are any questions regarding Joshua, please feel free to contact me at (706) 721-2849.

Sincerely,

Styles Les Bertrand, M.D.
Associate Professor of Orthopedics
Orthopedic Department, MCG
1120 15th Street, BP-2109

Augusta, GA 30912



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Robert M. Kerr
Director

August 22, 2006

Styles Les Bertrand, M.D.
Associate Professor of Orthopedics
Orthopedic Department, MCG
1120 15th Street, BP-2109
Augusta, Georgia 30912-4030

Dear Dr. Bertrand:

Thank you for your letter regarding Medicaid reimbursement for physical therapy services for your patient, Joshua VanBuren. We appreciate the opportunity to assist you.

Pursuant to South Carolina Medicaid policy, coverage of physical therapy for recipients over twenty-one years of age is limited to the following situations:

- The attending physician prescribes therapy in the plan of treatment during an inpatient hospital stay and therapy continues on an outpatient basis until that plan of treatment is concluded.
- The attending physician prescribes therapy as a direct result of outpatient surgery.
- The attending physician prescribes therapy to avoid an inpatient hospital admission.

A licensed physical therapist performing these services must do so under the direct supervision of a physician and must be employed by this physician in order for services to be covered. The physician or therapist must be in continuous attendance during these procedures. The supervising physician is reimbursed for these services.

We regret that we cannot be of more assistance in this matter. Thank you for your participation in the South Carolina Medicaid program. If you have any questions or if we can be of further assistance, please contact Mr. William Feagin, Team Leader in the Division of Physician Services, at (803) 898-2660.

Sincerely,

Susan B. Bowling
Susan B. Bowling
Deputy Director

SBB/gwd

Log # 114