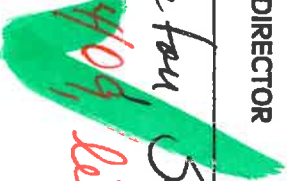


DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

ACTION REFERRAL

TO	DATE
<i>Wells/FOIA</i>	<i>3-2-09</i>

DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOC NUMBER	<i>100474</i>	<input type="checkbox"/> Prepare reply for the Director's signature	DATE DUE _____
2. DATE SIGNED BY DIRECTOR	<i>CC: Single for Stansland</i> <i>Cleared 3/4/09, letter</i> <i>attached.</i> 	<input type="checkbox"/> Prepare reply for appropriate signature	DATE DUE _____
		<input checked="" type="checkbox"/> FOIA	DATE DUE <i>3-16-09</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.			

**From:** Bryan Kost  
**To:** Brenda James  
**Date:** 3/2/2009 1:04 pm  
**Subject:** Fwd: log letter - RE: Medicaid Cost Reports

**RECEIVED**

MAR 02 2009

to Jeff Saxon's area- thanks,

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

Bryan Kost  
DHHS Public Information  
803.898.2865  
cell- 429.3201  
kostbr@scdhhs.gov

>>> "Jill Clayton" <jclayton@nmhc.com> 3/2/2009 12:58 PM >>>  
Thank you for your assistance. Under the FOIA I would like to request the most recently submitted Medicaid Cost Reports for the following facilities:

Camp Care, P.O. Box 9 - 59 Blackstock, Inman, SC 29349  
Driftwood Rehab & Nursing Center, 2375 Baker Hospital Blvd., Charleston, SC 29405  
Golden Age - Inman, 82 North Main Street, Inman, SC 29349  
Inman Healthcare - 51 North Main Street, Inman, SC 29349  
Magnolia Manor of Columbia - 1007 North Kings Street, Columbia, SC 29223  
Magnolia Manor of Greenville, 411 Ansel Street, Greenville, SC 29601  
Magnolia Manor of Inman - 63 Blackstock Road, Inman, SC 29349  
Magnolia Manor of Rock Hill - 127 Murrah Drive, Rock Hill, SC 29732  
Magnolia Manor of Spartanburg - 375 Serpentine Drive, Spartanburg, SC 29303  
Magnolia Place of Greenville - 35 Southpoint Drive, Greenville, SC 29607

The information I would be looking for is the number of beds (census), and any costs pertaining to dietary, laundry and housekeeping.

Please let me know the approximate time frame to receive this information.

Thank you,

Jill Clayton  
Operations Administrative Assistant

P Please consider the environment before printing this email.

-----Original Message-----  
From: Bryan Kost [mailto:kostbr@scdhhs.gov]  
Sent: Monday, March 02, 2009 12:41 PM  
To: Jill Clayton  
Subject: Re: Medicaid Cost Reports

Hi:  
just e-mail me as a FOIA (Freedom of Information Act) request - identify which facilities, and which years you would like. Thanks,

Bryan Kost  
DHHS Public Information  
803.898.2865  
cell- 429.3201  
kostbr@scdhhs.gov

>>> "Jill Clayton" <jclayton@nmhc.com> 2/27/2009 10:14 AM >>>  
We are a food service management company located in Pennsylvania. We would like to obtain Medicaid Cost Reports submitted by various long term care

facilities in South Carolina. Can you provide me with any information about how to contact for these reports or if they are available through the internet?

Thank you,

Jill Clayton

Operations Administrative Assistant

Nutrition Management Services Company

P.O. Box 725

Kimberton, PA 19442

610-935-2050, ext. 5258

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P Please consider the environment before printing this email.

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**State of South Carolina**  
**Department of Health and Human Services**

Mark Sanford  
Governor

Emma Fortner  
Director

TO:

FROM:

SUBJECT: Cost of Processing FOIA Request #

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

Staff processing time at \$10.00 per hour	_____ Hours	\$_____
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:**

**\$\_\_\_\_\_**

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 \_\_\_\_\_ should you have any questions.

Signature \_\_\_\_\_

Date: \_\_\_\_\_



*State of South Carolina*  
*Department of Health and Human Services*

Mark Sanford  
Governor

Emma Fortner  
Director

March 4, 2009

Ms. Jill Clayton  
Nutrition Management Services Company  
P.O. Box 725  
Kimberton, PA 19442

Dear Ms. Clayton:

In response to your recent Freedom of Information Act request, enclosed you will find the information and the billing for processing your request from our office.

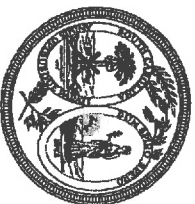
I hope this information is helpful to you. If you should have any questions, please contact Brandy Putnam at (803) 898-1040.

Sincerely,

A handwritten signature in cursive script, reading "William L. Wells", is positioned below the word "Sincerely,".

William L. Wells, CPA  
Deputy Director

WLW/bp  
Enclosures



*State of South Carolina*  
*Department of Health and Human Services*

Mark Sanford  
Governor

Emma Forkner  
Director

March 4, 2009

TO: Jill Clayton, Operations Administrative Assistant  
Nutrition Management Services Company

FROM: William L. Wells, CPA  
Deputy Director

SUBJECT: Cost of Processing FOIA Request # 474

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

Staff processing time at \$10.00 per hour	1	Hours	\$10.00
Pages copied at \$.10 per page	501	Pages	\$50.10
Pages faxed at \$.20 per page		Pages	\$
Shipping and Handling Costs			\$ 9.30
Other costs associated with the FOIA request:			\$

**Total Amount Due SCDHHS:**

**\$69.40**

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 Brandy Putnam at (803) 898-1040 should you have any questions.

*William L. Wells*  
Signature

*3/4/09*  
Date