

**Patricia Logan Harrison
Attorney at Law
611 Holly Street
Columbia, South Carolina 29205**

January 10, 2017

Damon Wlodarczyk, Esq.
Riley, Pope and Laney
Devine Street
Columbia, South Carolina

RE: Rob Levin and Richard Stogsdill

Dear Damon:

This is a follow up to our phone conversation after we filed the emergency motion with Judge Anderson requesting emergency relief for Rob Levin. We have provided every record Rob's service coordinator has requested. The service coordinator has obtained records from his primary care physician and his neurologist, as directed by RN Koon at Whitten Center. It would be a fraud on the court for you to suggest that your client's delay in determining his need for services is caused by Mrs. Self not signing a release that specifically stated that refusal to sign that release would not affect his receipt of services. (The new release you have prepared was not attached to the letter you sent to me.)

You will recall that years ago, you threatened to seek sanctions if we used any method of obtaining services except going through the "regular procedure" of seeking those services through my clients' service coordinators. We have followed your instructions and have fully cooperated with my clients' service coordinators. As with Richard Stogsdill, Rob's service coordinator has had unfettered access to his records. If there are any records which are needed to determine that Rob needs around the clock care, please identify, with specificity, what records are required and we will obtain those for you promptly. If there are any records not obtained by Richard's service coordinator that you need to determine his need for nursing hours ordered by Dr. Munn, please identify those records, with specificity, and we will obtain those.

We are again requesting an independent assessment by a qualified medical source satisfactory to the guardians of Rob Levin and Richard Stogsdill to determine the number of nursing hours required, and to determine the number of attendant care hours Rob needs. Not only is this allowed by federal regulations at 42 C.F.R. 431, but the State Medicaid Manual clearly provides that an independent assessment is a "right" of Medicaid participants. Please consider this our attempt to communicate before filing an appropriate order or taking other appropriate action. We are requesting that you provide copies of any evidence upon which you rely to deny or fail to approve the hours we have requested. Dr. Shissias made clear that 60 hours of nursing was the "bare minimum" of nursing hours needed. Now, because the services ordered have not been provided, Rob's condition has worsened and he almost died. Nothing in our complaint or the many documents filed since 2011 suggest that restoring the services Rob had in 2009 will

resolve his claims. I cannot fathom where DHHS got that idea. DHHS has an obligation to assess Rob's needs at least annually, and at any time his condition changes. We are requesting that DHHS immediately provide 60 hours of nursing to Rob and 56 nursing hours to Richard until these assessments are completed by agreed upon examiners.

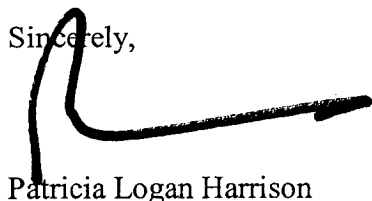
That assessment for Rob's needs for nursing and attendant care should not be rocket science, given Rob's longstanding and recognized need for supervision at every moment of the day and night. Richard had another attack today when the nurse was not present which required administration of pain relief medications. Fortunately, even though he was not on duty, this time, Mrs. Stogsdill was able to contact his nurse, who came over to administer the required medications. We have shared with you that these attacks do not happen when a nurse is present and that Richard has required stronger and stronger medications to get them under control. Please advise Mr. Soura, Dr. Platt, Dr. Buscemi and Governor Haley of these events and that we reserve the right to pursue damages.

As to DHHS's argument that CMS rules prohibit them from continuing payment to Rob's caregivers and nurses in the hospital, in the final rule, CMS made clear that attendant care may be continued to retain caregivers. CMS has at least eight times since 2014 denied DHHS' requests to approve waiver applications. It is disingenuous at best to continue to argue that these hours are not being provided because of some prohibition by CMS. A copy of this letter is being provided to CMS.

The General Assembly has made clear that DHHS is required to provide services in the least restrictive setting and to keep families together. They have provided family support funds to pay for services not funded by Medicaid. Any restriction on the use of those funds is self imposed by DDSN, without promulgation of regulations and does not carry the force and effect of law. In any event, the State has an obligation to comply with the ADA, without reference to caps in the waiver, whether or not funded by Medicaid.

We are again requesting that you confirm that DHHS will continue payment for Rob's caregivers and nursing services while hospitalized and respectfully request that you respond within 24 hours.

Sincerely,

A handwritten signature in black ink, appearing to read 'Patricia Logan Harrison', with a large, stylized initial 'P'.

Patricia Logan Harrison

cc Governor Nikki Haley
Lt. Gov. Henry McMaster
Renard Murray, CMS
Jackie Glaze, CMS
Travis England, Esq., United States Department of Justice