

March 22, 2016

The Honorable Nikki R. Haley
Office of the Governor
1205 Pendleton Street
Columbia, SC 29201

Dear Governor Haley

I'd like to bring to your attention the matter between me and the Charleston County Emergency Medical Services and the Charleston County Medical Services Billing Department. Please review the attached letter. May you or someone from your office please assist me in this matter.

Thank you very much Governor Haley

Sincerely,

A handwritten signature in cursive script that reads "Barbara Perry Palmer". The signature is written in black ink and is positioned above the printed name.

Barbara Perry Palmer

T: 843 767 2286



Christine O. DuRant
Emergency Medical Services Interim Director
Deputy County Administrator

843.202.6970
Fax: 843.202.6961
cdurant@charlestoncounty.org
Lonnie Hamilton III Public Services Building
4045 Bridge View Drive, Suite C202
North Charleston, SC 29405

February 2, 2016

Barbara Palmer
4119 Olivia Drive
North Charleston, SC 29418

Dear Ms. Palmer:

I hope all is well with you. Please accept this letter as documentation of the conversation between your daughter Arianna McDonald and Terri Fife, Project Officer for Charleston County.

Ms. McDonald and Ms. Fife discussed the fact that you were transported on May 29, 2014 by Charleston County Emergency Medical Services (EMS) due to an injury from you falling and hitting your head on the bathtub. You stated that the report written by Charleston County EMS is inconsistent with what actually happened, and requested that Charleston County EMS review the patient report and correct the inconsistency to reflect that you hit your head on the bathtub while getting dressed. We are unable to change the patient report.

EMS Management and Consultants, Inc., the billing company for Charleston County EMS, billed Medicare and Medicare denied payment for the EMS transport due to a finding of not medically necessary. Medicare reviews the information from the time of the call, the report from EMS, as well as the hospital reports to make a determination of medical necessity based upon all the information as a whole.

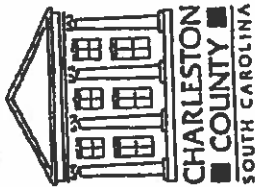
Once you received the denial from Medicare, you contacted Ms. Pam Porcher at Charleston County EMS department; Ms. Porcher offered you a payment plan; you did not accept the payment plan, as you were advised by the billing company to appeal Medicare's decision. You are currently waiting on an appeal decision from Medicare. The offer of a payment plan still exists if you decide that you would like to exercise that option.

Please contact my Project Officer, Ms. Fife at (843) 202-6972 if you need further assistance or if you should have any questions.

Sincerely,

Christine O. DuRant
Interim Director, Emergency Medical Services
Deputy County Administrator

c: Donna Kann, Pam Porcher



COMMUNITY DEVELOPMENT DEPARTMENT
LONNIE HAMILTON III PUBLIC SERVICES BUILDING
4045 Bridge View Drive, Ste. C216
North Charleston, S.C. 29405-7464

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Return Service Requested

Ms. Barbara Palmer
4119 Olivia Drive
North Charleston, SC 29418

Letter from Christine DuRant written
Feb. 2, 2016 Mailed to Barbara Palmer Feb. 12, 2016.
AAJWSMF 29418

Re: Run#14-505709 – Claim #02-14153-148-420

Patient - Barbara P Palmer

Complaint –The amount of \$513.40 to be removed from my credit report.

Reason – Although I informed Charleston County Medical Services and Charleston County Medical Services Billing Department that the EMS report was inaccurate, they proceeded to report the amount of \$513.40 as derogatory information to the Credit Bureau. I, as well as my daughter, have been communicating with them to resolve this issue. Instead of removing the information from my credit report or placing the account on “hold”, I have been billed \$513.40.

March 22, 2016

Christine O. DuRant, Emergency Medical Services Interim Director, Deputy County Administrator
Lonnie Hamilton III Public Services Building
4045 Bridge View Drive, Ste. C216
North Charleston, SC 29405-7464

Dear Ms DuRant

This letter is in response to your letter written 2-2-2016; post-stamped 2-12-2016. I contacted your office {as well as my daughter} numerous times to resolve this matter. I spoke with Pam Porcher and EMS Billing Services in North Carolina. Your letter is inconsistent with my communication with your office staff and Charleston County EMS Billing Services. Outlined below are the facts:

On May 27, 2014 (*not May 29, 2014 as noted in your letter*), I was walking in my bathroom. I stumbled and flipped over in the bathtub and hit my head. Since I live alone and didn't have any help, it took me approximately 20 minutes to get out of the bathtub. Therefore, when I was able to get up, I called 911. You stated in your letter that I hit my head on the bathtub while getting dressed. That is inaccurate. I was already dressed. I wasn't getting ready to take a bath.

I received a bill from the Charleston County Billing Services. I called the billing office in North Carolina. The representative told me that my insurance denied the claim. I asked why? She said, because you could have asked a friend or family member to take you to the hospital. I told her I have two insurances and I have never heard nothing like that in my whole life. After that, she said, she was going to send a form for me to sign. I received and signed the patient authorization form.

Next, I called Medicare and explained my situation. Medicare told me that I had the right to appeal, which I did, but I didn't hear back from Medicare. Therefore, I assumed the bill was paid.

