

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR



ACTION REFERRAL

Relogged from Supra to Singleton on 8/31/11. Due 9/15/11

TO <i>Singleton/FOIA</i>	DATE <i>8-26-11</i>
---------------------------------	----------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>101094</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Stensland, Supra</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
<i>closed 9/12/11, sent electronically.</i>	<input checked="" type="checkbox"/> FOIA DATE DUE <i>9-15-11</i>
	<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.			

Brenda James - SC FOIA

From: "Malone, Colleen" <Colleen.Malone@kmhp.com>
To: "Jeff Stensland" <STENSJEF@scdhhs.gov>
Date: 08/25/2011 4:51 PM
Subject: SC FOIA

RECEIVED

AUG 26 2011

Department of Health & Human Services
 OFFICE OF THE DIRECTOR

Hello,

I am requesting the following data and would like an estimate of the cost associated with it.

I am looking for monthly Medicaid enrollment from January 2010 through the most recent month (August 2011?)

I need the data broken down by county and plan and if possible eligibility category. Preferably to look like this

\$2500

*Plan Specific
 include FFS
 by month
 Jan 10
 Aug 11*

County	Plan		
	Aug 2011	July 2010	Jan 2011
Abbeville		110	106
Aiken		549	641
Allendale		42	51
Anderson		521	840

Or

County	Plan		
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Abbeville		110	106
Plan			
Plan C			
Aiken			
Plan A			
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Allendale		42	51
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Etc.

If a better explanation is required please let me know.



TO: Nancy Ford % Colleen Malone
FROM: SCDHHS

SUBJECT: Cost of Processing Request for Information #

The South Carolina Department of Health and Human Services has received and processed your request for information. The cost for processing this information is as follows:

Staff processing time at \$10.00 per hour	<u>2.5</u> Hours	\$ <u>25.00</u>
Pages copied at \$.10 per page *	_____ Pages	\$ _____
Pages faxed at \$.20 per page	_____ Pages	\$ _____
Shipping and Handling Costs		\$ _____
Other costs associated with the FOIA request:	_____	\$ _____
Total Amount Due SCDHHS:		\$ <u>25.00</u>

Please remit the above amount to the following address:

Bureau of Fiscal Affairs
South Carolina Department of Health and Human Services
Post Office Box 8297
Columbia, South Carolina 29202-8297

Please contact Laurel Eddins should you have any questions.

Laurel Eddins
Signature

12 Sept 11
Date:

* Sent electronically 9/12/11

Laurel Eddins - RE: SC FOIA

From: "Malone, Colleen" <Colleen.Malone@kmhp.com>
To: "Laurel Eddins" <EDDINS@scdhhs.gov>
Date: 9/1/2011 11:05 AM
Subject: RE: SC FOIA

Laurel,

Okay great! The address is as follows:

Nancy Ford

The Amerihealth Mercy Family of Companies

100 Stevens Drive

Philadelphia, PA 19113

Let me know if you need any more information.

Colleen Malone

From: Laurel Eddins [mailto:EDDINS@scdhhs.gov]
Sent: Thursday, September 01, 2011 10:59 AM
To: Malone, Colleen
Subject: RE: SC FOIA

Hi,
We will bill you, which means I will need your address information.

No, I will build the query to provide this data and then we can update the parameters and it will only cost about between \$5 and \$10 for processing for updates.

Thanks!

*Laurel K. Eddins, Senior Consultant
SC Dept of Health and Human Services
1801 Main Street, Suite 1121
Columbia, SC 29202
Eddins@scdhhs.gov*

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Or

County	Plan		
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Aiken			
Plan A			
Plan B		549	641
Allendale		42	51
Anderson		521	840

Etc.

If a better explanation is required please let me know.

\$25⁰⁰

Plan Specific
 include FFS
 by month
 Jan 10
 Aug 11



TO: Nancy Ford % Colleen Malone
FROM: SCDHHS

SUBJECT: Cost of Processing Request for Information #

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Signature

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Date:

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Subject: RE: SC FOIA

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Okay great! The address is as follows:

Nancy Ford

The Amerihealth Mercy Family of Companies

100 Stevens Drive

Philadelphia, PA 19113

Let me know if you need any more information.

Colleen Malone

From: Laurel Eddins [mailto:EDDINS@scdhhs.gov]
Sent: Thursday, September 01, 2011 10:59 AM
To: Malone, Colleen
Subject: RE: SC FOIA

Hi,

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No, I will build the query to provide this data and then we can update the parameters and it will only cost about between \$5 and \$10 for processing for updates.

Thanks!

*Laurel K. Eddins, Senior Consultant
SC Dept of Health and Human Services
1801 Main Street, Suite 1121
Columbia, SC 29202
Eddins@scdhhs.gov*

Brenda James - RE: SC FOIA - Log 94

From: Laurel Eddins
To: Colleen Malone
Date: 09/12/2011 4:34 PM
Subject: RE: SC FOIA - Log 94
CC: April Wilson; Brenda James; Deirdra Singleton; Jeff Stensland; Marie...
Attachments: FOIA_Report_Colleen_By_County_and Month.xls

Hi, Colleen,

Please see attached information as requested under our Freedom of Information Act. I had a staff person summarize by county and by region (as defined in our enrollment process). Please see attached.

