



Strong Families - South Dakota's Foundation and Our Future

June 8, 2018

Richard Allen
Associate Regional Administrator
Centers for Medicare and Medicaid Services
1961 Stout Street, Room 08-148
Denver, CO 80294

Re: South Dakota Medicaid State Plan Amendment SD-18-003

Dear Mr. Allen:

Please find enclosed South Dakota's Medicaid State Plan Amendment (SPA) SD-18-003. The SPA implements inflationary rate increases appropriated by the state legislature during the 2018 legislative session. The proposed SPA also clarifies the reimbursement methodology for out of state specialty hospitals. The proposed amendment revises Attachment 4.19-A, page 1 and Attachment 4.19-B, Introduction page 1.

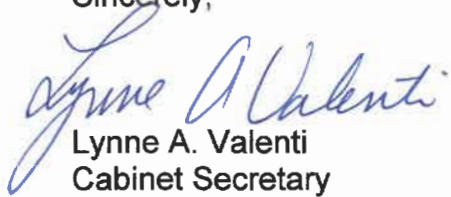
The proposed SPA increases the rate for most Medicaid services by 0.5 percent; certain community-based providers will receive a 2 percent increase for certain services. Changes to individual services are reflected in the April 1, 2018 fee schedules available on the department's website: <http://dss.sd.gov/medicaid/providers/feeschedules/>.

South Dakota requests an effective date of April 1, 2018. The Department estimates the federal fiscal impact will be \$609,003.50 in Federal Fiscal Year 2018 and \$1,218,007.00 in Federal Fiscal Year 2019. The Federal fiscal impact by services type is provided in Appendix 1.

The State conducted Tribal Consultation beginning with notification on March 26, 2018. We have attached a copy of the notification sent to the Tribes. Public notice was published in the South Dakota REGISTER, <http://sdlegislature.gov/docs/rules/Register/03262018.pdf>, on March 26, 2018. We received no comments.

If you have any questions regarding this package, please contact Sarah Aker, Deputy Director of the Division of Medical Services, 700 Governors Drive, Pierre, SD 57501-2291, e-mail sarah.aker@state.sd.us, or telephone (605) 773-3495.

Sincerely,

A handwritten signature in blue ink that reads "Lynne A. Valenti". The signature is fluid and cursive, with the first name "Lynne" being particularly prominent and stylized.

Lynne A. Valenti
Cabinet Secretary

CC: Brenda Tidball-Zeltinger, Deputy Secretary
William Snyder, Director
Sarah Aker, Deputy Director

Appendix 1: Federal Fiscal Impact by Service

The table below provides a breakdown of the Federal fiscal impact by services type. No rates were decreased. The outpatient hospital reimbursement methodology did not require a state plan change, but the inflationary amount is included below.

Service	FFY18	FFY19
EPSDT	\$82,774.21	\$165,548.43
Physician Services	\$132,397.63	\$264,795.26
Optometrist Services	\$3,803.32	\$7,606.64
Chiropractic Services	\$1,256.74	\$2,513.49
Home Health Services	\$6,180.74	\$12,361.47
Clinic Services	\$1,839.43	\$3,678.87
Dental Services	\$41,890.14	\$83,780.28
Eyeglasses	\$15,184.38	\$30,368.76
Transportation	\$25,897.52	\$51,795.04
Inpatient Hospital	\$185,602.78	\$371,205.55
Outpatient Hospital	\$112,176.61	\$224,353.21
Total	\$609,003.50	\$1,218,007.00

Appendix 2: Standard Funding Questions

- 1. Section 1903(a)(1) provides that Federal matching funds are only available for expenditures made by States for services under the approved State plan. Do providers receive and retain the total Medicaid expenditures claimed by the State (includes normal per diem, supplemental, enhanced payments, other) or is any portion of the payments returned to the State, local governmental entity, or any other intermediary organization? If providers are required to return any portion of payments, please provide a full description of the repayment process. Include in your response a full description of the methodology for the return of any of the payments, a complete listing of providers that return a portion of their payments, the amount or percentage of payments that are returned and the disposition and use of the funds once they are returned to the State (i.e., general fund, medical services account, etc.)**

South Dakota Medicaid Providers receive 100% of Medicaid expenditures claimed by the State of South Dakota.

