

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

**ACTION REFERRAL**

TO	DATE
Roberts/Hutto/FOIA	2-6-14

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000270	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR  CC: Coy Cleared 2/24/14, letter attached.	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input checked="" type="checkbox"/> FOIA DATE DUE <u>2-21-14</u>
	<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.			

Gary W. Poliakoff  
atty@gpoliakoff.com

Raymond P. Mullman, Jr.  
rmullmanjr@aol.com



Benard B. Poliakoff  
(1916-1955)

J. Manning Poliakoff  
(1923-1969)

Matthew Poliakoff  
(1919-1979)

February 4, 2014

FOIA Coordinator  
Department of Health and Human Services  
P.O. Box 8206  
Columbia, SC 29202

**RECEIVED**

FEB 06 2014

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

RE: Request for Cost Reports  
Facility: Magnolia Place Greenville

To Whom it May Concern:

I am making a request for information pursuant to the South Carolina Freedom of Information Act S.C. Code §§ 30-4-10 through 30-4-165, and the applicable federal statutes and regulations, see, e.g., 5 U.S.C.A. §552 and 29 C.F.R. §1610.7.

In making this request, we hereby certify that we assume financial liability for the direct costs of the search for the requested records and their duplication as set forth in the applicable regulations. Please provide the following information within ten (10) working days after receipt of this request, or sooner, if possible.

We are requesting the following signed Cost Reports for Magnolia Place Greenville (located at 35 Southpointe Dr, Greenville, SC 29607) for the fiscal year ending in 2013.

- a) Medicaid Cost Report
- b) Medicare Cost Report
- c) Home Office Cost Report
- d) Realty Company Cost Report
- e) Management Company Cost Report

Please contact us if you have any questions. Thank you for your kind assistance in this matter.

Sincerely,

A handwritten signature in black ink that reads "Angela S. Lizer".

Angela S. Lizer  
Paralegal  
Poliakoff & Associates, P.A.

/tba



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:	_____	\$_____
<b>Total Amount Due SCDHHS:</b>		<b>\$_____</b>

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:

February 24, 2014

Ms. Angela S. Lizer, Paralegal  
Poliakoff & Associates, P.A.  
P.O. Box 1571  
Spartanburg, South Carolina 29304

RE: Cost Reports for Magnolia Place Greenville

Dear Ms. Lizer:

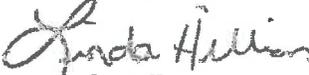
This is in response to your request for information from the South Carolina Department of Health and Human Services (DHHS) pursuant to the South Carolina Freedom of Information Act (FOIA) dated February 4, 2014 and received by DHHS on February 6, 2014. Enclosed are copies of the SC Nursing Home Medicaid cost report that you requested. The documents provided are true and accurate copies of reports collected by the Department in the regular course of its business.

Our expense for reproducing and mailing this information is twenty-one and 12/100 dollars (\$21.12). Please make the check payable to the Department of Health and Human Services and send it to:

Department of Health and Human Services  
Department of Receivables  
Post Office Box 8297  
Columbia, SC 29202-8297

Thank you for your request. If you have any questions, you may contact Ms. Beth Hutto, Interim Deputy Director and Chief Financial Officer, at (803) 898-2955.

Sincerely,

  
Linda Hillian  
Paralegal

/h

Enclosures

cc: Beth Hutto, Interim Deputy Director and Chief Financial Officer  
Lynette D. Wilson, Receivables

Gary W. Poliakoff  
atty@gpoliakoff.com

Raymond P. Mullman, Jr.  
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