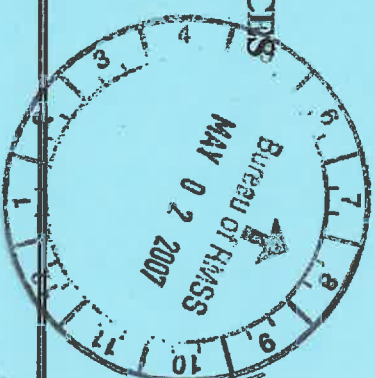


DEPARTMENT OF HEALTH AND HUMAN SERVICES
RECEIVED
 HEALTH & HUMAN
 SERVICES
 MAY 02 2007

ACTION REFERRAL



TO HEALTH SERVICES

DATE

Baciling / Higgins

4-30-07

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000684	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Closed 5/15/07, see attached email.</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____
	<input checked="" type="checkbox"/> Necessary Action <i>NRN</i>

5/15/07 VRS

APPROVALS (only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1. <i>Cynthia W. Higgins</i>	<i>5-9-07</i>		
2.			
3.			
4.			



RECEIVED

APR 30 2007

State of South Carolina
Department of Health and Human Services

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Mark Sanford
Governor

Robert M. Kerr
Director

March 30, 2007

TO: Medicaid Transportation Beneficiaries

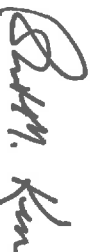
SUBJECT: Medicaid Transportation News

This notice is to inform you that the way you schedule non-emergency Medicaid transportation services is about to change. In an effort to improve ~~transportation~~ services, the South Carolina Department of Health and Human Services has hired a new company called a "broker" in your area to schedule routine non-emergency transportation to Medicaid covered medical appointments. The local Medicaid office will no longer schedule transportation services.

This change will take place on **May 1, 2007**. The broker will handle any transportation appointments already scheduled by the local Medicaid office. Enclosed is the name of the broker who will work in your county. The broker will be sending you more information soon, including how to contact them and instructions for scheduling rides.

Please note: The broker is not responsible for emergency transportation. In case of an emergency, dial 911 to reach local emergency responders.

We do not expect a break in services as a result of this change. If you have questions about this notice, please contact your local Medicaid office.


Robert M. Kerr
Director

RMK/bhk

Enclosure

4EDHMS54 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 05/02/07
MEDSPROD MEMBER PERIOD START: 11/05/05 END: ACTION: PAGE: 0001

NAME: COOKE BARBARA A HH NAME: COOKE BARBARA A
RCP NUMBER: 3780527866 HH NUMBER: 101087337 ACTION TYPE: MAINTENANCE
SSN: 138-34-6440 VC: V APL STATUS: ACTION DATE: 11/05/05
PRIMARY INDIVIDUAL: APL CO: 26 WORKER ID: CUWKR LOCATION: 099
782 CAROLINA COVE SSCN: 138346440A RRN:
DR APT H RACE: 01 SEX: F MARITAL STATUS: S

MYRTLE BEACH SC 29577-4583 TPL INSURANCE: N RELATION: SELF
CORRECT RCP NUMBER: LIV ARRANGEMENT: HOME INCOME TRUST:
PROVIDER:

BG	BEG	END	BENEFITS	QMB	RETRO	% OF	POV	CHIP		
S	NUMBER	ELIG	ELIG	PCAT	QCAT	TYPE	IND	IND	LEVEL	NUMBER
-	09017472	11/01/2005	80	50			N			.00

UPDATED: USER ID: DATE: SYSTEM ID: TTR1001 DATE: 11/08/05
ME900063 RECIPIENT RECORD FOUND
PF2->HH BG PF3->HH MBR DTL PF4->REFH PF5->ELD02 PF6->RETURN PF7->PREV
PF8->NEXT PF9->HH NOTES PF15->RCP SEARCH PF17->ELD00 PF18->HH MBR BGS

Log - Susan
"Rec. Action"

To State of South Carolina Etc
Dept of Health & Human Services
PO Box 8206 Columbia SC
My Name is Barbara Ann Cooke
7824 H Carolina Cove
Myrtle Beach SC 29577

I Received this letter you sent
To me.

I Drive my own Vehicle
And do not And have NOT
Used Any Type of Medical
Transportation At Any Time.

Robert Fortune my 41 year old
Son Used Medical Transportation
He is the one you should have
Sent the letter too.

We are Sharing an Apartment
But Separate Rooms. Our
Lifestyles is not the Same.
Financially we each pay 1/2 the
Bills. And probably will until
the end of the year.

Please get the record straight
I have NOT used Any Medical
Transportation or Even Seen a
Doctor in Over Three Years. I
don't Drink, Smoke, do drugs or

I exercise and watch my diet.