- 2. Section 1902(a)(2) provides that the lack of adequate funds from local sources will not result in lowering the amount, duration, scope, or quality of care and services available under the plan. Please describe how the state share of each type of Medicaid payment (normal per diem, supplemental, enhanced, other) is funded. Please describe whether the state share is from appropriations from the legislature to the Medicaid agency, through intergovernmental transfer agreements (IGTs), certified public expenditures (CPEs), provider taxes, or any other mechanism used by the state to provide state share. Note that, if the appropriation is not to the Medicaid agency, the source of the state share would necessarily be derived through either an IGT or CPE. In this case, please identify the agency to which the funds are appropriated. Please provide an estimate of total expenditure and State share amounts for each type of Medicaid payment. If any of the non-federal share is being provided using IGTs or CPEs, please fully describe the matching arrangement including when the state agency receives the transferred amounts from the local government entity transferring the funds. If CPEs are used, please describe the methodology used by the state to verify that the total expenditures being certified are eligible for Federal matching funds in accordance with 42 CFR 433.51(b). For any payment funded by CPEs or IGTs, please provide the following:**
 - (i) a complete list of the names of entities transferring or certifying funds;**
 - (ii) the operational nature of the entity (state, county, city, other);**
 - (iii) the total amounts transferred or certified by each entity;**
 - (iv) clarify whether the certifying or transferring entity has general taxing authority; and,**
 - (v) whether the certifying or transferring entity received appropriations (identify level of appropriations).**

The state share of South Dakota Medicaid payments is made from appropriations by the South Dakota State Legislature.

- 3. Section 1902(a)(30) requires that payments for services be consistent with efficiency, economy, and quality of care. Section 1903(a)(1) provides for Federal**

financial participation to States for expenditures for services under an approved State plan. If supplemental or enhanced payments are made, please provide the total amount for each type of supplemental or enhanced payment made to each provider type.

Per the CMS-64 report there were no supplemental or enhanced payments associated with these services.

- 4. Please provide a detailed description of the methodology used by the state to estimate the upper payment limit (UPL) for each class of providers (State owned or operated, non-state government owned or operated, and privately owned or operated). Please provide a current (i.e. applicable to the current rate year) UPL demonstration.**

The 2017 UPLs were submitted to CMS on June 30, 2017. Revised clinic UPLs were subsequently submitted to CMS on August 29, 2017. The UPL submission included the methodology. South Dakota anticipates submitting our 2018 UPLs on or before June 30, 2018.

- 5. Does any governmental provider receive payments that in the aggregate (normal per diem, supplemental, enhanced, other) exceed their reasonable costs of providing services? If payments exceed the cost of services, do you recoup the excess and return the Federal share of the excess to CMS on the quarterly expenditure report?**

No, public providers do not receive payments that exceed their reasonable costs of providing services.

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER: SD-18-003	2. STATE: South Dakota
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE April 1, 2018	

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN

AMENDMENT TO BE CONSIDERED AS NEW PLAN

AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION: 42 CFR 447.201 and 42 CFR 447 Subpart C	7. FEDERAL BUDGET IMPACT: a. FFY 2018: \$609,003.50 b. FFY 2019: \$1,218,007.00
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 4.19-A, page 1 and Attachment 4.19-B, Introduction page 1	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 4.19-A, page 1 and Attachment 4.19-B, Introduction page 1

10. SUBJECT OF AMENDMENT:

The amendment implements inflationary rate increases appropriated by the state during the 2018 legislative session and also clarifies the reimbursement methodology for out of state specialty hospitals.

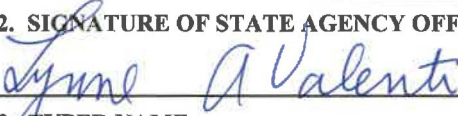
11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT

OTHER, AS SPECIFIED:

COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: DEPARTMENT OF SOCIAL SERVICES DIVISION OF MEDICAL SERVICES 700 GOVERNORS DRIVE PIERRE, SD 57501-2291
13. TYPED NAME: Lynne A. Valenti	
14. TITLE: Cabinet Secretary	
15. DATE SUBMITTED: June 8, 2018	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED:	18. DATE APPROVED:
PLAN APPROVED - ONE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OFFICIAL:
21. TYPED NAME:	22. TITLE:

23. REMARKS:

REGISTER



South Dakota Legislative Research Council

Volume 44

Monday, 8:00 a.m., March 26, 2018

FILINGS IN THE LEGISLATIVE RESEARCH COUNCIL'S OFFICE:

NOTICE:

The **Department of Social Services** intends to make changes to the South Dakota Medicaid State Plan to implement inflationary rate increases appropriated by the state legislature during the 2018 legislative session. The proposed State Plan Amendment (SPA) also clarifies the reimbursement methodology for out of state specialty hospitals, and revises Attachment 4.19-A, page 1, and Attachment 4.19-B, Introduction page 1. The Department intends to make this SPA effective April 1, 2018. The proposed SPA increases the rate for most Medicaid services by 0.5 percent; certain community-based providers will receive a 2 percent increase for certain services. Changes to individual services are reflected in the April 1, 2018 fee schedules at: <http://dss.sd.gov/medicaid/providers/feeschedules/>. The Department estimates the total expected increase in annual aggregate expenditures associated with this SPA to be \$2,081,178. The SPA can be viewed online at <http://dss.sd.gov/medicaid/medicaidstateplan.aspx>. Copies of the proposed SPA are available at the Department of Social Services, Division of

Medical Services. Written requests for a copy of these changes, and corresponding comments, may be sent to Division of Medical Services, Department of Social Services, 700 Governors Drive, Pierre, SD 57501.

FILINGS IN THE SECRETARY OF STATE'S OFFICE:

Executive Order:

The Governor has signed **Executive Order 2018-01**, dated March 8, 2018. This executive order declares that the offices for state government within the Executive Branch and under the control of the governor will be administratively closed April 2, 2018.

Note: A copy of the rules may be obtained directly from the above agencies or at <https://rules.sd.gov>. Write to the agency at the address given under "Notices of Proposed Rules." There is no charge for proposed rules. The following agencies have permission from the Interim Rules Review Committee to charge for adopted rules: the Division of Insurance, the Cosmetology Commission, the State Board of Examiners in Optometry, the State Plumbing Commission, the Board of Nursing, the Department of Social Services, the State Electrical Commission, the South Dakota Board of Pharmacy, the Real Estate Commission, the Gaming Commission, the Department of Revenue, and the Department of Labor and Regulation for Article 47:03.

REMINDER OF HEARINGS SCHEDULED

4-5-2018	Department of Game, Fish and Parks: intends to amend and adopt rules to adjust the available Black Hills elk licenses to 425 "any elk" and 700 "antlerless elk"; adjust the number of available archery elk licenses to 142 "any elk" and 80 "antlerless elk"; adjust the number of available prairie elk licenses to 68 "any elk" and 73 "antlerless elk"; establish a new prairie elk unit comprised of Harding County with season dates of September 15 to October 31 and December 1 to 31; adjust the Custer State Park elk hunting season dates to October 1 to 31; modify the unit boundary of CAE-CU1 and
4-6-2018	