As I mentioned, this will be a charge of \$25.00 and should be submitted to:
The Bureau of Fiscal Affairs
SCDHHS
PO Box 8297
Columbia, SC 29202

We will be sending an invoice to Nancy Ford, The Amerihealth Mercy Family of Companies, 100 Stevens Drive, Philadelphia, PA 19113

Please let me know if you need any additional information. Thanks!

Laurel K. Eddins, Senior Consultant
SC Dept of Health and Human Services
1801 Main Street, Suite 1121
Columbia, SC 29202
Eddins@scdhhs.gov
803 898-2955

>>> On 9/1/2011 at 11:04 AM, "Malone, Colleen" <Colleen.Malone@kmhp.com> wrote:

Laurel,

Okay great! The address is as follows:

Nancy Ford

The Amerihealth Mercy Family of Companies

100 Stevens Drive

Philadelphia, PA 19113

Let me know if you need any more information.

Colleen Malone

From: Laurel Eddins [mailto:EDDINS@scdhhs.gov]
Sent: Thursday, September 01, 2011 10:59 AM
To: Malone, Colleen
Subject: RE: SC FOIA

Hi,
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Thanks!

Laurel K. Eddins, Senior Consultant
SC Dept of Health and Human Services
1801 Main Street, Suite 1121
Columbia, SC 29202
Eddins@scdhhs.gov
803 898-2955

>>> On 9/1/2011 at 10:49 AM, "Malone, Colleen" <Colleen.Malone@kmhp.com> wrote:

Okay great. Looking forward to months in the future would it also be 25\$ per request for each additional month? What from would be best to submit the payment to you?

Thanks again for your help,

Colleen

From: Laurel Eddins [mailto:EDDINS@scdhhs.gov]
Sent: Thursday, September 01, 2011 10:09 AM
To: Malone, Colleen
Subject: RE: SC FOIA

Sure, this is not very difficult. The only thing I will mention is that occasionally retro active eligibles will skew totals, so this data will be as of the day it is run and my different from reports of this same data run previously. I estimate about \$25 for this request. Please let me know if I should proceed. Thanks!

Laurel K. Eddins, Senior Consultant
SC Dept of Health and Human Services

1801 Main Street, Suite 1121
 Columbia, SC 29202
Eddins@scdhhs.gov
 803 898-2955

>>> On 9/1/2011 at 10:05 AM, "Malone, Colleen" <Colleen.Malone@kmhp.com> wrote:

Hi Laurel,

Thanks for your help. Specific plan would be best (plan name) but if the information for FFS etc. is also available that would be great depending on cost. I would also like each month from January 2010 forward.

Best,

Colleen Malone

From: Laurel Eddins [mailto:EDDINS@scdhhs.gov]
Sent: Thursday, September 01, 2011 10:04 AM
To: Malone, Colleen
Subject: Re: SC FOIA

Hello, Ms. Malone,

I am Laurel Eddins with the Office of Reporting, Research and Special Projects. I will be assisting you with this request. I would like to clarify a couple things so we can properly estimate the charges.

1. Do you need to know the specific plan information or do you want plan type (fee for service, mco, mhn)?
2. Do you need each month from January 2010 forward or just quarterly totals?

Thanks!

Laurel K. Eddins, Senior Consultant
 SC Dept of Health and Human Services
 1801 Main Street, Suite 1121
 Columbia, SC 29202
Eddins@scdhhs.gov
 803 898-2955

>>> On 8/25/2011 at 4:50 PM, "Malone, Colleen" <Colleen.Malone@kmhp.com> wrote:

Hello,

I am requesting the following data and would like an estimate of the cost associated with it.

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I need the data broken down by county and plan and if possible eligibility category. Preferably to look like this

County	Aug 2011	Plan July 2010	Jan 2011
Abbeville		110	106
Aiken		549	641
Allendale		42	51
Anderson		521	840

Or

County	Aug 2011	July 2010	Jan 2011
Abbeville		110	106
Plan			
Plan C			
Aiken			
Plan A			
Plan B		549	641
Allendale		42	51
Anderson		521	840

Etc.

If a better explanation is required please let me know.

Thank You,

Colleen Malone

MAILGW01.kmhp.com made the following annotations

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OFFICE OF DIRECTOR**

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Brenda James - SC FOIA

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To: "Jeff Stensland" <STENSJEF@scdhhs.gov>
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\$250

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*Plan Specific
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Signature

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What's on our website

From: Jan Polatty
To: Brenda James
Date: 08/26/2011 7:21 AM
Subject: Fw: SC FOIA
Attachments: Fw: SC FOIA

Pls log



TO:

FROM:

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