I received another bill from the billing department in North Carolina. I went to your office on 8/26/2015. I spoke with Pam Porcher. I asked Pam why I was billed for these services when I have 2 insurances. Pam Porcher told me that the insurance denied the claim and I can pay your office \$10 until I'm finished. I asked for a copy of the EMS report and she provided it to me.

When I arrived home, I read the report. The report was documented incorrectly. Per the EMS report, it stated that I was getting ready to take a bath, slipped in the tub and struck my head on the side. Patient stated that she then finished getting dressed and getting ready to go to the hospital prior to calling 911.

That's incorrect. I was not getting ready to take a bath. I was already dressed. According to the EMS report, the fall occurred appx 1 hour prior to calling EMS. That's incorrect. I immediately called 911 after I was able to work myself out of the tub.

Ms DuRant, I {as well as my daughter} called your office to report the inaccuracies on the EMS report. The report should have reflected what happened, not what they "thought" happened. Your staff told me that the documentation could not be removed. It is my understanding from Medicare that the claim was denied because it was not medically necessary. The incident report from EMS should have provided the correct information so that the claim would have been processed and assessed based on what actually happened and not by what they "assumed" that happened. I feel that Medicare needs an updated and accurate report, and the derogatory information should be removed from my credit report. In addition, if my accident wasn't medically necessary, why was I transported to the emergency room? Your technician asked me what hospital I wanted to go to, I said Roper Hospital in the city.

Ms DuRant, I am 72 years old, a retired school teacher, and a good citizen. I had an accident that was beyond my control. I tried to resolve this matter with you, your staff and your billing department. Instead, I received a derogatory remark on my credit report. That's not right. That's wrong. "Right is right and wrong is wrong" and you can't make wrong right.

Sincerely,

Barbara P Palmer

T 843 767 2286

Cc

The Honorable Nikki R. Haley

Mayor R. Keith Summey

South Carolina Department of Consumer Affairs

Your Claims for Part B (Medical Insurance)

Part B Medical Insurance helps pay for doctors' services, diagnostic tests, ambulance services, and other health care services.

Definitions of Columns

Service Approved?: This column tells you if Medicare covered the service.

Amount Provider Charged: This is your provider's fee for this service.

Medicare-Approved Amount: This is the amount a provider can be paid for a Medicare service. It may be less than the actual amount the provider charged.

Your provider has agreed to accept this amount as full payment for covered services. Medicare usually pays 80% of the Medicare-approved amount.

Amount Medicare Paid: This is the amount Medicare paid your provider. This is usually 80% of the Medicare-approved amount.

Maximum You May Be Billed: This is the total amount the provider is allowed to bill you and can include a deductible, coinsurance, and other charges not covered. If you have Medicare Supplement Insurance (Medigap policy) or other insurance, it may pay all or part of this amount.

May 27, 2014

Charleston County Government, (843) 202-6700

PO Box 863, Lewisville, NC 27023-0863

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Amount Medicare Paid	Maximum You May Be Billed	See Notes Below
Ambulance service, advanced life support, emergency transport, level 1 (als 1 - emergency) (A0427-RHGY)	NO	\$425.00	\$0.00	\$0.00	\$425.00	A
Ground mileage, per statute mile (A0425-RHGY)	NO	88.40	0.00	0.00	88.40	A
Total for Claim #02-14153-148-420		\$513.40	\$0.00	\$0.00	\$513.40	

Notes for Claims Above

A Medicare does not pay for this item or service.



EMS

**PATIENT AUTHORIZATION
FOR USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION**

This form implements the requirements for patient authorization to use & disclose health information protected by the federal health privacy law, 45 CFR, parts 160, 164. Except as otherwise permitted or required by the privacy law, a health care provider subject to the privacy law may not use or disclose protected health information without an authorization that complies with the requirements of 45 CFR, 164.508(c).

Re: Barbara Palmer Date of Birth: 12/15/43
Patient Name

Provider or Squad: Charleston County

Run # 14-505709 Social Security Number: 248-70-8336

I hereby authorize EMS Management & Consultants, Inc. to use or disclose the following Protected Health Information:

Ambulance Call Report and or Bill(s)

This may be used or disclosed to: Barbara P. Palmer
Person or class of persons authorized to use or disclose the information

The purpose for the use or disclosure is: To seek Emergency medical attention as well as to be fully covered by my insurance plan.

I understand that I have the following rights:

- To inspect and copy the information to be used or disclosed according to this authorization.
- To revoke this authorization at any time except for instances where EMS Management & Consultants, Inc. has already used or disclosed information subject to this authorization.
- To revoke this authorization, I must provide written notice to:

Privacy Officer
EMS Management & Consultants, Inc.
PO Box 863
Lewisville, NC 27023
336-766-4448 or 800-814-5339

Fax # 336-740-9773

Information used or disclosed according to this authorization may again be disclosed by the recipient. This information is no longer protected by privacy law.

Written authorization is not required for treatment, payment or healthcare operations.

I have read this authorization and I understand I have the right to refuse to sign it. I understand and agree to the terms of this authorization.

x Barbara P. Palmer
Signature

x 7-18-14
Date

X _____ (Circle if "Next of Kin" and patient is deceased)
If personal representative, description of authority

Expiration date or event