



South Dakota  
Department of  
**Social Services**

**DEPARTMENT OF SOCIAL SERVICES**

DIVISION OF MEDICAL SERVICES  
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**South Dakota Medicaid  
Thursday, April 23, 2026  
12:00 MT / 1:00 CT**

**Medicaid Advisory Committee Agenda  
Rapid City One Stop – Deerfield Room  
221 Mall Drive, Rapid City, SD**

**[Join Via Microsoft Teams](#)**

**Meeting ID: 2378580048720    Passcode: PL9JD2CV**

**Welcome and Overview**

- Introductions
- Opening Remarks

**Updates and Committee Discussion**

- Review January Meeting [Minutes](#)
- HOPE Waiver Renewal
- State Plan Amendments
- Cost Sharing
- HR1 Communications
- Medical Frailty
- Rural Health Transformation Plan

As time permits

- Juvenile Justice Targeted Case Management

**Closing Remarks**

**Future Meetings:**

- 07/23/2026 – Sioux Falls – One Stop Building
- 10/22/2026 – Pierre – Kneip Building
- 01/28/2027 – Virtual

# HOPE Waiver Renewal

Effective Date: 10/01/2026



**LTSS**  
LONG TERM SERVICES & SUPPORTS

April 21<sup>st</sup>, 2026

# LTSS

LONG TERM SERVICES & SUPPORTS

## HOPE Waiver

The Home and Community-Based Options and Person-Centered Excellence (HOPE) waiver provides home and community-based services to people who need nursing facility level of care. The waiver allows people age 65 and older, and people age 18 and older who have a qualifying disability, to live at home or in the setting that is most independent for them.



[dhs.sd.gov/ltss](https://dhs.sd.gov/ltss)



[dakotaathome@state.sd.us](mailto:dakotaathome@state.sd.us)



1 (833) 663-9673

# HOPE WAIVER RENEWAL

- Waivers must be renewed every five years
- The renewal will be effective October 1<sup>st</sup>, 2026, pending CMS review and approval



# RENEWAL OVERVIEW

- No change to eligibility
- No change to service definitions
- Targeted updates for clarity and oversight



# STRUCTURED FAMILY CAREGIVING UPDATES

- Pre-service home visit
- 6-month home visit
- Additional monitoring for high-risk participants



# PROVIDER ENROLLMENT

- Aligned with Medicaid requirements
- Administrative updates only
- No process changes



# SERVICE CLARIFICATIONS

- Identifies assessment used
- Ensures non-duplication of services



# FINANCIAL ACCOUNTABILITY

- Updated performance measure
- Ensures consistent rate review



# LTSS

LONG TERM SERVICES & SUPPORTS

## Public Comment Process



- March 25<sup>th</sup> – April 24<sup>th</sup>, 2026
- Multiple submission options
  - Email: [hcbs@state.sd.us](mailto:hcbs@state.sd.us)
  - Phone: 605-773-3656
  - Mail:  
HCBS Program Manager  
LTSS Division  
Hillsview Plaza  
3800 East Highway 34  
Pierre, SD 57501



