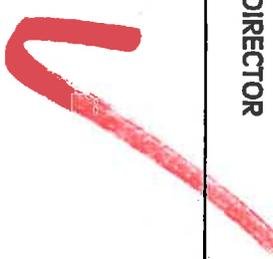


**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Singleton</i>	DATE <i>9-4-07</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000129	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR 	<input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____
	<input type="checkbox"/> FOIA DATE DUE _____
	<input checked="" 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.			



DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of Inspector General

Washington, D.C. 20201

AUG 30 2007

RECEIVED

SEP 04 2007

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Log: DS

Robert M. Kerr
Director
Department of Health and Human Services
P. O. Box 8206
Columbia, SC 29202-8206

Dear Mr. Kerr:

Re: Mark W. Lee
2217 Amberleigh Court
Florence, SC 29505
SANCTION AUTHORITY: 1128(a)(1)
OI File No. 4-97-40310-9

Chiropractor
DOB: 10/19/1962
SSN: 249-35-5775
LICENSE NO:1111

Effective with the date of this notice, the subject has been reinstated as a provider of services covered under the title XVIII (Medicare) program.

You are hereby requested to reinstate the subject as a provider of services covered under the title XX program for covered services rendered after the effective date of this reinstatement to the title XX program. However, if the State has imposed a sanction under its own authority independent from our action under section 1128, reinstatement to the title XX program is not mandatory.

If you have any questions about this reinstatement, please contact Kathy Pettit, Investigative Analyst, Office of Investigations, Room N2-01-26, 7500 Security Boulevard, Baltimore, Maryland 21244-1850. The telephone number for that office is (410) 786-5198.

Sincerely,

Maureen R. Byer

Maureen R. Byer
Director
Exclusions Staff
Office of Investigations