

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
<i>Bassling</i>	<i>7-17-06</i>

DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER	<i>000096</i>	<input type="checkbox"/> Prepare reply for the Director's signature	DATE DUE _____
2. DATE SIGNED BY DIRECTOR	<i>Clemed Taylor, letter attached</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature	DATE DUE <i>7-26-06</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.				



CAROLINA CARDIOLOGY
CONSULTANTS, P.A.

February 9, 2006

RECEIVED

JUL 17 2005

Department of Health & Human Services
OFFICE OF THE DIRECTOR

RE: Reuben Borroto
SSN 261-99-6271
DOB 12/29/58

To Whom It May Concern:

Mr. Borroto is a patient of mine at Carolina Cardiology. He has had mitral valve replacement secondary to myxomatous mitral valve with severe mitral regurgitation. He currently is on Medicaid and apparently is only allowed twelve visits per year. Because of his prior mitral valve replacement (and in fact he required a second surgery) and his need for anticoagulation, he has required more than twelve visits already. He has seen me several times in the office although apparently his brief visits to check his INR are being counted in the twelve visits total.

I would ask that this restriction to twelve visits be lifted as he will continue to need to see me in the office fairly frequently and also will need to have his Coumadin monitored for the rest of his life. If you have any questions, please do not hesitate to contact me. Thank you for your consideration in this matter.

Sincerely,

Paul R. Jones, MD, FACC

PRJ/plg



ICANL
Nuclear Cardiology/
Asynchronous Nuclear
Cardiology Laboratory



ICAEI
Imaging Center for
Echocardiography
Marketing Address
P.O. Box 8795
Greenville, SC 29604

Greenville Office
877 9 West Eggs Road
Greenville, SC 29605
(864) 455-6900
Toll Free: 1-877-611-9965
Fax: (864) 255-5619

Anderson Office
100 Healthy Way, Suite 1250
Anderson, SC 29621
(864) 224-2465
Toll Free: 1-877-224-2465
Fax: (864) 224-1146

Greer Office
313 Memorial Drive, Suite 100
Greer, SC 29650
(864) 455-6900
Fax: (864) 255-5619

www.carolinacardio.com

Mr Ruben D Borroto

Male DOB: 12/29/1958

261-99-6271

Home: (305)267-8798

Ins: Medicaid (9)

04/25/2006 - Office Visit

Provider: Paul Jones MD

Location of Care: Carolina Cardiology Consultants, P.A.

Current Problems:

MITRAL REGURGITATION (ICD-424.0) -- severe with myxomatous mitral valve status post mitral valve replacement - tissue prosthetic valve status post re-do surgery with mosaic mech valve secondary to severe perivalvular MR
HEPATITIS, HX OF (ICD-V12.09) -- childhood
ATRIAL FIBRILLATION, PAROXYSMAL (ICD-427.31) -- postop
AORTIC REGURGITATION (ICD-424.1) -- mild to moderate

History of Present Illness

History from: patient

Reason for visit: 1m f up

Chief Complaint: no complaints

History of Present Illness: Here for flw. Has had some episodes of dizziness, brief. No palp. ECG unremarkable.

Current Meds:

COUMADIN TABS (WARFARIN SODIUM TABS) as directed
ULTRACET TABS (TRAMADOL-ACETAMINOPHEN TABS) prn

Risk Factors

Tobacco Use: never

Alcohol (drinks/day): 0

Cardiovascular: Denies difficulty breathing at night, racing/skipping heart beats, shortness of breath with exertion, difficulty breathing while lying down, bluish discoloration of lips or nails, near fainting, fainting, fatigue, palpitations, weight gain, chest pain or discomfort, lightheadedness, swelling of hands or feet, leg cramps with exertion.

Respiratory: Denies sleep disturbances due to breathing, chest discomfort, cough, shortness of breath, coughing up blood, excessive sputum, wheezing, excessive snoring.