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# Comments



**LTSS**

LONG TERM SERVICES & SUPPORTS

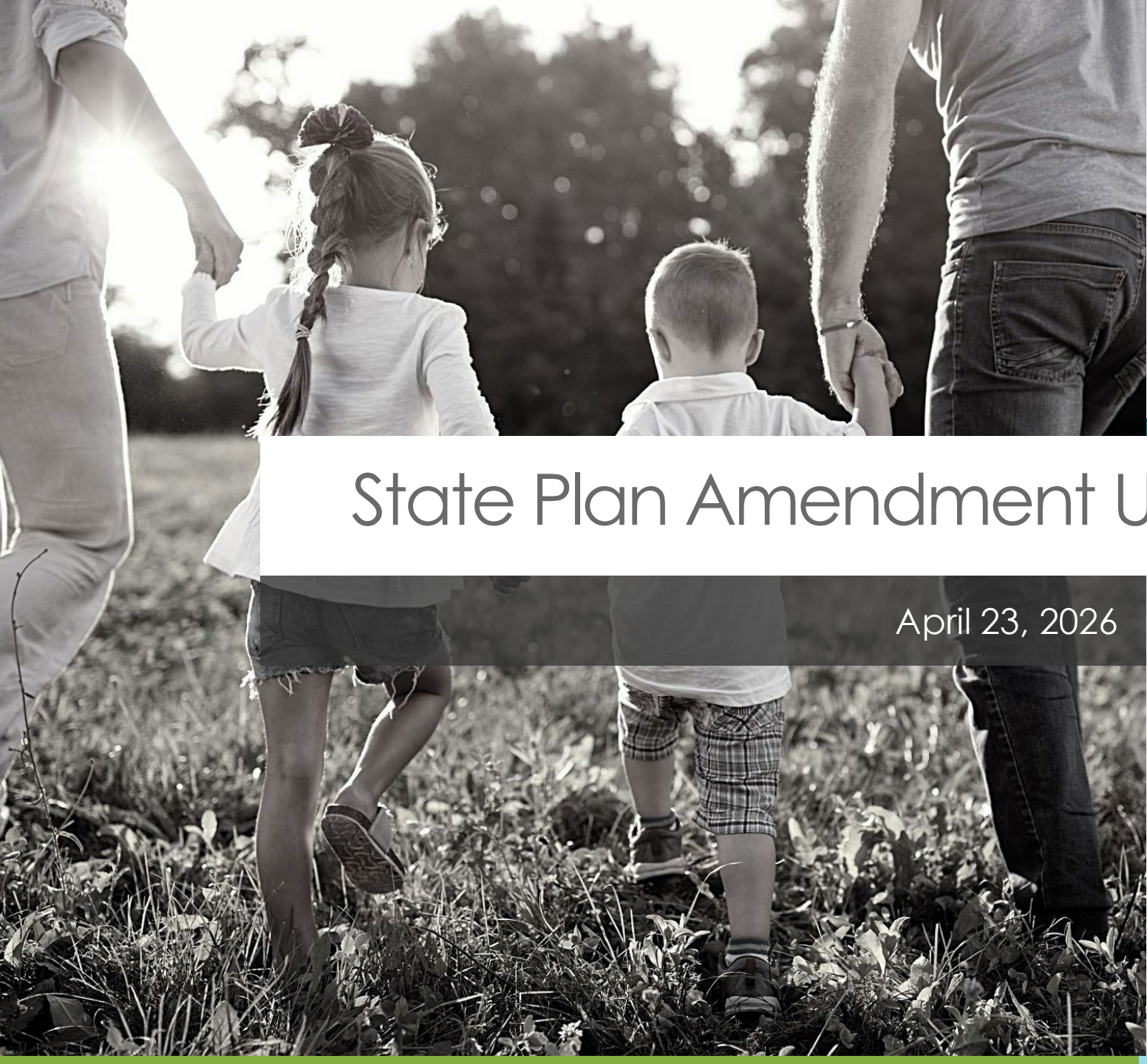
 1 (605) 773-3656

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## **STEVENS AMENDMENT:**

This publication is supported in part by the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) as a part of a financial assistance award. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by ACL/HHS, or the U.S. Government.



# State Plan Amendment Updates

April 23, 2026



# FQHC/RHC Scope of Service and FQHC Alternative Payment Methodology

SD-26-0001

## **Brief Description:**

Updates Rural Health Clinic (RHC) and Federally Qualified Health Center (FQHC) criteria for scope of service changes and implements an Alternative Payment Methodology (APM) encounter rate informed by the statewide cost-based weighted-average for FQHCs as appropriated for by the legislature.

## **Reason for Amendment:**

To add policy and procedure clarification for a change in scope of service and implement an Alternative Payment Methodology (APM) enhanced encounter rate option for FQHCs as appropriated by the 2026 State Legislature.

## **Important Dates:**

Comment Period: April 20, 2026 through May 20, 2026.

Effective date: July 1, 2026

# SFY27 Behavioral Health Inflationary Increase

SD-26-0002

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## **Brief Description:**

Implements community mental health center (CMHC) and substance use disorder (SUD) agency rate increase of 1.4% appropriated by the state legislature during the 2026 legislative session effective June 1, 2026.

## **Reason for Amendment:**

The state legislature appropriated an inflationary increase of 1.4% for SFY27.

## **Important Dates:**

Comment Period: April 20, 2026 to May 20, 2026

Effective date: June 1, 2026

# Hospital Reimbursement

SD-26-0003

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## **Brief Description:**

Implements changes to inpatient and outpatient hospital reimbursement methodologies for both instate and out-of-state hospitals.

## **Reason for Amendment:**

To modernize, streamline and more closely align the methodologies with industry standards.

