

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF DIRECTOR

77  
A

**ACTION REFERRAL**

TO <i>Roberts/Day/FOIA</i>	DATE <i>8-11-14</i>
-------------------------------	------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>000045</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>cc: Coy, Mullis Cleared 8/22/14, letter attached.</i>	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input checked="" type="checkbox"/> FOIA DATE DUE <i>8-25-14</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.			



**RECEIVED**

AUG 11 2014

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

August 08, 2014

Brandy Putnam  
SC Department of Health and Human Services  
Post Office Box 8206  
Columbia, SC 29202

**RE: Diamond Health & Rehab of Simpsonville**

Dear Ms. Putnam:

Pursuant to the South Carolina Freedom of Information Act, I am requesting that you provide this office with any as filed Cost Reports and home office Cost Reports submitted by the above named provider for any contract periods between **June 1, 2011 and June 1, 2013** and the Desk Audit package for same.

I would appreciate if you would respond to this request within the next fifteen days. If the processing of this request will exceed \$50.00, please enclose an explanation of all reasonable business costs associated with the copying and production of these items prior to processing. If you have any questions, please do not hesitate to contact me.

With kindest regards, I am

Very truly yours,

CHRISTIAN & DAVIS, LLC

Matthew W. Christian  
Attorney at Law

W. Harold Christian, Jr.

• Richard V. Davis

Matthew W. Christian

Joshua D. Christian

Workers' Compensation

Auto & Truck Collisions

Insurance Litigation

Social Security Disability

Serious Personal Injury

Medical & Nursing  
Home Negligence

MC/jgh

Nikki Haley GOVERNOR  
 Anthony Keck DIRECTOR  
 P.O. Box 8206 • Columbia, SC 29202  
 www.scdhhs.gov

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:	_____	\$_____
<b>Total Amount Due SCDHHS:</b>		<b>\$_____</b>

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:

Nikki Haley  
Anthony Keck  
P.O. Box 8206 Columbia, SC 29202  
www.scdhhs.gov

August 22, 2014

Matthew W. Christian, Esquire  
Christian & Davis, LLC  
P. O. Box 332  
Greenville, SC 29602

Re: Diamond Health & Rehab of Simpsonville

Dear Mr. Christian:

Your enclosed letters of August 8, 2014, were referred to this Office for a response. This agency, the Department of Health and Human Services, administers the South Carolina Medicaid Program. The South Carolina Department of Health and Environmental Control (DHEC) is the State Survey Agency as well as the State licensing agency, and it may be that some or most of the information you seek is kept by them.

We do obtain Disclosure of Ownership and Control Interest Statement forms and other miscellaneous ownership information from providers. Also, we receive, by way of verification, copies of some information from DHEC. We believe that the information enclosed is what we have that is responsive to your requests, but we did not search further than the current files in our Contracts Division, which is where most of this type information is kept. We have redacted the TIN, EIN and provider numbers.

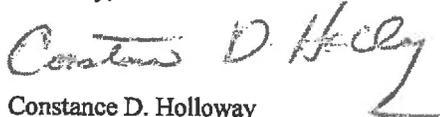
Also enclosed, you will find the applicable cost reports and desk audit packages you requested.

Our expense for reproducing and mailing this information is forty-two and 50/100 dollars (\$42.50). These documents are true and accurate copies of reports collected by the Department in the regular course of its business. Please make the check payable to the Department of Health and Human Services and send it to:

Department of Health and Human Services  
Department of Receivables  
Post Office Box 8297  
Columbia, SC 29202-8297

I hope this information is helpful to you. Please contact me if there are any questions.

Sincerely,



Constance D. Holloway  
Assistant General Counsel

CDH/h

Enclosures

cc: Lynette Wilson, Receivables (w/o enclosures)



CHRISTIAN & DAVIS  
LLC

ATTORNEYS AT LAW

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AUG 11 2014

Department of Health & Human Services  
OFFICE OF THE DIRECTOR

August 08, 2014

Brandy Putnam  
SC Department of Health and Human Services  
Post Office Box 8206  
Columbia, SC 29202



AUG 11 2014

SCDHHS  
Office of General Counsel

**RE: Diamond Health & Rehab of Simpsonville**

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With kindest regards, I am

Very truly yours,

CHRISTIAN & DAVIS, LLC

Matthew W. Christian  
Attorney at Law

MC/jgh

- Mr. David Christian, Jr.
- Mr. Paul M. Davis
- Matthew W. Christian
- Richard S. Christian
- William P. Christian, III
- Mark Paul Christian
- Gregory Christian
- Scott J. Christian, Disability
- James Christian, Injury
- William A. Christian, Nursing Home Neglect

CHRISTIAN & DAVIS

ATTORNEYS AT LAW

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SCDHHS  
Office of General Counsel

August 08, 2014

Brandy Putnam  
SC Department of Health and Human Services  
Post Office Box 8206  
Columbia, SC 29202

RE: Diamond Health & Rehab of Simpsonville

Ms. Putnam:

I am writing pursuant to the Freedom of Information Act to request all documents regarding ownership, control interests, and related entities, including but not limited to, Form 1513.

If this cost is going to exceed \$100.00, please notify me of same prior to providing me with the information. I would greatly appreciate it if you would provide this information to me within the next 20 days. I look forward to hearing from you.

With kindest regards, I am

Very truly yours,

CHRISTIAN & DAVIS, LLC



Matthew W. Christian  
Attorney at Law

MC/jgh

107 E. Main Street, Simpsonville, SC 29689

3017 E. Washington St. Greenville, SC 29601

Phone: (864) 442-7260

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www.christianandavis.com