

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Bowling</i>	DATE <i>7-7-06</i>
DIRECTOR'S USE ONLY	
1. LOG NUMBER <i>000040</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cleared 7/14/06, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>7-18-06</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.			

Attn: Nancy
PIEDMONT SURGICAL ASSOCIATES, P.A.

Rock Hill Medical Park ♦ 200 South Herlong Avenue, Suite G ♦ Rock Hill, South Carolina ♦ 29732

Telephone: 803-329-1510 ♦ Fax: 803-329-0492

♦ Walter J. Ravell Jr., M.D., F.A.C.S. ♦ Corey K. Crain, M.D., F.A.C.S. ♦

June 27, 2006

South Carolina Department of Health and Human Services
Columbia, S.C.

Dear Medical Director,

I am writing to request an additional ambulatory visit for Doniece Thompson for date of service 5-3-06. Her medical number is 1780374945. I was asked to see her in consultation for Dr. Hart. Enclosed is my dictation describing the nature of her problem and the need for this visit.

I appreciate your consideration in this matter.

Sincerely,

Corey Crain
Corey K. Crain, M.D.

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JUL 07 2006

Department of Health & Human Services
OFFICE OF THE DIRECTOR

enclosure

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Department of Health & Human Services
OFFICE OF THE DIRECTOR 05/30/06

31833

DONEYCE THOMPSON

S: Ms. Thompson is a 40-year-old black female referred by Dr. Darlington Hart with concern about biliary sludge and jaundice. She has been having a sensation of pressure across the epigastrium diffusely and had her first episode of this about three weeks ago, at which time she went to the emergency room. At that time, a gallbladder ultrasound was obtained and concern was developed because of possible cholecystitis. Her symptoms at that time settled down, but she has continued to have some intermittent epigastric pain that will radiate around the right side toward the scapula. Additionally, the patient has noticed yellow urine and has noticed that the whites of her eyes have gotten yellow over the last four days or so.

PAST MEDICAL HISTORY: The patient's past history is complicated. It has taken some doing here today to piece it together based on some recent x-ray reports

and her history. Apparently in June of 2004, she underwent a gastrectomy by Dr. Zbinden for gastric cancer. A Roux-en-Y gastrojejunostomy was created. She, then, underwent some chemotherapy and radiation therapy. Her oncologist is Dr. Shah in Pineville. She was last seen by Dr. Shah last week before she became jaundiced. A CT scan was performed on 05/26/06. She is supposed to see Dr. Shah again tomorrow. Somewhere along the way, she was referred to Dr. Amin. She has an endoscopy scheduled two days from today. She had some blood drawn four days ago and was told that same day that her liver function tests were abnormally elevated. She is not aware of any recurrence of her cancer. She has a history of GERD. She takes Reglan, Prevacid, and Tylenol.

I am in receipt of a CT scan report. That is reviewed with her in detail, as well as the ultrasound report reviewed with her in detail. The CT is remarkable for intrahepatic biliary dilatation, a question of some nodular densities in the region of the Porta-hepatis, a question of some other densities along the mesentery in the transverse colon, as well as other sites along with a small amount of ascites in the abdomen.

O: Physical exam reveals the patient to be in no acute distress. She does have some mild scleral icterus.

A: Probable recurrence of her gastric cancer, now causing obstructive jaundice due to recurrent tumor in the region of the Porta-hepatis. I do not see any evidence for cholecystitis. I do not think the gallbladder is the source of the patient's current problems. I do not think she needs gallbladder surgery. P: I gave her a copy of her CT scan report, as well as her gallbladder ultrasound report. I want her to have those when she goes back to see Dr. Shah tomorrow. She is discussed with her the fact that she needs to discuss with Dr. Amin the CT scan to see if she needs a stent placed in the common bile duct to decompress the liver. She is welcome to return to see me on a p.r.n. basis. I will write a letter to Dr. Darlington Hart.

COREY CRAIN, M.D.:th



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Robert M. Kerr
Director

July 14, 2006

Corey Crain, MD
Piedmont Surgical Associates, PA
Rock Hill Medical Park
200 S. Herlong Avenue, Suite G
Rock Hill, South Carolina 29732

Re: Doniece Thompson

Dear Dr. Crain:

Thank you for corresponding regarding this patient. The South Carolina Department of Health and Human Services (DHHS) can support three (3) additional physician office visits for this fiscal year ending June 30, 2006. Please attach a copy of this correspondence to any physician office visit claim you have that will exceed the twelve-visit limit. This will alert our staff to override the automatic system payment rejection edit and reimburse you for this care. Please assist the patient and the S.C. Medicaid program to make optimal use of these visits for medically necessary care. Additional visits should, in general, be physician directed as opposed to patient directed. Also, the 99211 code can accommodate brief encounters and does not count against the allotted number of office visits.

If you would like to discuss this further, please call me 803-898-2500 or 803-255-3400. Thank you for your advocacy regarding this patient and for caring for South Carolina Medicaid beneficiaries.

Sincerely,

O. Marion Burton, MD
Medical Director

OMB/bk

Log #40



Corey Crain, MD
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bc: Melanie Giese
Val Williams