Vital Signs

Height: 66 inches

Pulse rate: 87

Blood Pressure: 125/77 mm Hg

Physical Exam

Neck

Neck veins: no visible JVD

Respiratory

Respiratory effort: no respiratory distress

Auscultation: no rales, rhonchi, or wheezes

Cardiovascular

Carolina Cardiology Consultants, P.A.
P.O. Box 8795 Greenville, SC 29604
(864) 455-6900 Fax:

June 12, 2006
Page 2
Chart Document

Mr Ruben D Borroto
Male DOB: 12/29/1958

261-99-6271

Home: (305)267-8798
Ins: Medicaid (9)

Auscultation: regular rhythm, crisp valve sounds, no gallops

Pedal pulses: pulses 2+, symmetric

Periph. circulation: no cyanosis, clubbing, edema, or significant varicosities

Plan

Additional Plan Comments: Echo to reevaluate LV function and valve.

Signed by Paul Jones MD on 04/25/2006 at 6:15 PM



Borroto, Ruben
ID:
DOB: 12/29/1958
47yr, Male

25-Apr-2006 14:22:56

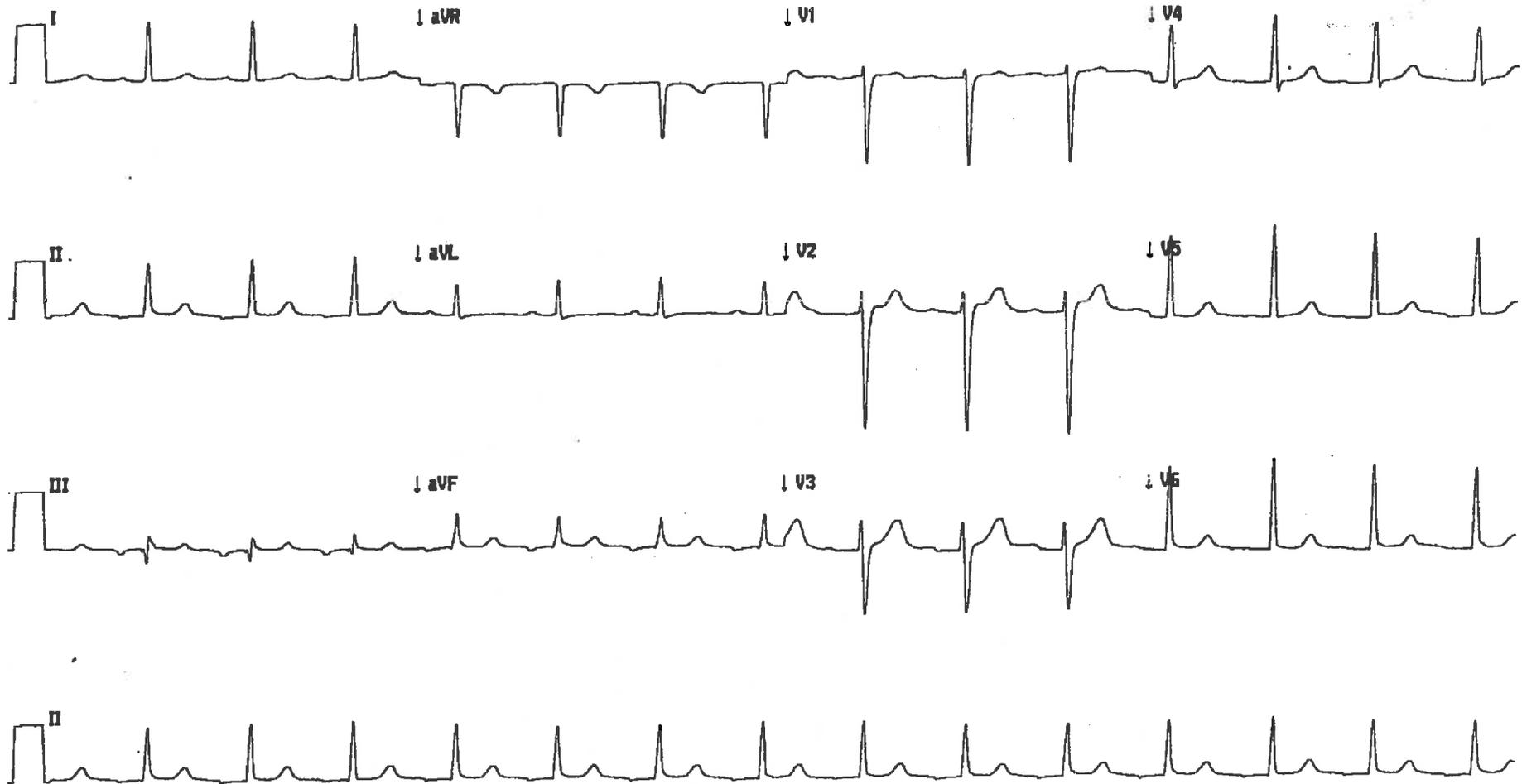
ATRIAL RHYTHM WITH FIRST DEGREE AV BLOCK
ABNORMAL ECG

Vent rate: 86 BPM
PR int: 228 ms
QRS dur: 92 ms
QT/QTc: 363/406 ms
P-R-T axes: -99 29 57

UNCONFIRMED REPORT

SCANNED

APR 26 2006



RUN DATE 05/07/2006 000016446
 REPORT NUMBER CLM3500
 ANALYST ID
 SIGNON ID
 SC DEPARTMENT OF HEALTH AND HUMAN SERVICES
 EDIT CORRECTION FORM
 HIC - 23 PRAC SPEC - 03
 CLAIM RESTART DATE / / DOC IND M

CLAIM CONTROL #0612500160612200A
 PAGE 14221 ECF 14221 PAGE 1 OF 1
 ENC Y
 ORIGINAL CEN:
 ADJ CEN:
 EDITS
 INSURANCE EDITS
 CLAIM EDITS
 LINE EDITS
 01) 977

 AGENCY USE ONLY
 ** APPROVED EDITS
 ** REJECTED LINE EDITS

10 RECIPIENT NAME - RUBEN D BORROTO
 13 RES 14 ALLOWED
 15 LN DATE OF PLACE PRD CODE
 16 17 18 19