Ballard, Matthew

From: Ballard, Matthew
Sent: Monday, March 26, 2018 10:48 AM
To: 'Amanda Taylor'; 'Amy Muchna'; 'Anthony Reider'; 'April Herrick'; 'Arlene Krulish'; 'Audrey German'; 'Becky Diehm'; 'Beth Lee'; 'Bonnie Cromwell'; 'Brandon Sazue'; 'Brittany Brewer'; 'CAPT Christopher W. Allen'; 'Carmen Thompson'; 'Carol Diaz'; 'CDR Emily Williams'; 'CeCe BigCrow'; 'Christine Olson'; 'Christy Hacker'; 'Clarence, Montgomery'; 'Cody Wolff'; 'Cole Hunter'; 'Colin Hutchison'; 'Corey Smith'; 'Crystal Horse Looking'; 'Crystal Owen'; 'Damon Leader Charge'; 'Dave Archambault II'; 'David Flute'; 'David Walford'; 'DaVonna Keeble'; 'Dayle Knutson'; 'DeAnna Howe-Swan'; 'Deb Odens'; 'Debee Eagle Elk'; 'Dee LeBeau-Hein'; 'Delaine Rasmussen'; 'Delores Pourier'; 'Devero Yellow Earing'; 'Don Lee'; 'Dr. Bill Carr'; 'Dylan Fills Pipe'; 'Ed Parsells'; 'Eddie Johnson Jr.'; 'Edwin Harris'; 'Elaine Clement'; 'Elaine Keepseagle'; 'Ella "John" Carlow'; 'Ellen Durkin'; 'Emery, Steve'; 'Eugene Giago'; 'Evelyn "Evie" Espinoza'; 'Gerri LeBeau'; 'Gina Johnson'; 'Gypsy Wanna'; 'Harold Frazier'; 'Holly Rice'; 'Jade Trottier'; 'James Begeman'; 'Jana Gipp'; 'Jean Richards-Tulloss'; 'Jennie Crawford'; 'Jennifer Giroux'; 'Jennifer Williams'; 'Jenny Jeffries'; 'Jeremy Burtenshaw'; 'Jeri Starr'; 'Jerilyn Church'; 'Jerome Lee Bearheels'; 'Jessica Morson'; 'Johanna Camacho'; 'John Eagle Shield'; 'John Yellow Bird Steele'; 'Jon Schuchardt'; 'Jonni Arpan'; 'Julie Thorstenson'; 'Justin Taylor'; 'Kagey, Hannah'; 'Karla Kirkpatrick'; 'Kathlene Thurman'; 'Kathy Bad Moccasin'; 'Kathy Gordon'; 'Kendra Christensen'; 'Kendra Roland'; 'Kevin Meeks'; 'Kevin Stiffarm'; 'Kim Clown'; 'Kristine Watts'; 'Kym Swimmer'; 'Leah Fyten'; 'Leatrice Wilson'; 'Lee Lawrence'; 'LeLewis Gipp'; 'Lezley "Lez" Kempf'; 'Linda Littlefield'; 'Lisa Schlosser'; 'Liz Anderson'; 'Lori Braaten'; 'Lori Sampson'; 'Lynn Big Eagle'; 'Marc Beaudreau'; 'Margaret Gates'; 'Margaret Gunville'; 'Marieta Little Thunder'; 'Marilyn Prairie Chicken'; 'Mark Aguilar'; 'Mark Calkins'; 'Mark LeBrun'; 'Mary Ann McClowen'; 'Mary Bickel'; 'Matthew Frye'; 'Matthew Sieler'; 'Melissa Huff'; 'Michelle Patton'; 'Michelle Red Willow'; 'Mika Tibbs'; 'Mike Boland'; 'Monta Little Solider'; 'Myrna Thompson'; 'Neil Austin'; 'Nichole Cottier'; 'Nick Thomas'; 'Nicole White Wolf'; 'Olivia Grass'; 'Olson, Alissa'; 'Opal Jones'; 'Patty Eagle Bull'; 'Paula Brown'; 'Paulette High Elk'; 'PJ Beaudry'; 'Randal White'; 'Randi Peacock'; 'Randolph Runs After'; 'Reiss, David'; 'Ricahrd Mousseau'; 'Richard Bud'; 'Richard Huff'; 'Rick Sorensen'; 'Robert Flying Hawk'; 'Roberta Jacobson'; 'Rochelle Rogers'; 'Ron Cornelius'; 'Roxanne Sazue'; 'Roxee Johnson'; 'Royal Yellow Hawk'; 'Sara DeCoteau'; 'Sean Jackson'; 'Shawn Carging'; 'Shirley Crane'; 'Sierra Wolcott'; 'Sonia Little Hawk-Weston'; 'Stacey Red Willow'; 'Staci Hunter'; 'Steven Kaleda'; 'Sue Mallon'; 'Sunny Cololmbe'; 'Susan Porter'; 'Tara Fox'; 'Teresa Stites'; 'Terra Haug'; 'Terri Rattler'; 'Tiffany Bird Necklace'; 'Tiffany Larson'; 'Tina Russell'; 'Tinka Duran'; 'Tinnekia Williams'; 'Todd Warren'; 'Toni Slockish'; 'Tony Stayner'; 'Tricia Birdnecklace'; 'Tricia Knight'; 'Trina Fischer'; 'Tyler Lannoye'; 'Valentina LaFountain'; 'Vicky Barnes'; 'Warren Giago'; 'William "Willie" Kindle'
Cc: Snyder, William; Aker, Sarah; Tidball-Zeltinger, Brenda; Valenti, Lynne
Subject: SPA SD 18-003 Tribal Consultation
Attachments: SD SPA 18-003.pdf

