

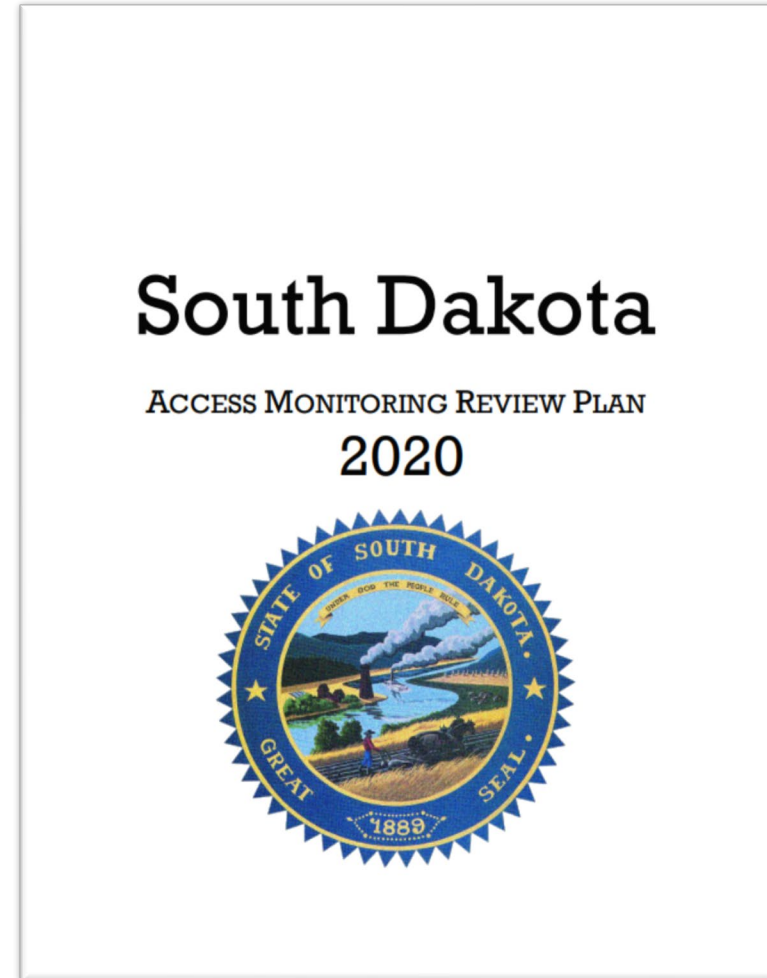
Access Monitoring Review Plan

Background

- Section 1902(a)(30)(A) of the Social Security Act requires states to assure that Medicaid payments are consistent with efficiency, economy, and quality of care and sufficient to enlist enough providers so that care and services are available to at least the extent that care and services are available to the general population in the same geographic area.
- CMS released a final rule in 2015 requiring all states to develop an Access Monitoring Review Plan in 2016 and update plans every 3 years. This plan is an update to the one first published in 2016.
- The federal regulations require states to analyze access to care through data and information from recipients and providers. In accordance with 42 CFR 447.203, South Dakota will review access to care for:
 - Primary care services including Federally Qualified Health Centers, Rural Health Clinics and Physician and Dental Services.
 - Physician specialist services
 - Behavioral health services
 - Pre- and post-natal obstetric services, including labor and delivery
 - Home health services
- CMS has indicated to states that they are in the process of revising this rule again and anticipates that new regulations will be published soon.

