


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

**ACTION REFERRAL**

<b>TO</b>	<b>DATE</b>
Myers	3-26-09

<b>DIRECTOR'S USE ONLY</b>	<b>ACTION REQUESTED</b>
1. LOC NUMBER  100531	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR  Ce. Ms. Forkner Ref log #456 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <u>4-6-09</u>
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

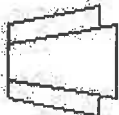
<b>APPROVALS</b> (Only when prepared for director's signature)	<b>APPROVE</b>	<b>* DISAPPROVE</b> (Note reason for disapproval and return to preparer.)	<b>COMMENT</b>
1. Extend until 4/13/09, see attached e-mail			
2. <del>X</del> Cleared 4/15/09, letter attached			
3.			
4.			

**RECEIVED**

MAR 25 2009

**MEDICAL SERVICES**

**DHHS**



**Physical Address:**  
600 North Wheeler Avenue  
Prosperity, SC 29127

**Lovelace Family Medicine, P.A.**

*Our Mission since 1988  
Compassionate Quality Care to the Glory of God*  
Office: (803) 364-4852  
Fax: (803) 364-2014

**Mailing Address:**  
PO Box 630  
Prosperity, SC 29127

**RECEIVED**

MAR 26 2009

**Department of Health & Human Services  
OFFICE OF THE DIRECTOR**

Felicity Myers  
Deputy Director  
DHHS  
Main Street  
Columbia, SC 29203

Re:  
TARA YOUNG  
2512 PINE STREET  
NEWBERRY, SC 29108  
Medicaid #:5563314201  
Wellpath # 0054645107

Thank you for writing me back. I am in receipt of your letter of 03/16/09 in reference to my letter to CHC Cares on 02/12/09. I have yet to receive a response from CHC Cares or from Mr. Bryson in regard to denial of payment for visit 02/03/09.

What do you consider a reasonable time period to wait on CHC Cares of South Carolina to complete their internal review process? It has now been six weeks.

Sincerely,  
  
Oscar F. Lovelace, Jr., MD

**From:** Felicity Myers  
**To:** Brenda James; Margarete Keller; Annmarie McCanne  
**Date:** 4/6/2009 8:22 pm  
**Subject:** Re: Fwd: Re: Log 531

**CC:** Beverly Hamilton  
lets make it 4/13. if we haven't heard from billing clerk, we'll need to respond saying we are waiting on that just to get response to him.

>>> Annmarie McCanne 04/06/09 2:38 PM >>>  
Felicity,

Can we get an extension for Log 501 from Dr. Lovelace? Jeff Bryson is waiting to hear from Dr. Lovelace's billing clerk. The due date is 4/06/2009. Please advise.

Thanks,  
Annie

Annmarie "Annie" McCanne  
Administrative Assistant  
Bureau of Care Management & Medical Support Services  
Phone 803-898-4614  
Fax 803-255-8232  
mccanne@scdhhs.gov

Log # 531



*State of South Carolina*  
*Department of Health and Human Services*

Mark Sanford  
Governor

Emma Forkner  
Director

April 15, 2009

Oscar F. Lovelace, Jr., M.D.  
Lovelace Family Medicine, P.A.  
Highway 76  
Post Office Box 630  
Prosperity, South Carolina 29127

Dear Dr. Lovelace:

Upon receipt of your letter of March 22, 2009, Jeff Bryson, Program Manager, Managed Care Department, contacted CHCcares of South Carolina in the matter of your appeal for denial of payment for services provided to Ms. Tara Young on February 3, 2009. Mr. Bryson was provided a copy of the appeal decision letter sent to you dated March 12, 2009. Mr. Bryson contacted your office and left voice messages with Beth Gordon and Linda Kinard; however, he has not received a response to confirm that you received the letter from CHCcares. For this reason, I have enclosed a copy of that letter for your review/records.

You may pursue this denial further and request a State Fair Hearing with written consent for you to act on your patient's behalf. Please mail your request and a copy of your patient's signed consent to:

South Carolina Department of Health and Human Services  
Attention: Division of Appeals and Hearings  
Post Office Box 8206  
Columbia, South Carolina 29202

If you have any questions about this letter or need further assistance, please contact Mr. Bryson at (803) 898-2823.

Sincerely,

  
Felicity Myers, Ph.D.  
Deputy Director

FM/hhc

Enclosure



140 Stoneridge Drive, Suite 200  
Columbia, South Carolina 29210  
Provider Services (866) 802-2477

March 12, 2009

TO: Lovelace Family Medicine  
Attn: Oscar F. Lovelace  
Post Office Box 630  
Prosperity, SC 29127

RE: Member's Name: Tara Young  
CHCares ID#: 0054645107  
Date(s) of Service: 02/03/09

Dear Health Care Provider:

On 02/20/09, we received your request for pre-service authorization of coverage for an office visit and echocardiogram on the date(s) of service listed above. Your request has been administratively denied. The reason for the denial is:

After case and documentation reviewed, there is no documentation that indicates any significant diagnostic or therapeutic implications based on the result of the indicated test. The medical necessity of the requested test has not been demonstrated.

To obtain authorization for any future services, please call the Health Services Preauthorization Department at (866) 802-2475. Please note that all new prior authorization requests must have sufficient information to make a medical necessity determination.

For questions about this letter, please call customer service at (866) 802-2474.

Sincerely,

Appeals Coordinator  
Quality Improvement Department  
CHCares of South Carolina

cc: File