

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Nyers</i>	DATE <i>3-10-08</i>
--------------------	------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000460</i>	<input type="checkbox"/> I Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cleaved 3/17/08, letter attached. Same as log #431</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>3-20-08</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.			
2.			
3.			
4.			



RECEIVED

MAR 10 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR

State of South Carolina Office of the Governor

MARK SANFORD
GOVERNOR

Post Office Box 12267
COLUMBIA 29211

February 27, 2008

Ms. Elizabeth W. Baity, CPC, PCS
Department of Plastic and Reconstructive Surgery
Medical Center Boulevard
Winston-Salem, North Carolina 27157-0344

Dear Liz,

Thank you for forwarding a copy of your correspondence to my office. I am sorry to hear of the difficulties Denise has experienced and am asking that someone from the Department of Health and Human Services contact you directly. You should be hearing from that office soon. In the meantime, thanks again for taking the time to write.

Sincerely,


Mark Sanford

MS/emj

cc: Ms. Emma Forkner, Director
South Carolina Department of Health and Human Services

Log. Myers
Apple Sign.

COPY

Department of Plastic and
Reconstructive Surgery

Administration: (336) 716-4416
Fax: (336) 716-7755

Clinical: (336) 716-4171
Fax: (336) 716-6642

February 14, 2008

WAKE FOREST

SCHOOL of MEDICINE
THE BOWMAN GRAY CAMPUS

RECEIVED

MAR 10 2008

Department of Health & Human Services
OFFICE OF THE DIRECTOR



Wake Forest University Baptist

Liz Baity, CPC
Patient Business Services Coordinator
Wake Forest University Physicians

Emma Forkner, Director
State of South Carolina
Department of Health and Human Services
P.O. Box 8206
Columbia, S.C. 29202-8206

Patient: Denise Ellis
SC Medicaid ID #: 4780712177
Date of Service: 02/05/2007

Dear Ms. Forkner:

I am writing you today on behalf of the above patient Denise Ellis. Ms. Ellis was diagnosed with adenocarcinoma and underwent a lumpectomy and axillary node dissection in 1999. Subsequently she underwent radiation followed by Tamoxifen for five years. In 1991 she was diagnosed with papillary cancer of her thyroid which was followed by a thyroidectomy. The patient is also an insulin dependent diabetic.

In January 2007 Ms. Ellis was diagnosed with a recurrence of her breast cancer. Due to this being a recurrence and already having received radiation to the breast as well as her other underlying health issues, it was recommended she go to a teaching hospital. She chose our facility because she has family that works here and a support group in this area who actually took her in during her recovery period. She had also been followed by Dr. Seawaldt yearly at Duke in Durham. The only teaching hospital in South Carolina is in Charleston where she had no family or friends to help during her recovery, also, she had no money for lodging or transportation.

At that time the patient did not have Medicaid of South Carolina she only had Assurant Health who denied her claim listing as the reason "*This condition not covered.*" Due to her previous two bouts with cancer she is unable to get coverage for that condition. In 1999 she had to pay for her cancer treatment depleting her savings. Ms. Ellis applied for and received retroactive coverage by Medicaid of S.C. Our charges, of course, were

Medical Center Boulevard • Winston-Salem, North Carolina 27157-0344
Telephone (336) 716-5878 • Fax (336) 716-6642
E-mail: ebaity@wfbmc.edu

denied by Medicaid of S.C. for authorization which could not have been obtained. I have been in contact with Madis Boyd in the Preauthorization department who stated we should have had a Medicaid referral, which was impossible with the retroactive coverage and also this service could have been provided in South Carolina so we will not be given a retroactive authorization.

This is by far not that cut and dry. We always contact the insurance carrier prior to surgery and if she had had Medicaid of S. C. we would have followed what your guidelines were for requesting out of state coverage. We have no options but to request intervention at a higher level than Ms. Boyd's department. I am sending this same letter and the notes we have to the Medical Director, Dr. Marian Burton, in hopes that between the two of you we may be able to get some sort of resolution for this patient as she is ready to have the second part of her staged reconstruction. Should she be required to finish her reconstruction in South Carolina I am sure our surgeon, Dr. Malcom Marks, will try to locate someone for her, but at the moment we need to get this issue of her February 2007 surgery resolved.