## **Important Dates:**

Effective Date: July 1, 2026

Comment Period: April 13, 2026 to May 13, 2026

# SFY27 Provider Inflationary Increase (Anticipated)

## **Brief Description:**

The SPA implements the 1.4% inflationary rate increases appropriated by the state legislature during the 2026 legislative session effective July 1, 2026.

## **Reason for Amendment:**

The state legislature appropriated an inflationary increase of 1.4% for SFY27.

## **Important Dates:**

Comment Period: May or June 2026

Effective date: July 1, 2026

# SFY27 Care Connect Inflationary Increase (Anticipated)

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## **Brief Description:**

Implements a 1.4% inflationary rate increases for Care Connect payments (formerly known as Health Home) as appropriated by the state legislature during the 2026 legislative session.

## **Reason for Amendment:**

The state legislature appropriated an inflationary increase of 1.4% for SFY27.

## **Important Dates:**

Comment Period: May or June 2026

Effective date: July 1, 2026

# CY26 Care Coordination Supplemental Payments (Anticipated)

## **Brief Description:**

The state plan amendment updates the provider lists and supplemental payment amounts for the inpatient and nursing facility providers that have a signed care coordination agreement with Indian Health Services and have ensured access and proper coordination of care of health services.

## **Reason for Amendment:**

Update care coordination provider list and supplemental payment amounts.

## **Important Dates:**

Comment Period: May or June 2026

Effective date: June or July 2026

# Primary Accountable Care Transformation (PACT) Quality Payment (Anticipated)

## **Brief Description:**

Implements new quality-based payments to healthcare providers enrolled in the Medicaid Primary Care Provider (PCP) program. Payments are based on provider performance on specific primary care quality metrics during 2026 and 2027 and funded under the Rural Health Transformation Plan.

## **Reason for Amendment:**

Distribution of funding tied to the Rural Health Transformation Plan.

## **Important Dates:**

Comment Period: Spring 2026

Effective date: Spring 2026

## South Dakota Medicaid State Plan Amendments and 1115 Demonstration Applications

As of April 23, 2026

State plan amendments are available on our website at <https://dss.sd.gov/medicaid/medicaidstateplan.aspx>

### SPAs in Public Comment Period

SPA #	SPA Description	Date Effective	Public Comment Period Start Date	Date Public Comment Period Ends
26-0001	<b>FQHC/RHC Scope of Service and FQHC Alternative Payment Methodology</b> <i>Updates Rural Health Clinic (RHC) and Federally Qualified Health Center (FQHC) criteria for scope of service changes and implements an Alternative Payment Methodology (APM) encounter rate informed by the statewide cost-based weighted-average for FQHCs as appropriated for by the legislature.</i>	07/01/2026	04/20/2026	05/20/2026
26-0002	<b>SFY27 Behavioral Health Inflationary Increase</b> <i>Implements community mental health center (CMHC) and substance use disorder (SUD) agency rate increases appropriated by the state legislature during the 2026 legislative session effective June 1, 2026.</i>	06/01/2026	04/20/2026	05/20/2026
26-0003	<b>Hospital Reimbursement</b> <i>Updates hospital reimbursement methodologies including inpatient and outpatient hospital services for both in-state and out-of-state hospitals to modernize, streamline and more closely align the methodologies with industry standards.</i>	07/01/2026	04/13/2026	05/13/2026

### Anticipated SPAs

SPA Description	Anticipated Start of Public Comment Period
<b>SFY27 Provider Inflationary Increase</b> <i>Implements inflationary rate increases appropriated by the state legislature during the 2026 legislative session effective July 1, 2026.</i>	May or June of 2026
<b>SFY27 Care Connect (Health Home) Inflationary Increase</b> <i>Implements the inflationary rate increases appropriated by the state legislature during the 2026 legislative.</i>	May or June of 2026
<b>CY26 Care Coordination Supplemental Payments</b> <i>Updates the care coordination provider list and supplemental payment amounts.</i>	May or June of 2026
<b>Primary Accountable Care Transformation (PACT) Quality Payment</b> <i>Implements new quality-based payments to healthcare providers enrolled in the Medicaid Primary Care Provider (PCP) program. Payments are based on provider performance on specific primary care quality metrics during 2026 and 2027 and funded under the Rural Health Transformation plan.</i>	May or June of 2026

### SPAs Being Prepared for CMS Submission

SPA #	SPA Description	Date Effective	Public Comment Period Start Date	Date Public Comment Period Ends
	None at this time.			