 19 20 21 22
 INDIVIDUAL CHARGE PAY UNITS
 PROVIDER IND
 271887 91.00 1.000

CANCELLED
 MCOCS BY: **HOLAW**
 FROM LOC 25 TO LOC
 DATE JUN 28 2006

24	INS CARR	23
24	POLICY NUMBER	25
25	INS CARR PAID	26
26	TOTAL CHARGE	91.00
27	AMT REC'D INS	
28	BALANCE DUE	91.00
29	OWN REF #	269510

RESOLUTION DECISION
 ADDITIONAL DIAG CODES:

INSURANCE POLICY INFORMATION

RETURN TO:
 MEDICAID CLAIMS RECEIPT
 P. O. BOX 1412
 COLUMBIA, S.C. 29202-1412
 PROVIDER:
 CAROLINA CARDIOLOGY CONSLT
 PO BOX 8795
 GREENVILLE
 SC 29604-8795

0100

* PLEASE NOTE: EDIT CORRECTION FORMS RETURNED TO DMHS WITH NO CORRECTIVE ACTION WILL BE DISREGARDED *
 * INDICATES A SPLIT CLAIM



Log # 96

State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Robert M. Kerr
Director

July 24, 2006

Paul R. Jones, MD, FACC
Carolina Cardiology Consultants, PA
Post Office Box 8795
Greenville, South Carolina 29604

Re: Reuben Borroto

Dear Dr. Jones:

Thank you for corresponding regarding this patient. The South Carolina Department of Health and Human Services (DHHS) can support additional physician office visits when medically necessary. Although you described the diagnoses of this patient, I will need to receive a letter signed by you in order to request that the agency support these additional visits you requested.

If you would like to discuss this further, please call me 803-898-2500 or 803-255-3400. Thank you for your advocacy regarding this patient and for caring for South Carolina Medicaid beneficiaries.

Sincerely,

Handwritten signature of O. Marion Burton in black ink.

O. Marion Burton, MD
Medical Director

OMB/bk