

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Janaka</i>	DATE <i>2-18-10</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000344</i>	<input checked="" type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Kost</i> <i>closed 2/26/10, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>3-1-10</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.			

State of South Carolina
House of Representatives

LegisFax

Please Deliver at once to:

Name Brian Kost

Office HTHS

Phone No. _____

Fax No. (803) 255-8235

This is page 1 of a 2 page transmission.

☐ Call _____

at () _____

to acknowledge receipt of this Fax.

☐ Comments _____

Thank you Brian - please advise
as to any possible options or solutions
for the constituent.

☒ Sent by _____

Louise Sprng / Rep Thad Meirs



For return Fax, dial (803) 734-2925

302 Blatt Building
1105 Pendleton Street • Columbia, SC 29201

RESPECTFULLY REFERRED
NOT ACKNOWLEDGED

<APP>CUSTOM
<PREFIX>Mrs.</PREFIX>
<FIRST>Donita</FIRST>
<MIDDLE>j</MIDDLE>
<LAST>songer</LAST>
<SUFFIX></SUFFIX>
<ADDR1>240 stonebridge dr</ADDR1>
<ADDR2></ADDR2>
<CITY>myrtle beach</CITY>
<STATE>SC</STATE>
<ZIP>29588</ZIP>
<ZIP4></ZIP4>
<PHONE>8432930460</PHONE>
<EMAIL>donitasonger@aol.com</EMAIL>
<ISSUE>OTHER</ISSUE>
<MSG>I am a 48 year old caregiver my husband had his first stroke in 1998 and just recently had his 2Nd stroke nov 20 2009. he needs to be with someone 24 hours a day at this time there is no help that i can find for caregivers who can not work to help support the family .. as a caregiver i can not get welfare unemployment or food stamps i can not get health care medicaid... if i paid a nurse to come in and help i would be paying out more than i would make so it doesn't make sense to go that route because i would be getting into a deeper hole than i am already in i am not sure how to bring this to anyone's attention to get help for people like myself i know i am not alone please send me in the right direction so that i may be able to help myself and others thank you for your time sincerely Donita Songer</MSG>
</APP>

Donita Songer
Please send her

We will look for her
so we can do anything
and forward this info to

HHS

TV

Log 0344 ✓

February 26, 2010

Ms. Donita Songer
240 Stonebridge Drive
Myrtle Beach, South Carolina 29588

Dear Ms. Songer:

SC Representative Thad Viers contacted our agency on behalf of your husband, Michael Songer, regarding Medicaid eligibility and his healthcare needs.

Our Horry County Office is processing Mr. Songer's application for Medicaid's *Home and Community Based Services* (HCBS) waiver program. His eligibility worker, Sheri Satterfield, has been in touch with Wachovia Bank to obtain the financial documentation needed to determine his financial eligibility.

Staff in our Community Long Term Care Office (CLTC) must also perform a level of care assessment to determine if he is medically eligible for the HCBS program. This assessment will be completed once he reaches the top of the waiting list. If your husband is found eligible based on his medical condition, income and resources, he must then meet the federal requirement of a 30 consecutive day waiting period. This waiting period refers to the time an individual must reside in a medical facility or receive home and community based services before receiving Medicaid coverage. If you have any questions regarding the waiting period or the medical level of care assessment, please call staff in the CLTC office that serves Horry County at (843) 248-7249.

In the meantime, we have enclosed information on other programs and organizations that can assist residents in South Carolina with their healthcare and daily living needs. We hope this information is helpful.

We will continue to monitor the progress of your husband's application closely. If you have additional questions regarding the Medicaid program, please contact Denise Epps in Constituent Services at (803) 898-2505.

Sincerely,



Alicia Jacobs
Deputy Director

AJ/rle
Enclosures



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

February 26, 2010

The Honorable Thad Viers
SC House of Representatives
Post Office Box 11867
327-B Blatt Building
Columbia, South Carolina 29211

Dear Representative Viers:

Thank you for contacting our agency on behalf of Michael Songer regarding Medicaid eligibility and his healthcare needs.

We have been in direct contact with Donita Songer, his wife and medical affairs representative, regarding Medicaid eligibility and the rules and regulations governing the program. She was given contact information for agency staff in case she has additional questions regarding Medicaid. We also provided Ms. Songer with information on other helpful programs and organizations that can assist residents in our state with their healthcare and daily living needs.

Thank you for your continued interest and support of the South Carolina Medicaid program. If I may be of further assistance on this or any other matter, please let me know.

Sincerely,

A handwritten signature in cursive script, appearing to read "Emma Forkner".

Emma Forkner
Director

EF/jrhe