### SPAs in CMS Review

SPA #	SPA Description	Date Effective	Public Comment Period Start Date	Public Comment Period End Date	Date Submitted to CMS
25-0015	<b>SUD/IMD Template and School-Based Administrative Claiming</b> <i>Replaces the current Attachment 3.1-L Substance Use Disorders / Institutions for Mental Diseases State Plan pages with the new template pages provided by CMS and separately updates the random moment time study cost pool list of providers that may perform school-based direct services and/or administrative claiming activities..</i>	10/01/2025	09/29/2025	10/29/2025	11/07/2025
25-0012	<b>SFY26 Provider Inflationary Increase</b> <i>Implements inflationary rate increases appropriated by the state legislature during the 2025 legislative session effective July 1, 2025, and coverage and reimbursement for Rural Emergency Hospitals under the Clinic Services benefit.</i>	07/01/2025	06/23/2025	07/23/2025	07/31/2025

### Approved SPAs

SPA #	SPA Description	Date Effective	Public Comment Period Start Date	Public Comment Period End Date	Date Submitted to CMS	Date Approved
25-0016	<b>CHIP Eligibility - Incarcerated Beneficiaries</b> <i>Provides assurance that the State is in compliance with requirements in Section 5121 of the Consolidated Appropriations Act, 2023 regarding eligibility of Targeted Low-Income Children (TLIC) who are or become incarcerated.</i>	07/01/25	12/15/2025	01/14/2026	01/23/2026	03/30/2026



# Cost Sharing – HR1



South Dakota  
Department of  
**Social Services**

# Federal Requirements

- **What:** The One Big Beautiful Bill Act/HR 1 requires states to implement cost sharing requirements for a subset of the Medicaid expansion population.
  - Cost Sharing is also sometimes referred to by other insurers as a co-pay or co-insurance.
- **When:** Effective Date: October 1, 2028
- **Who:** Medicaid expansion adults with income at or above 100% of the Federal Poverty Level.
  - Excludes American Indians and Alaska Natives, pregnant women, individuals under age 21, hospice patients, and institutionalized individuals.
- **Guidelines:**
  - **Limits:** Cost shares may not exceed \$35 per service. Cost sharing is also limited to 5% of the Medicaid household's income for families.
    - The 5% can be applied as a monthly or quarterly limit as determined by the state

# Services Federally Exempt From Cost Sharing

- Primary care
- Preventative services
- Emergency services,
- Mental health services
- Substance use disorder services
- Services provided by a federal qualified health center, behavioral health clinic, or rural health clinic

# Services **Not** Exempt from Cost Sharing

- Audiology Services
- Chiropractic Services
- Community Health Worker Services
- Dental Services
- Diabetes Self-Management Training Services
- Dietician and Nutritionist Services
- Durable Medical Equipment, Prosthetics, Orthotics and Supplies
- Health Department Clinics
- Home Health Agency Services
- Home Infusion Therapy Services
- Hysterectomy Services
- Inpatient Hospital Stays
- Justice-Involved Youth Targeted Case Management and Pre-Release Services
- Laboratory and Pathology Services
- Nutritional Therapy Services and Nutrition Supplements
- Optometric and Optical Services
- Personal Care Services
- Pharmacy Services/Prescription Drugs
- Physician Administered Drugs
- Physician Services/Clinic Services<sup>^</sup>
- Podiatry Services
- Private Duty Nursing
- Radiology Services
- Renal Dialysis Services
- School Districts
- Surgical Services
- Telemedicine Services
- Therapy Services
- Transportation Services
  - Ambulance
  - Community Transportation
  - Secure Medical Transportation
- Urgent Care

<sup>^</sup>certain services provided may be considered exempt (e.g., preventative services)

# Draft Recommendation

Possible approach:

1. Apply cost share to a limited number of services.
  - Provides administrative simplicity.
  - Easier for providers and recipients to understand
2. Apply to services that are high cost OR not included in major medical.
  - Cost sharing is in higher-cost services or services that for the general public, require an additional insurance policy.

