

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

log #462  
Zerovia ✓

TO <i>Myers/Giese</i>	DATE <i>5-28-10</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>100462</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cleared 6/14/10, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>6-9-10</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. <i>Bz Giese</i>	<i>6/14/10 Bz</i>	<i>lit</i>	
2.			
3.			
4.			

RECEIVED  
Dept. of Health  
& Human Services

JUN 02 2010

Bureau of  
Health Services

eReceivables LLC

May 21, 2010

*Att: Mr. R*  
**RECEIVED**

MAY 24 2010

South Carolina Department of Health and Human Services

Ms. Emma Forkner

Director

1801 Main Street

Columbia, South Carolina 29201

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Dear Ms. Forkner:

We have recently been engaged by Renal Advantage, Inc. (RAI) to follow up on unpaid life saving dialysis claims billed to the South Carolina Medicaid program and to the Illinois State Renal program for dates of service from 1/1/05 through 7/31/05. RAI acquired dialysis centers from DaVita across the country and there were significant issues involved in the transition, including getting new Medicare provider numbers, which caused significant delays in billing secondary payers.

28 claims totaling \$13,872 remain unpaid or partially paid for services provided to South Carolina Medicaid recipients. These are claims for which Medicare was primary and South Carolina Medicaid secondary. We understand RAI was initially denied an extension for timely filing of these claims, however, there were mitigating circumstances as mentioned above, and these were life saving, dialysis treatments provided by Renal Advantage, Inc. to South Carolina Medicaid recipients. After the acquisition, it would have been unconscionable for RAI to delay these life saving dialysis treatments until they could get all of the paperwork through CMS allowing them to bill properly, and RAI did not delay or deny those life saving services. And so, RAI is essentially penalized for doing what we all believe was right, saving people's lives.

We have reason to believe some of these claims may have been incorrectly paid to DaVita, and if we can document that fact, we will be able to go to DaVita with the appropriate information and secure reimbursement for RAI for those particular claims.

We understand the State of South Carolina can refer to its timeframes and declare you are not going to pay RAI, but sometimes we simply need to do what is right. We are reaching out to you for your guidance in how we should proceed in working with South Carolina to identify those claims for which payment may have been made to the incorrect provider, and to reach some accommodation on those claims that were not paid.

We look forward to hearing from you. Thank you.

Regards,

*Bill Whitaker*

Bill Whitaker

4000 Hollywood Blvd., Suite 650 N, Hollywood, FL 33021

Phone: 954-893-1

*Please log  
to Myers /  
Gore  
approx 5:00 PM*

June 14, 2010

Mr. Bill Whitaker  
eReceivables LLC  
4000 Hollywood Blvd, Suite 650  
Hollywood, Florida 33021

Dear Mr. Whitaker:

Thank you for your recent letter requesting consideration of payment for unpaid dialysis claims. You have identified two specific issues, and I appreciate the opportunity to address each one individually.

The first involves the transfer of ownership of dialysis centers from DaVita to Renal Advantage, Inc (RAI) which required compliance with Medicare policies as well as new Medicare provider numbers. Your letter does not contain any information that supports the date of completion for those requirements or the date that Medicare issued your new Provider number. This is important for those Medicaid's policy will allow payment of claims up to two years from the date of service or discharge date for patients with Medicare and Medicaid. If the 2-year time limit has past, a request for reconsideration submitted within 6 months of the extenuating circumstance will be reviewed internally to determine potential payment.

The second issue involves possible claims payment that you believe may have already been made to DaVita. South Carolina Medicaid does not disclose payment information for another provider. I would suggest that you contact DaVita for assistance regarding this matter.

Any follow up information that you would like to provide to us can be directed to Ms. Zenovia Vaughn in the Division of Hospital Services. If you have any questions, you may contact her at (803) 898-2665.

Sincerely,



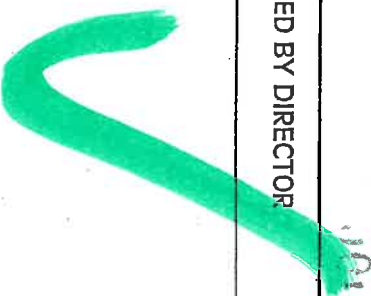
Melanie "BZ" Giese, RN  
Bureau Director

MG/vb

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Myers/Giese</i>	DATE <i>5-28-10</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>1011462</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>6-9-10</i>  <input type="checkbox"/> FOIA DATE DUE _____  <input type="checkbox"/> Necessary Action

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1.			
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# eReceivables LLC

May 21, 2010

*Jeffery*  
**RECEIVED**

MAY 24 2010

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

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

1801 Main Street  
Columbia, South Carolina 29201

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Regards,

*Bill Whitaker*  
Bill Whitaker

*Please log  
to Myers/  
Gross  
appro. sig  
Txx*