Sections of the Plan

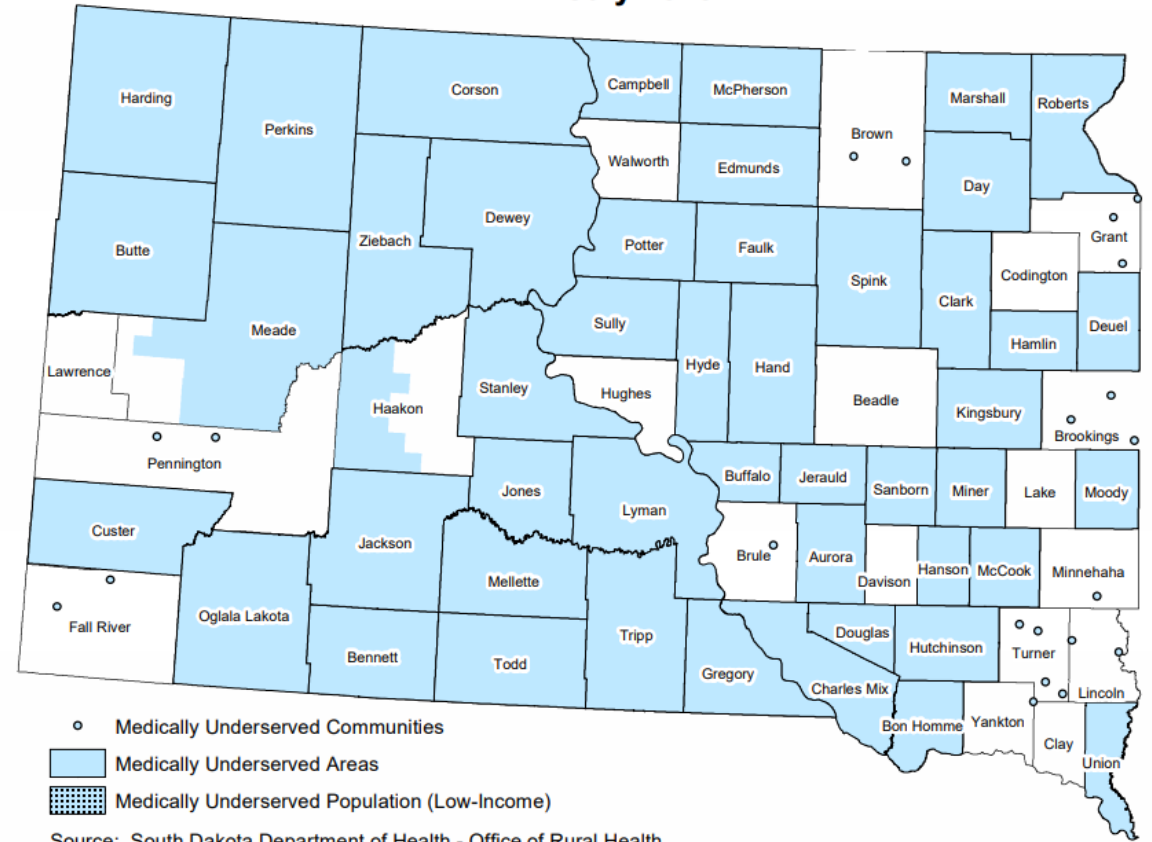
- Background
- Geographic Characteristics of South Dakota
- Medicaid Recipient Characteristics and Access
- Provider Participation
- Medicaid Reimbursement
- Summary of Findings



Geographic Characteristics

- The plan highlights:
 - South Dakota's designation as a Frontier state and rural population base.
 - Over half of South Dakotans live in a county classified as rural or frontier.
 - Of the 311 incorporated towns and cities in South Dakota, only 27 have populations larger than 2,500.
 - The nine federally recognized tribes and reservations in South Dakota that are predominantly served by Indian Health Service.
 - South Dakota's medically underserved and health professional shortage areas.
 - All of part of 51 of South Dakota's 66 counties are classified as medically underserved.

