DEPARTMENT OF SOCIAL SERVICES
DIVISION OF ADULT SERVICES AND AGING
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Add-On Payment Information Requirements for Individuals Requiring Specialized Care Due to Spinal Cord Injuries

When Medicaid is the primary payor for a resident of a South Dakota nursing home, the facility may request an additional add-on payment above and beyond the normal nursing facility reimbursement for those individuals needing extraordinary care which is not addressed in the normal reimbursement methodology. Medicaid reimbursement for services provided to a recipient residing in state shall be the per diem rate plus a negotiated rate to cover additional extraordinary treatment.

The Department will negotiate with providers on a case-by-case basis to determine the negotiated rate for recipients requiring extraordinary care. Providers are responsible for notifying the Department of significant changes in an individual's condition. A new rate may be negotiated when this change occurs.

The add-on payment will be negotiated on an individual basis between the Department of Social Services and the provider. The negotiated rate shall be an all-inclusive reimbursement rate for all services and supplies furnished by the facility in the care and treatment of the recipient, except as otherwise agreed by the Department. The negotiated rate may not exceed the actual cost of the services provided to the recipient.

Extraordinary care includes individuals with spinal cord injury who require extraordinary treatment as defined below:

- Individual must meet the criteria for South Dakota Medicaid;
- Individual must meet the criteria for nursing facility level of care;
- Individual has a diagnosis of spinal cord injury that resulted from an accident. The injury produced a diminished or altered state of consciousness resulting in impairment in cognitive abilities or physical functioning, as well as behavioral and/or emotional functioning; and
- The individual must have completed an acute rehabilitation program in another facility and must be continuing the rehabilitation plan.

For consideration of the add-on payment, the following information must be submitted to the Department of Social Services' Division of Adult Services and Aging (ASA). Please contact Andi LaVoy RN, ASA Nurse Consultant Program Manager by phone at 605-773-3656 or email aundrea.lavoy@state.sd.us if you have any questions about this process.

(OVER)

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Individuals Requiring Specialized Care Due to Spinal Cord Injuries

1. Name of Resident: _____
2. Resident's South Dakota Medicaid Number: _____
3. Provider's South Dakota Medicaid Number:_____
4. Provider Contact Name & Phone # for Clinical Information:_____
5. Information to submit includes:
   - Recent history and physical.
   - Recent physician progress note.
   - Copy of lab and x-ray reports.
   - Copy of documentation that indicates the exact date of the spinal cord injury.
   - Copy of nursing, therapy, and aide notes that document the additional care and services the individual is receiving.
   - Copy of interdisciplinary care plan that addresses the spinal cord injury.
   - Copy of documentation that supports the additional cost of care for the individual with spinal cord injury beyond the case mix reimbursement rate.
   - Copy of invoices when/if applicable.

The above information must be submitted before the initial authorization or reimbursement can occur. Updates must be submitted on a monthly basis thereafter to continue authorization and should include:

- Copy of nursing, therapy, and aide progress notes that document the additional care and services the individual is receiving.
- Updated physician progress notes.

Once the above information is received, the Department of Social Services will review the medical information to determine if the criteria are met. If the criteria have been met, the Department of Social Services' Office of Provider Reimbursement and Audits will calculate an additional payment rate based on the specific costs of the extraordinary treatment to be provided.

A contract will be required with the facility before authorization of individualized services can be arranged. The contract will be prepared and routed for signature including the agreement to provide specialized services as authorized.

Once approval is determined, the rate has been set and a contract has been signed by both parties, a document will be provided to the facility and to the Department of Social Services' Office of Provider Reimbursement and Audits authorizing additional payment for the specified services, to include a period of authorization and the review date.