Good Morning,

Please find attached a proposed Medicaid State Plan Amendment ("SPA") regarding provider inflationary rate increases. The proposed SPA implement inflationary rate increases appropriated by the state legislature during the 2018 legislative session and also clarifies the reimbursement methodology for out of state specialty hospitals. The proposed amendment revises Attachment 4.19-A, page 1 and Attachment 4.19-B, Introduction page 1. The SPA increases the rate for most

Medicaid services by 0.5 percent; certain community-based providers will receive a 2 percent increase for certain services. We propose to make this SPA effective April 1, 2018.

Please contact me within 30 days of receipt of this message with any questions or comments.

Sincerely,

Matthew Ballard | Program Specialist II
South Dakota Department of Social Services
Division of Medical Services
(605) 773-3495



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DEPARTMENT OF SOCIAL SERVICES

DIVISION OF MEDICAL SERVICES

700 GOVERNORS DRIVE

PIERRE, SD 57501-2291

PHONE: 605-773-3495

FAX: 605-773-5246

WEB: dss.sd.gov



Strong Families - South Dakota's Foundation and Our Future

March 26, 2018

RE: South Dakota Medicaid State Plan Amendment #SD-18-003

The South Dakota Department of Social Services intends to make changes to the South Dakota Medicaid State Plan to implement inflationary rate increases appropriated by the state legislature during the 2018 legislative session. The proposed State Plan Amendment (SPA) also clarifies the reimbursement methodology for out of state specialty hospitals. The proposed amendment revises Attachment 4.19-A, page 1 and Attachment 4.19-B, Introduction page 1.

We intend to make this SPA effective April 1, 2018. The proposed SPA increases the rate for most Medicaid services by 0.5 percent; certain community-based providers will receive a 2 percent increase for certain services. Changes to individual services are reflected in the April 1, 2018 fee schedules available on the department's website:

<http://dss.sd.gov/medicaid/providers/feeschedules/>. The Department estimates the total expected increase in annual aggregate expenditures associated with this SPA to be \$2,081,178.00.

Please contact me within 30 days of receipt of this message with any questions or comments.

Sincerely,

Sarah Aker
Deputy Director
Division of Medical Services
South Dakota Department of Social Services

CC: Lynne A. Valenti, Cabinet Secretary
Brenda Tidball-Zeltinger, Deputy Secretary
William Snyder, Director

Medicaid State Plan Amendment Proposal

Transmittal Number: SD-18-003

Effective Date: 4/1/2018

Brief Description: This State Plan Amendment implements inflationary rate increases appropriated by the state legislature during the 2018 legislative session.

Area of State Plan Affected: Attachment 4.19-A and Attachment 4.19-B

Page(s) of State Plan Affected: Attachment 4.19-A, page 1 and Attachment 4.19-B, Introduction page 1

Estimate of Fiscal Impact, if Any: The Department estimates the total expected increase in annual aggregate expenditures associated with this SPA to be \$2,081,178.00.

Reason for Amendment: Implement inflationary increases appropriated by the state legislature.

INPATIENT HOSPITAL PAYMENT METHODOLOGY

GENERAL

The South Dakota Medicaid program has reimbursed hospitals for inpatient services under a prospective Diagnosis Related Groups (DRGs) methodology, with a few exceptions, since January 1, 1985. The State uses the federal definitions of DRGs, classifications, weights, geometric mean lengths of stay, and outlier cutoffs. The DRG Grouper program has been updated annually as of October 1 of each year beginning with the Medicare grouper version 15 (effective October 1, 1997). The agency provides a link to Medicare's DRGs on its website at <http://dss.sd.gov/sdmedx/includes/providers/feeschedules/dss/index.aspx>. The agency calculates Medicaid-specific weight and geometric mean length of stay factors annually using the latest three years of non-outlier claim data, this three-year claims database updated annually to establish new weight and geometric length of stay factors with each new grouper.

