

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

**ACTION REFERRAL**

<b>TO</b> <i>Bowling</i>	<b>DATE</b> <i>7-30-07</i>
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<b>DIRECTOR'S USE ONLY</b>	<b>ACTION REQUESTED</b>
1. LOG NUMBER <b>000051</b>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cleared 8/7/07 per attached letter.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <b>8-8-07</b>
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

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



House of Representatives  
Washington, DC 20515

BOB INGLIS  
4TH DISTRICT, SOUTH CAROLINA

July 24, 2007

JUDICIARY  
EDUCATION AND WORKFORCE  
SCIENCE

**RECEIVED**

JUL 27 2007

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Bryan Kost, Government Liaison  
South Carolina Department of Medicaid  
South Carolina Department of Health and Human Services  
PO Box 8206  
Columbia, SC 29202-8206

Dear Bryan:

I am writing on behalf of my constituent, Jesus Pinon, IV (453-67-1637) about his hearing loss.

Jesus states that he has a cochlear implant in his right ear. The external processing device has stopped functioning properly. He would like to know if Medicaid will pay for the cost to replace the external processing device. Your full and fair consideration, consistent with governing rules and regulations, would be most appreciated as you review this matter.

Thank you, in advance, for your assistance. I hope you will not hesitate to call me or Dwayne Hatchett of my Spartanburg office at 864-582-6422 if you have any questions or need more information.

I look forward to hearing from you soon.

Sincerely,

Bob Inglis  
Member of Congress

BI/dh

Enclosure

cc: Jesus Pinon, IV

WASHINGTON, DC  
330 CANNON HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515  
PHONE: (202) 226-8030  
FAX: (202) 226-1177

SPARTANBURG, SC  
464 EAST MAIN STREET, SUITE 8  
SPARTANBURG, SC 29302  
PHONE: (864) 582-6422  
FAX: (864) 573-9478

GREENVILLE, SC  
105 NORTH SPRING STREET, SUITE 111  
GREENVILLE, SC 29601  
PHONE: (864) 232-1141  
FAX: (864) 233-2160

UNION, SC  
PHONE: (864) 427-2205  
www.house.gov/inglis



House of Representatives  
Washington, DC 20515

RECEIVED  
JUL 24 2007

BY: .....

BOB INGLIS  
4TH DISTRICT, SOUTH CAROLINA

JUDICIARY  
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SCIENCE

Privacy Act Release Form

TO WHOM IT MAY CONCERN:

I am aware that the Privacy Act of 1974 prohibits the release of information in my file without my approval. I, Jessie Pinson IV do hereby authorize Congressman Bob Inglis and/or his staff to all information in my files.

Signature Jessie Pinson IV

Address JESSE PINSON IV (JESSIE)

1892 Boiling Springs Rd.

SPARTANBURG, S.C. 29303-2244

453-67-1637  
Social Security Number

Home 864-541-7028 Cell 864-2374783  
Telephone Number

Cindy Thompson Cindy Thompson

I HAVE BEEN AUTHORIZED TO EXCEPT  
HIS & ALLS BEARANCE OF HIS HEARING AND  
Blindness

PLEASE  
HELP,  
THANK  
YOU!

WASHINGTON, DC  
390 CANNON HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515  
PHONE: (202) 225-6030  
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PHONE: (864) 232-1141  
FAX: (864) 233-2160



*State of South Carolina*  
*Department of Health and Human Services*

Mark Sanford  
Governor

Emma Forkner  
Director

August 7, 2007

The Honorable Bob Inglis  
United States House of Representatives  
464 East Main Street, Suite 8  
Spartanburg, South Carolina 29302

Dear Representative Inglis:

Thank you for your letter on behalf of your constituent, Jesus Pinon, IV, regarding South Carolina Medicaid's coverage of a cochlear implant external processing device. We appreciate the opportunity to be of assistance.

Medicaid's coverage of hearing aid devices is limited to eligible beneficiaries under 21 years of age and/or those enrolled in certain Medicaid waiver programs. Neither of these criteria apply to Mr. Pinon, however, he is Medicare-eligible. Since they may be able to provide repairs or replacement of his external processing device, please contact Karen King at Medicare (615) 782-4515, to discuss this possibility.

I hope this information is helpful. Should you need additional Medicaid assistance, please contact Mr. James Assey, Division Director of Durable Medical Equipment Services, at (803) 898-2876.

Sincerely,

A handwritten signature in black ink that reads "BZ Giese".

Melanie "BZ" Giese, RN  
Bureau Director

MG/gar

