

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

ACTION REFERRAL

TO <i>Jacobs</i>	DATE <i>3-30-09</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>100535</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cc: Ms. Forner Closed 4/3/09, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>4-8-09</i> DATE DUE _____
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

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

LINDSEY O. GRAHAM
SOUTH CAROLINA



230 RUSSELL SENATE OFFICE BUILDING
WASHINGTON, DC 20510
(202) 224-5972

UNITED STATES SENATE

RECEIVED

March 24, 2009

MAR 30 2009

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Ms. Emma Forkner
Director
SC Department of Health and Human Services
PO Box 8206
Columbia, SC 29202-8206

Dear Ms. Forkner:

The attached letter concerns an issue outside my official jurisdiction. Therefore, as a courtesy to my constituent, I am sending this correspondence to your attention.

Thank you for your attention to this matter, and I ask that you please respond directly to the individual.

Sincerely,

A handwritten signature in black ink, appearing to read "L. Graham", written over a horizontal line.

Lindsey O. Graham
United States Senator

LOG/lt

Enclosure

508 HAMPTON STREET
SUITE 202
COLUMBIA, SC 29201
(803) 933-0112

401 WEST EVANS STREET
SUITE 226B
FLORENCE, SC 29501
(843) 669-1505

101 EAST WASHINGTON STREET
SUITE 220
GREENVILLE, SC 29601
(864) 250-1417

530 JOHNNIE DODDS BOULEVARD
SUITE 202
MOUNT PLEASANT, SC 29464
(843) 849-3887

140 EAST MAIN STREET
SUITE 110
ROCK HILL, SC 29730
(803) 365-2828

135 EAGLES NEST DRIVE
SUITE B
SENECA, SC 29678
(864) 888-3330

Sender's IP address = 76.5.171.181

<APP>SCCMAIL
<PREFIX>Mrs</PREFIX>
<FIRST>Sharon</FIRST>
<LAST>Brunson</LAST>
<ADDR1>P.O. Box 1475</ADDR1>
<ADDR2></ADDR2>
<CITY>Varnville</CITY>
<STATE>SC</STATE>
<ZIP>29944</ZIP>
<HPHONE>(803)942-5307</HPHONE>
<WPHONE></WPHONE>
<EMAIL>sac9381@yahoo.com</EMAIL>
<ISSUE>HEA</ISSUE>
<>Yes, I would like a written response.</>
<MSG>Senator Graham,

I am writing today to voice my opinion on Medicaid. I am currently 26wks pregnant and have been denied for medicaid because of my husband's income. I understand that there are guidelines that they must follow as far as who is approved or not, but I am not sure I agree with these guidelines. The issue of cost of living is not even a factor in any of these programs. I have not even been able to receive adequate health care for myself or my baby. I have previous cardiac problems that have returned since pregnancy and have not even been able to have that seen about because of the amount of money required. I understand all about having health insurance and all because up until last year I was covered under Blue Cross Blue Shield, and when I left my job my husbands job told him that he would have to wait for open enrollment, by that time we already knew I was pregnant and they would not cover the pregnancy. That leaves me without any proper health insurance. We are told that there are so many programs to help with pregnancy, but when someone applies that genuinely needs it, its denied. I am most defiantly not looking for a handout, but I would like the opportunity to receive the same prenatal care as others.

Sincerely,

Sharon Brunson</MSG>

<>please enter your zip code in the format 12345 or 12345-1234.</>
</APP>



State of South Carolina
Department of Health and Human Services

Log # 0536

Mark Sanford
Governor

Emma Forkner
Director

April 3, 2009

Mrs. Sharon Brunson
Post Office Box 1475
Varnville, South Carolina 29944

Dear Mrs. Brunson:

US Senator Lindsey Graham asked our agency to assist you with your questions about Medicaid eligibility.

Unfortunately, your application for Medicaid's Pregnant Women (PW) program was denied in November 2008, because your monthly income exceeded the allowable limit. Income is based on gross earnings and does not allow deductions for taxes, utilities, car payments or other living expenses.

An alternate health insurance option through AugeoBenefits offers a variety of health insurance plans from top-rated insurance carriers. You may wish to look over the enclosed brochure and contact them at 1-866-273-5613 or visit their website at www.augeobenefits.com/sc to see if they can assist you and your family.

Enclosed is information on other programs and organizations that can assist residents in South Carolina with their healthcare needs, prescriptions and inpatient hospitalization.

If you have other questions about the Medicaid program, please contact Jenny Lynch at (803) 898-3965. We hope this information is helpful.

Sincerely,

A handwritten signature in cursive script that reads "Alicia Jacobs".

Alicia Jacobs
Deputy Director

AJ/cj
Enclosures

Medicaid Eligibility and Beneficiary Services
P.O. Box 8206 • Columbia, South Carolina 29202-8206
Phone (803) 898-2502 • Fax (803) 255-8235