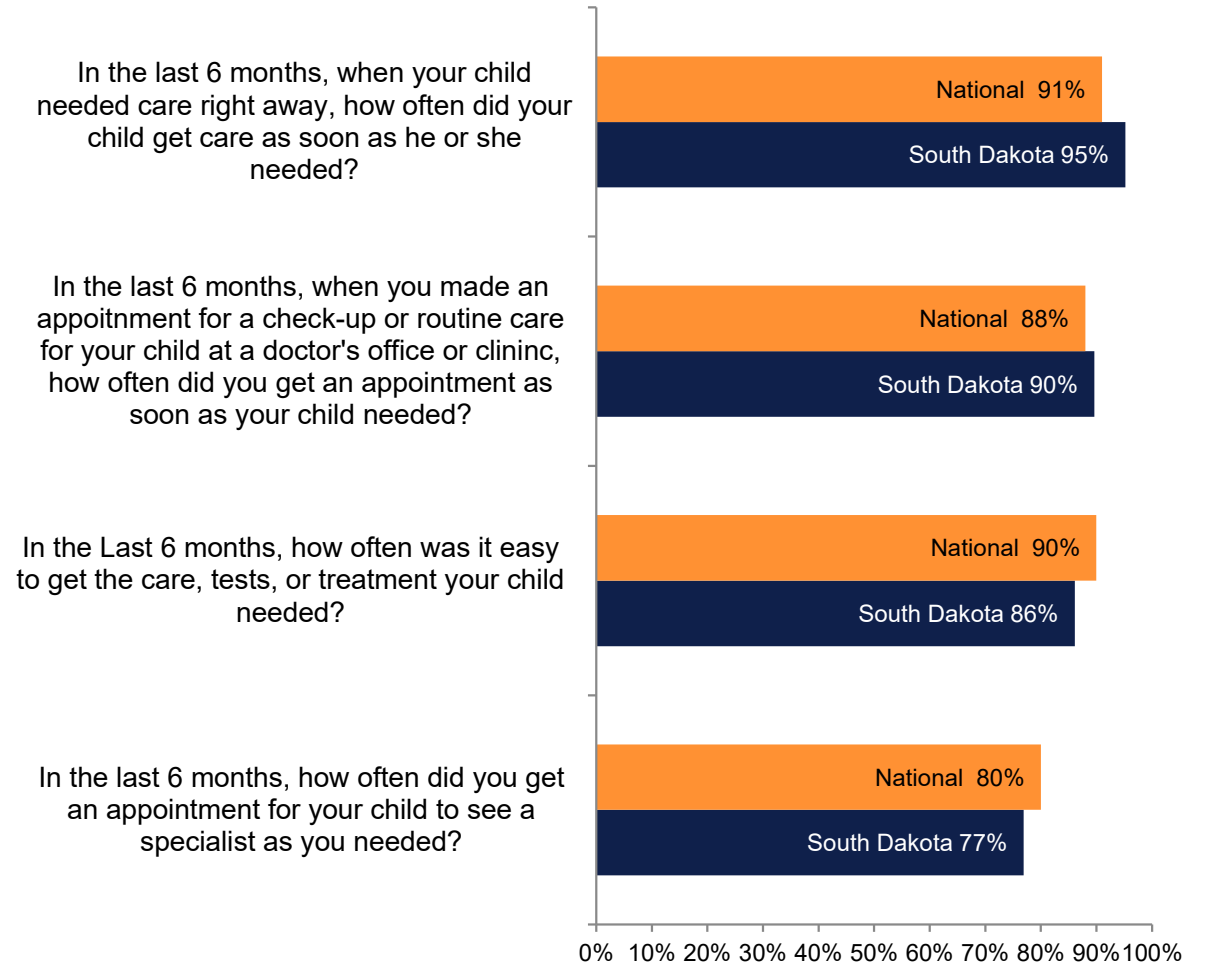
SOUTH DAKOTA MEDICALLY UNDERSERVED AREAS/POPULATIONS
July 2019



Medicaid Recipient Characteristics and Access

- The plan describes:
 - Current and historic eligibility trends.
 - South Dakota's Medicaid program is predominantly children (70%).
 - Recipient calls made to the DSS Constituent Liaison and Medicaid.
 - The majority of calls are related to coverage questions.
 - Consumer Assessment of Healthcare Providers (CAHPS) Survey questions regarding access to care.
 - Primary Care Provider (PCP) and Health Homes Program.
 - Telehealth Coverage

2019 CAHPS Survey



Provider Participation

- South Dakota has high rates of provider participation in the Medicaid program. High rates of provider participation support access to healthcare.
- South Dakota monitors access by matching enrolled NPIs to data from South Dakota licensing boards.
- While South Dakota Medicaid is able to measure the percent of participating providers to evaluate and monitor access, data is limited relative to the payer mix for participating providers and the percentage of Medicaid patients in a provider's caseload.
- In SFY 2019, South Dakota Medicaid had participation from approximately:
 - 100% of all acute care hospitals
 - 98% of all Rural Health Clinics
 - 93% of all Federally Qualified Health Centers
 - 99% of retail pharmacies
 - 99% of all nursing homes
 - 100% of all community mental health centers
 - 79% of all home health agencies
 - 71% of all dentists
 - 63% of all physicians

Medicaid Reimbursement

■ Rate Setting

- Medicaid rates are set utilizing two primary sources; Medicare or other commercial health plans and cost reports submitted by providers.
- Medicaid also must monitor rates in relation to the federal upper payment limit (UPL). Calculations are submitted to CMS each year.

Rates Set Using Other Payer's Data

- Clinics/Independent Practitioners
 - Physicians, CNP/PA
 - Optometrists, Chiropractors, Dentists
 - Durable Medical Equipment and Ambulance Services
- Pharmacies
- Hospitals

Rates Set Using Cost Reports

- Nursing Homes
- Community Based Providers
- Assisted Living
- Behavioral Health
- Home and Community Based Waiver Services (HCBS)

Medicaid Reimbursement

■ South Dakota Medicaid Rate Comparison

- The table below shows SFY19 Medicaid reimbursement as a percentage of Medicare rates or provider's billed charges where Medicare rate data is not available:

REIMBURSEMENT COMPARISON	
Service	% Comparison
Primary Care	76% of Medicare
Physician Specialist Services including Obstetric Services	75.8% of Medicare
Behavioral Health Services	78% of Medicare
Home Health Services (HCBS in home & State Plan services)	98.9% of billed charges by South Dakota Providers
Dental Services	54% of billed charges by South Dakota Dentists
FQHC	95% of Medicare

■ Provider Engagement and Transparency

- Rate methodologies are developed in collaboration with providers and provider associations or groups. Payment methodologies require updates to the Medicaid State Plan and are communicated in listservs and public notice processes.

Summary of Findings

- High rates of provider participation in South Dakota support robust access to care for Medicaid recipients.
- Recipient data from South Dakota's annual CAHPS survey show that South Dakota Medicaid recipients have access to care when and where they need it and that access in South Dakota exceeds national averages for access to care in some areas.
- South Dakota concludes that South Dakota Medicaid recipients have adequate access to health care that is similar to the general population in South Dakota for primary care, physician specialist, maternity, behavioral health, home health and dental services.
 - Known dental access issue regarding services requiring hospital-based anesthesia in the Black Hills area. This issue is being addressed in collaboration with providers in the area.

Public Comment Period

South Dakota

ACCESS MONITORING REVIEW PLAN
2020



- Public Comment Period:
June 29, 2020 to July 29, 2020
- Full Plan Available at:
https://dss.sd.gov/docs/medicaid/reports/Access_Monitoring_Review_Plan_2020.pdf
- Comments may be made:
 - By Phone: 605.773.3495
 - By Email: DSS.MEDICAID@state.sd.us
 - By Mail:
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