This is who I am

Signed Truly

Barbara Ann Coole

April 28th, 2007

P^s

And Just Because I'm
Age don't mean I have
Medical problems etc,


RECEIVED


APR 30 2007

Department of Health & Human Services
OFFICE OF THE DIRECTOR

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

ACTION REFERRAL

TO <i>Baerling</i>	DATE <i>4-30-07</i>
DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000684	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>5-10-07</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.			 <div style="border: 1px solid black; padding: 5px; display: inline-block;"> This was logged to Higgins for answer 5-10-07 </div>
2.			
3.			
4.			

Log. Susan
"Rec. Action"

To State of South Carolina Etc
Dept of Health & Human Services
PO Box 8206 Columbia SC
My Name is Barbara Ann Cooke
7824 Carolina Cove
Myrtle Beach SC 29577

I Received this letter you sent
To me.

I Drive my own Vehicle
And do NOT And have NOT
Used Any Type of Medical
Transportation At Any Time.

Robert Fortune My 41 year old
Son Used Medical Transportation
He is the one you should have
Sent The letter too.

We Are Sharing An Apartment
But Separate Rooms. Our
Life Styles is not The Same.
Financially we each pay 1/2 the
Bills. And probably will until
the end of the year.

Please get the record straight
I have NOT used Any Medical
Transportation or Even Seen a
Doctor in Over Three Years. I
don't Drink, Smoke, do drugs or

I exercise And watch my diet.

This is who I Am

Signed Truly

Barbara Ann Coole

April 28th, 2007

P.S

And Just Because I May
Age don't mean I have
Medical problems, etc,

RECEIVED

APR 30 2007

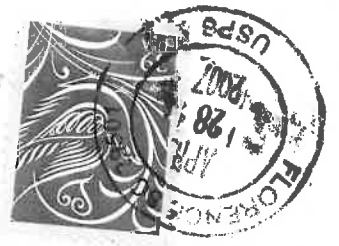
Department of Health & Human Services
OFFICE OF THE DIRECTOR

Barbara Coole
782 H Carolina Cove
Myrtle Beach South Carolina
29577

RECEIVED
APR 9 0 2007
Department of Health & Human Services
OFFICE OF THE DIRECTOR

State of South Carolina
Dept of Health & Human Services
P.O. Box 8206
Columbia South Carolina

292 03-0 206



Barbara Cooke
782 H Carolina Cove
Myrtle Beach South Carolina
99577
State of South Carolina
Dept of Health & Human Services
P.O. Box 8206
Columbia South Carolina
29203-0206

RECEIVED
APR 9 0 2007
Department of Health & Human Services
OFFICE OF THE DIRECTOR





RECEIVED

APR 30 2007

State of South Carolina
Department of Health and Human Services

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Mark Sanford
Governor

Robert M. Kerr
Director

March 30, 2007

TO: Medicaid Transportation Beneficiaries

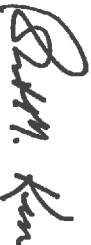
SUBJECT: Medicaid Transportation News

This notice is to inform you that the way you schedule non-emergency Medicaid transportation services is about to change. In an effort to improve transportation services, the South Carolina Department of Health and Human Services has hired a new company called a "broker" in your area to schedule routine non-emergency transportation to Medicaid covered medical appointments. The local Medicaid office will no longer schedule transportation services.

This change will take place on **May 1, 2007**. The broker will handle any transportation appointments already scheduled by the local Medicaid office. Enclosed is the name of the broker who will work in your county. The broker will be sending you more information soon, including how to contact them and instructions for scheduling rides.

Please note: The broker is not responsible for emergency transportation. In case of an emergency, dial 911 to reach local emergency responders.

We do not expect a break in services as a result of this change. If you have questions about this notice, please contact your local Medicaid office.


Robert M. Kerr
Director

RMK/bhk

Enclosure

Brokers Name and County Responsibilities

Broker: Medical Transportation Management (MTM)

**Abbeville
Anderson
Cherokee
Chester
Greenville
Greenwood
Lancaster
Laurens
Oconee
Pickens
Spartanburg
Union
York**

Broker: LogistiCare

Aiken	Georgetown
Allendale	Hampton
Bamberg	Horry
Barnwell	Kershaw
Berkeley	Jasper
Beaufort	Lee
Calhoun	Lexington
Charleston	Orangeburg
Chesterfield	McCormick
Clarendon	Marion
Colleton	Marlboro
Darlington	Newberry
Dillon	Richland
Dorchester	Saluda
Edgefield	Sumter
Fairfield	Williamsburg
Florence	



COLUMBIA

DEPARTM.

29202-8206

FS



BARBARA A COOKE
DR APT H
782 CAROLINA COVE DR
MYRTLE BEACH SC 29577-4583

RECEIVED

APR 3 0 2007

Department of Health & Human Services
OFFICE OF THE DIRECTOR

PRSRT STD
U.S. POSTAGE
PAID
COLUMBIA, SC
PERMIT NO. 1132

From: Susan Bowling
To: Mary Cooper
Date: 5/15/2007 8:47 am
Subject: Log 684

Mary,
Please close out this log. Upon further review and discussion with eligibility staff, the decision has been made not to respond to this letter. Thanks.
Susan