Sincerely,

Elizabeth W. Baity

Elizabeth W. Baity, CPC,PCS
Business Services Coordinator/Coder
Plastic and Reconstructive Surgery

Enclosures

cc: Dr. Malcom Marks

Dr. Marian Burton
State of South Carolina
Department of Health and Human Services
P.O. Box 8206
Columbia, S.C. 29202-8206

Governor Mark Sanford
Office of the Governor
P.O. Box 12267
Columbia, SC 29211

MEDHMS54 P S.C. DEPARTMENT OF HEALTH AND HUMAN SERVICES DATE: 03/10/08
 MEDSPROD RECIPIENT INFORMATION ACTION:

MEMBER PERIOD START: 01/13/08 END: PAGE: 0001

NAME: ELLIS DENISE D HH NAME: ELLIS DENISE D

RCP NUMBER: 4780712177 HH NUMBER: 101179108 ACTION TYPE: MAINTENANC

SSN: 209-38-6386 VC: V APL STATUS: ACTION DATE: 03/09/07

PRIMARY INDIVIDUAL: APL CO: 26 WORKER ID: JANEL LOCATION: 055

4092 COYLEDOM COURT SSCN: RRN:

RACE: 01 SEX: F MARITAL STATUS: U

TPL: N RSP: 0 RELATION: SELF

DOB: 10/21/1949 DOD:

MYRTLE BEACH SC 29577- LIV ARRANGEMENT: HOME INCOME TRUST:

PROVIDER: BCCP3

BG	BEG	END	BENEFITS QMB RETRO % OF POV							
S	NUMBER	ELIG	ELIG	PCAT	QCAT	TYPE	IND	IND	LEVEL	SPONSOR
-	69541756	02/01/2007		71	50	FULL	N	Y	.00	
	69541756	01/01/2007	02/01/2007	71	50	FULL	N	Y	.00	

UPDATED: USER ID: JANEL DATE: 03/09/07 SYSTEM ID: TTR1001 DATE: 03/13/07
 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



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Fortner
Director

March 17, 2008

Elizabeth W. Baity, CPC, PCS
Department of Plastic Surgery and Reconstructive Surgery
Wake Forest University, School of Medicine
Medical Center Boulevard
Winston-Salem, North Carolina 27135-1075

RE: Denise Ellis - 4780712177

Dear Ms. Baity:

Thank you for your letter concerning Denise Ellis's treatment for breast cancer. We welcome the opportunity to be of assistance. We have coordinated this response with our medical director, Dr. Marion Burton.

Mr. Mike Jillcott, from your office, contacted the South Carolina Department of Health and Human Services (SCDHHS) program representative, Mrs. Maidis Koger-Boyd, on various occasions over a period of several months to discuss prior authorization for out-of-state claims. Each time, she responded verbally to his request for information regarding retroactive prior authorization and South Carolina Medicaid Out-Of-State policy.

After thoroughly reviewing the claims that were submitted, we found that they were denied because the claims contained erroneous data that prevented them from processing for payment. For example, it was found that some claims were denied for insurance edits related to the policy with Assurant Health. The insurance information presented on the claims does not match the data we have in our system, which caused the claims not to process and pay. The primary insurance information that we have on file is listed on the Edit Correction Form displaying the exact carrier code and policy number needed to correct the insurance edit. To date, we have not received a claim with the necessary corrections.

Leg #431
✓

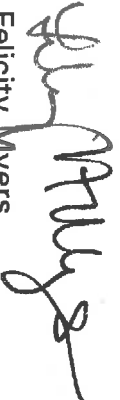
Ms. Elizabeth W. Baity
March 17, 2008
Page 2

As stated in your correspondence, Ms. Ellis did not have Medicaid coverage in February 2007 when she received treatment. However, she applied and was granted retroactive coverage during the month of March 2007. According to policy, it is the responsibility of the provider to submit a clean claim within the allotted time limitation of one-year timely filing in order to be reimbursed. A clean claim is one that is free of any edits. The exception to this policy, in relationship to this recipient, would have been filing claims within six months of the provider becoming aware of the recipients retroactive Medicaid eligibility. In this situation most claims were initially filed within both the one-year timely filing limitation and the six-month retro-eligibility period. Unfortunately, the edits on the claims were never corrected and most of the claims are now past the timely filing limit.

The policies related to out-of-state services and directions for correcting any claim edits can be found on our web page at www.scdhhs.gov in the Physicians, Laboratories, and Other Medical Professionals manual. The edit steps outline how to resolve claims and should help prevent similar situations in the future.

We appreciate your support of the South Carolina Medicaid program. If you should have any further questions regarding this case, please contact Ms. Valeria Williams, Division Director for the Division of Physician Services, at (803) 898-2660.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Felicity Myers', written over the printed name.

Felicity Myers
Deputy Director

FM/gws