South Dakota Medicaid Assisted Daily Living Services Waiver Fee Schedule

Effective July 1, 2023

Providers must bill for services at their usual and customary charge. The fee listed below is the maximum allowable amount a provider may be reimbursed.

Providers should refer to South Dakota Medicaid's provider manual webpage for applicable coverage criteria and claim instructions: https://dss.sd.gov/medicaid/providers/billingmanuals/. For information regarding requesting a coverage or rate change refer to the Reconsideration, Reviews, Coverage Requests, and Fair Hearing provider manual.

Code	Description	Modifier	Rate	
T1019	Personal Care Services-Provider Managed, per 15 minutes		\$	10.22
S5125	Personal Care Services-Self Directed, per 15 minutes		\$	10.22
S5115	Home Care Training, nonfamily, per 15 minutes		\$	11.70
S5161	Emergency Response System, service fee, per month		\$	45.00
	Private Duty/Independent Nursing Service(s) - licensed, up to 15 minutes			
T1000	(RN)	TD	\$	21.42
	Private Duty/Independent Nursing Service(s) - licensed, up to 15 minutes			
T1000	(LPN)	TE	\$	17.82
T1005	Respite, per 15 minutes		\$	9.89
A9900	Specialized Medical Equipment & Supplies		Billed Charges	
T2039	Vehicle Modifications		Billed Charges	
S5165	Environmental Accessibility Adaptations		Billed (Charges