

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

ACTION REFERRAL

TO	DATE
<i>Single for</i>	<i>12-17-08</i>

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000318	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Stensland</i> <i>Cleared 11/30/09 e-mail</i> <i>Response attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE <i>1-6-09</i>
	<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.			

INPUT[®]

RECEIVED

DEC 17 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

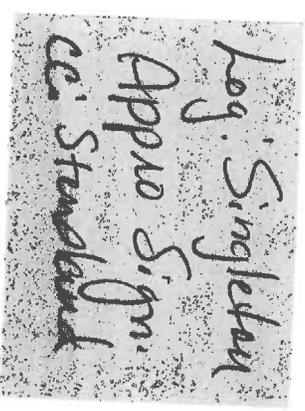
11720 Plaza America Drive, 12th Floor
Reston, VA 20190
Tel: (703) 707-3500
Fax: (703) 707-6201
www.input.com

November 18, 2008

Office of Public Information
Department of Health and Human Services
P.O. Box 8206
Columbia, SC 29202

Public Request ID # 16370

Dear Public Records Officer,



Pursuant to the state open records law, S.C. Code Ann. sec. 30-4-10 to 30-4-165, I am requesting clearly releasable portions of the documents regarding all contracts awarded to **Blue Cross and Blue Shield** under the **MMIS** requirement. Specifically, I am requesting copies of the following information/documents:

- Copies of technical and cost proposal submitted by Blue Cross and Blue Shield to the SC MMIS
- Bidders' technical proposal
- Bidders' cost proposals (incl. BAFO)

Whenever possible, please refer to our PUBLIC RECORDS ID # 16370 in any response letter, email, fax, or invoice.

If possible, I would prefer to receive the documents in electronic format. If not, hard copies of responsive documents will suffice.

I agree to pay any reasonable copying and postage fees of not more than \$100. If the cost would be greater than this amount, please notify me. Please provide a receipt indicating the charges for each document.

As provided by the open records law, I would request your response within fifteen (15) working days.

If you choose to deny this request, please provide a written explanation for the denial including a reference to the specific statutory exemption(s) upon which you rely. Also, please provide all segregable portions of otherwise exempt material.

If your agency does not maintain these public records, please let me know who does and include the proper custodian's name and address.

Thank you for your assistance,



Monica Jones
mjones@input.com



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Fortner
Director

TO:

FROM:

SUBJECT: Cost of Processing FOIA Request #

The South Carolina Department of Health and Human Services has received and processed your FOIA request. The cost for processing this information is as follows:

Staff processing time at \$10.00 per hour	_____ Hours	\$ _____
Pages copied at \$.10 per page	_____ Pages	\$ _____
Pages faxed at \$.20 per page	_____ Pages	\$ _____
Shipping and Handling Costs		\$ _____
Other costs associated with the FOIA request:	_____	\$ _____
Total Amount Due SCDHHS:		\$ _____

Please remit the above amount to the following address:

Bureau of Fiscal Affairs
South Carolina Department of Health and Human Services
Post Office Box 8297
Columbia, South Carolina 29202-8297

Please contact _____ should you have any questions.

Signature _____

Date: _____

Log # 000318

From: Monica Jones <mjones@input.com>
To: HALTIWAN@scdhhs.gov
Date: 1/13/2009 11:04 AM
Subject: RE: Public Request ID #16370

Mr. Boland,

Please disregard that second request.

Thanks,

Monica Jones
Member Services Associate, FOIA
INPU
11720 Plaza America Drive, Suite 1200, Reston, Virginia 20190
Direct: 703-707-4126; Fax 703-707-6201
mjones@input.com
<http://www.input.com>

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-----Original Message-----
From: Nikole Boland [mailto:HALTIWAN@scdhhs.gov]
Sent: Monday, January 05, 2009 2:16 PM
To: Monica Jones
Subject: Public Request ID #16370

Ms. Jones,

We received a request from you dated October 22, 2008 for copies of records related to the South Carolina MMIS RFP in 2004, which we responded to on November 12, 2008. We then received another request from you dated November 18, 2008 which appears to be identical to the October request and has the same public request ID number. I wanted to be sure you received our response to your first letter and make sure you did not request something different in the November letter that I am not seeing.

Thanks,

Nikole H. Boland
Office of General Counsel
Department of Health and Human Services
P.O. Box 8206
Columbia, South Carolina 29202-8206
(803)898-2795
(803)255-8210 fax

Confidentiality Note

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If you have received this in error, please notify us immediately and destroy the related message.