The agency developed hospital-specific costs per Medicaid discharge amounts for all in-state hospitals using Medicare cost reports and non-outlier claims data for the hospitals' fiscal years ending after June 30, 1996 and before July 1, 1997. The agency applied an inflation factor, specific to each hospital's fiscal year end, to the cost per discharge amounts of all hospitals with more than thirty (30) Medicaid discharges during the base year to establish target amounts for the most recently completed federal fiscal year. There is a cap on the hospitals' target amounts, under which no hospital is allowed a target amount that exceeds 110% of the statewide weighted average of all target amounts.

South Dakota Medicaid reimburses out-of-state hospitals on the same basis as the Medicaid agencies in the states where the hospitals are located. If the hospital's home state refuses to provide the amount they would pay for a given claim, the payment will be at 44.15% of billed charges. Payment is for individual discharge or transfer claims only. Out of state specialty hospitals are reimbursed at 44.15% of billed charges unless otherwise approved by the state. There is no annual cost settlement with out-of-state hospitals or in-state DRG hospitals unless an amount is due the South Dakota Medicaid program.

For claims with dates of service beginning April 1, 2018, the reimbursement for in-state DRG hospitals and all out-of-state hospitals not paid the above-stated percentage of charges is increased by 0.5 percent over what the calculated amounts were for State fiscal year 2017 after any cost sharing amount due from the patient and any third party liability amounts have been deducted, and after computation of any cost outlier payment. The agency will increase reimbursements to South Dakota hospitals classified as Medicare Critical Access or Medicaid Access Critical by 0.5 percent for claims with dates of service on and after April 1, 2018.

SPECIFIC DESCRIPTION

Each year the agency calculates a hospital's target amounts for non-outlier claims by dividing the hospital's average cost per discharge for non-outlier claims by the hospital's case mix index. To ensure budget neutrality, the agency adjusts annually a hospital's target amount for any change in that hospital's case mix index resulting from the establishment of new program specific weight factors. For each hospital, the case mix index is the calculated result of accumulating the weight factors for all claims submitted during the base period and dividing by the number of claims.

ATTACHMENT 4.19-B
INTRODUCTION

Payment rates for the services listed below are effective for services provided on or after the corresponding date. Fee schedules are published on the Department's website at <http://dss.sd.gov/medicaid/providers/feeschedules/>. Effective dates listed on the introductory page supersede the effective dates listed elsewhere in Attachment 4.19-B. Unless otherwise noted in the referenced state plan pages, reimbursement rates are the same for both governmental and private providers.

Service	Attachment	Effective Date
Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)	Attachment 4.19-B, Page 4	April 1, 2018
Physician Services	Attachment 4.19-B, Page 6	April 1, 2018
Optometrist Services	Attachment 4.19-B, Page 9	April 1, 2018
Chiropractic Services	Attachment 4.19-B, Page 10	April 1, 2018
Home Health Services	Attachment 4.19-B, Page 12	April 1, 2018
Durable Medical Equipment	Attachment 4.19-B, Page 13	April 1, 2018
Clinic Services	Attachment 4.19-B, Page 15	April 1, 2018
Dental Services	Attachment 4.19-B, Page 16	April 1, 2018
Physical Therapy	Attachment 4.19-B, Page 17	April 1, 2018
Occupational Therapy	Attachment 4.19-B, Page 18	April 1, 2018
Speech, Hearing, or Language Disorder Services	Attachment 4.19-B, Page 19	April 1, 2018
Dentures	Attachment 4.19-B, Page 21	April 1, 2018
Prosthetic Devices	Attachment 4.19-B, Page 22	April 1, 2018
Eyeglasses	Attachment 4.19-B, Page 23	April 1, 2018
Diabetes Self-Management Training	Attachment 4.19-B, Page 26	April 1, 2018
Nurse Midwife Services	Attachment 4.19-B, Page 31	April 1, 2018
Transportation	Attachment 4.19-B, Page 38	April 1, 2018
Personal Care Services	Attachment 4.19-B, Page 38	April 1, 2018
Freestanding Birth Centers	Attachment 4.19-B, Page 39	April 1, 2018
Professional Services Provided in a Freestanding Birth Center	Attachment 4.19-B, Page 39	April 1, 2018