

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

| | |
|-----------------------------|------------------------|
| TO <i>Roberts/Snyder</i> | DATE <i>6-27-13</i> |
|-----------------------------|------------------------|

| DIRECTOR'S USE ONLY | ACTION REQUESTED |
|--|---|
| 1. LOG NUMBER <i>000403</i> | <input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____ |
| 2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Keck</i> <i>Cleared 7/19/13, letter attached</i> | <input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ |
| | <input type="checkbox"/> FOIA DATE DUE _____ |
| | <input checked="" type="checkbox"/> Necessary Action |

| APPROVALS (Only when prepared for director's signature) | APPROVE | * DISAPPROVE (Note reason for disapproval and return to preparer.) | COMMENT |
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| 1. | | | |
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| 3. | | | |
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David Downie IV, M.D., P.A.

1327 Richland St. • Columbia, SC 29201 • Tel 803.252-4882 • Fax 803.252-2233

David Downie IV, M.D.
Diplomate, American Board of
Psychiatry and Neurology
Child, Adolescent, and Adult Psychiatry

June 26, 2013

Ms. Kathleen C. Snider
Bureau Chief of Compliance
and Performance Review
S.C. Dept. of Health and Human Services
PO Box 8206
Columbia, SC 29202-8206

RECEIVED

JUN 27 2013

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Dear Ms. Snider,

As the records your office recently obtained are primarily patients of Pine Grove Residential Treatment facility, I have copied recent assessments done at this facility for you. Please note also that when your staff copied records in my office, the only records available were those copies of assessments that I dictated on residents of Pine Grove through my office. The complete medical/psychiatric record, which I review, write orders in, review laboratory data, review consultations, and complete treatment plans, as well as signing on off additional orders, complete required mandatory assessments and forms, such as those for tardive dyskinesia, are only available at the Pine Grove facility. This complete medical/psychiatric record at Pine Grove provides a more comprehensive view of service that I provide there, which is not part of the record kept in my office. To assume all work I provide is fully described in the notes that you have would be inaccurate. The Pine Grove record, which you do not have, does have all of the above noted materials, which are a component of service provided.

As a majority of records you have requested are of patients I provide consultation to at Pine Grove, I have terminated my relationship with this treatment facility. As these are severely disabled children suffering from autism and a multitude of other disorders they require continued child psychiatric care. In previous correspondence with your organization regarding ongoing care for children I no longer will see has assured me your organization will obtain appropriate care. Please assist Pine Grove in obtaining essential care for these children.

Please also note that though I am a solo practitioner, my staff and I regularly review records to confirm proper documentation is done and consistent with meeting required key components of evaluation and management services. It is important that my records reflect the service which I bill, which I believe has been accurate. In lieu of using "templates", standardized forms and "check off boxes" to document all "bullets" required of E&M codes, I provide an easily readable narrative of a full neuro-behavioral which includes documentation of required "bullet points" and / or time spent on counseling / coordination of care.

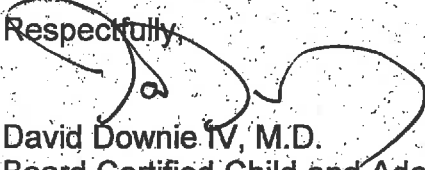
As I have noted in previous correspondence, when I have sent copies of

my assessments to your office, I have been told that they meet standards for the billing I have submitted, and wish to note again that I find it disturbing that your office feels the need to audit my records after always being open and available to your office, and have provided you with previous copies of records on a voluntary basis.

Enclosed are additional copies of records you may review to confirm my documentation is adequate. If you have further questions regarding care I provide I would like to request an opportunity to meet with you at your convenience.

Thank you for your time and consideration to this information.

Respectfully,



David Downie IV, M.D.
Board Certified Child and Adolescent Psychiatry
Board Certified Adult Psychiatry
Clinical Professor, Dept of Pediatrics,
University of South Carolina
Clinical Professor, Dept of Neuropsychiatry and Behavioral Sciences,
University of South Carolina
Fellow of American Psychiatric Association
Fellow of American Academy of Child and Adolescent Psychiatry

DD/bld

cc: Janice Gardner, R.N.
Byron Roberts, General Counsel
Anthony C. Keck, Director

COPY

David Downie IV, M.D., P.A.
1327 Richland Street
Columbia, SC 29201

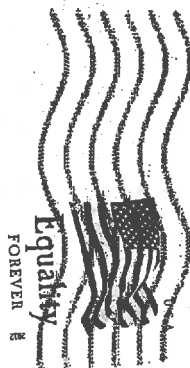
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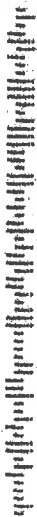
Department of Health & Human Services
OFFICE OF THE DIRECTOR

Mr. Anthony Keck, Director
S.C. Dept. of Health and Human Services
PO Box 8206
Columbia, SC 29202-8206

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Reg # 403 + 10 ✓

Anthony E. Keck • Director
Nikki R. Haley • Governor

July 19, 2013

David Downie IV, M.D., P.A.
1327 Richland Street
Columbia, South Carolina 29201

Dear Dr. Downie:

Please be assured that we have finished the Program Integrity review of your patient records and are in the process of determining the preliminary results. You should expect written notification of the outcome of your review in the form of a letter from Janice Gardner, RN, the nurse reviewer who conducted this review. The letter should be mailed the week of July 22nd. As you were informed in a letter dated July 5, 2013, from Ms. Gardner, we could not finalize our review until we ensured that we had obtained all available patient records needed to substantiate the claims you submitted for Medicaid reimbursement. There was a delay in obtaining some of the records for your hospitalized patients from Palmetto Baptist. Also, there is no need to send us any more copies of patient notes or other records, as we have the documentation we need for the patients in our sample. The records you recently sent were outside of the time frame for our review and therefore not applicable to this audit.

We hope you will contact Ms. Gardner as soon as you receive the Program Integrity letter to arrange for an informal conference. This is an important part of the audit process during which we can go over the results of your review in depth. It will give you the opportunity to bring any additional material you think will support your billings, and allow both parties to discuss the details of the review. After the informal conference, we will issue a final letter on the results of the Program Integrity review.

I hope this answers your concerns, and we do appreciate your openness and cooperation during the review process. Please don't hesitate to contact me at (803) 898-1050 should you have any further questions.

Sincerely,

Kathleen C. Snider, Bureau Chief
Compliance and Performance Review

KCS/m

cc: Anthony E. Keck, Director
Byron Roberts, General Counsel
Janice Gardner, RN

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

Kathy,

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JUN 19 2013

SCDHHS
Office of General Counsel

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JUN 23 2013

SCDHHS
Office of General Counsel

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JUN 27 2013

Department of Health & Human Services
OFFICE OF THE DIRECTOR

June 26, 2013

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