

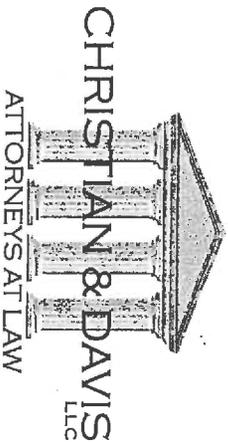
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Singhla</i>	DATE <i>6/21/10</i>
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<b>DIRECTOR'S USE ONLY</b>		<b>ACTION REQUESTED</b>	
1. LOG NUMBER <i>1011497</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____	<input type="checkbox"/> Necessary Action
2. DATE SIGNED BY DIRECTOR <i>6/16/10</i> <i>A. O. Stinson</i>	<input checked="" type="checkbox"/> FOIA <i>cleared 7/14/10, letter attached.</i>		

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



**RECEIVED**

JUN 21 2010

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

June 11, 2010

Brandy Putnam  
SC Department of Health and Human Services  
Post Office Box 8206  
Columbia, SC 29202

**RE: Facility:** Heritage Health Care of Walterboro, LLC f/k/a Oakwood  
Health Care Center, NCF-0949  
**Location:** 401 Witsell Street, Walterboro, South Carolina

Dear Ms. Putnam:

Pursuant to the Freedom of Information Act, I am requesting that you provide this office with copies of any and all cost reports related to the above identified facility, including, but not limited to, the Home Office Cost Report, the management company's cost report (HCF 3), and the realty company's cost report (HCF 2). In your production, please provide the as filed Cost Reports submitted as well as the Desk Audit packages for same for any contract periods which fall between 2006 and 2008, inclusive.

Additionally, you have previously provided this office with copies of the facility's cost reports. Specifically, we have the cost reports for the fiscal years October 1, 2005 through September 30, 2006, October 1, 2006 through September 30, 2007, and October 1, 2007 through September 30, 2008. At this time, we would request that you also provide copies of the signatory pages filed in connection with these reports.

I would appreciate if you would respond to this request within the next fifteen days. If the processing of this request will exceed \$50.00, please enclose an explanation of all reasonable business costs associated with the copying and production of these items prior to processing. If you have any questions, please do not hesitate to contact me.

With kindest regards, I am

Very truly yours,

CHRISTIAN & DAVIS, LLC

  
Kirsten Harkness  
Paralegal to Matthew Christian

/kch

W. Harold Christian, Jr.  
Richard V. Davis  
Matthew W. Christian  
Joshua D. Christian  
Workers' Compensation  
Auto & Truck Collisions  
Insurance Litigation  
Social Security Disability  
Serious Personal Injury  
Medical & Nursing  
Home Negligence

P.O. Box 332 Greenville, SC 29602  
1007 E. Washington St. Greenville, SC 29601  
Phone (864)232-7363 Fax (864)370-3731 www.christiandavislaw.com



Log # 000497

July 14, 2010

Matthew Christian, Esquire  
Christian & Davis, LLC  
Post Office Box 332  
1007 E. Washington Street  
Greenville, SC 29601

Re: FOIA Request – Heritage Health Care of Walterboro, LLC f/k/a  
Oakwood Health Care Center

Dear Mr. Christian:

In response to your Freedom of Information Act request, enclosed you will find the applicable cost reports and desk audit packages you requested. These documents are a true and accurate copy of reports collected by the Department in the regular course of its business.

Our expense for reproducing and mailing this information is forty-one and 56/100 dollars (\$41.56). 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

I hope this information is helpful to you. Please contact me if there are any questions.

Sincerely,



Byron R. Roberts  
Assistant General Counsel

BRR/h  
Enclosures  
cc: Lynette D. Wilson, Receivables