## **DRAFT**

### **High-Cost Group**

- Inpatient Hospital Services:
  - \$20 per claim

### **Non-Major Medical Group**

- Optical supply:
  - \$5 per claim
- Select Dental Services:
  - Limited to filings, crowns, extractions, dentures, and surgical services
  - \$5 per claim

# Additional Steps

- System Programming
- Provider and Communication
  - 2028
- State Plan Amendment
  - 2028
- Implementation
  - October 1, 2028



Thank You



# HR1 Updates & Feedback

April 2026



South Dakota  
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# Agenda

HR1 Overview

HR1 Preparation

Communications Feedback

Questions & Feedback



# HR1 Overview

# Sections Impacting Eligibility

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## **Section 71109: Alien Medicaid Eligibility (Noncitizen Eligibility) – Effective October 1, 2026**

- PRWORA designates certain “qualified noncitizens” who are eligible for federal public benefits, including Medicaid/CHIP, if they meet all other eligibility criteria. Section 71109 does not amend PRWORA.
- This section amends sections the Social Security Act to restrict Federal Financial Participation (FFP) to U.S. citizens and nationals, Lawful Permanent Residents (LPRs), Cuban and Haitian Entrants, and Compacts of Free Association (COFA) migrants.

## **Section 71107: Eligibility Redeterminations (Biannual Renewals) – Effective January 1, 2027**

- This implements 6-month (instead of 12-month) renewals for individuals enrolled in the Adult Group (Medicaid Expansion) only. Other groups will still be 12-month renewals.
- This change doesn’t impact persons who are Native American, tribally-enrolled, or eligible for IHS.

## **Section 71112: Reducing State Medicaid Costs (Retroactive Reduction) – Effective January 1, 2027**

- This section reduces retroactive coverage from 3 months to:
  - 1 month for Adult Group (Medicaid Expansion), and
  - 2 months for all other coverage groups.

## **Section 71119: Community Engagement (Work Requirements) – Effective January 1, 2027**

- This impacts individuals applying for or enrolled in the Adult Group (Medicaid Expansion) unless exempt.
- Compliance requires a certain amount of work, educational enrollment, or community service hours.

# CMS Guidance

HR1 Section	Functionality
<b>Section 71107: Eligibility Redeterminations (Biannual Renewals)</b>	<p><b>Guidance:</b> State Medicaid Director (SMD) #26-001 <b>Release Date:</b> March 6, 2026 <b>Title:</b> RE: Implementation of “Eligibility Redeterminations,” Section 71107 of the “Working Families Tax Cut” Legislation (Public Law 119-21)</p> <p><b>Decision Point:</b> This guidance included state options to transition to 6-month renewals. DSS’ current plan to transition individuals from 12-month to 6-month renewals at the individual’s next scheduled renewal initiated on or after January 1, 2027.</p>
<b>Section 71109: Alien Medicaid Eligibility (Noncitizen Eligibility)</b>	<p><b>Guidance:</b> State Health Official (SHO) #26-001 <b>Release Date:</b> April 8, 2026 <b>Title:</b> RE: Implementation Section 71109 “Alien Medicaid Eligibility” of the Working Families Tax Cut Legislation (Public Law 119-21)</p> <p><b>Decision Point:</b> None</p>
<b>Section 71112: Reducing State Medicaid Costs (Retroactive Reduction)</b>	<p><b>Guidance:</b> Pending</p>
<b>Section 71119: Requirement for States to establish Medicaid community engagement requirements for certain individuals (Work Requirements)</b>	<p><b>Guidance:</b> Pending</p>

# HR1 Preparation



# DSS' Guiding Principles

## Our Vision & Mission

The South Dakota Department of Social Services is dedicated to strengthening families to foster health, wellbeing, and independence.

## About DSS

We are here to help children, families, individuals, seniors, and people with disabilities through some of the most difficult times in their lives with the programs and services we provide.

## Our Guiding Principles

1. **Focus on Impact:** We focus on important issues and challenges to maximize impact.
2. **Customer Centric:** We treat our customers with respect and provide a “no wrong door” approach.
3. **Build Partnerships to Maximize Results:** We believe collaboration, teamwork, and partnerships are key to delivering results.
4. **Develop our People:** We promote professional growth and development by empowering staff.

# 1. Focus on Impact



## **DSS' Top Priority**

Ensuring eligible South Dakotans maintain coverage while navigating new federal requirements.

## **Early Action & Collaboration**

Proactively analyzing federal changes in cross-divisional workgroups to align policy and operations.

## **System & Operational Readiness**

Designing system updates with our vendor through joint design sessions and preparing workflows for increased eligibility actions and complexity.

## **Stakeholder Feedback**

Gathering input from providers, beneficiaries, Tribal partners, and staff.

## **Workforce & Customer Readiness**

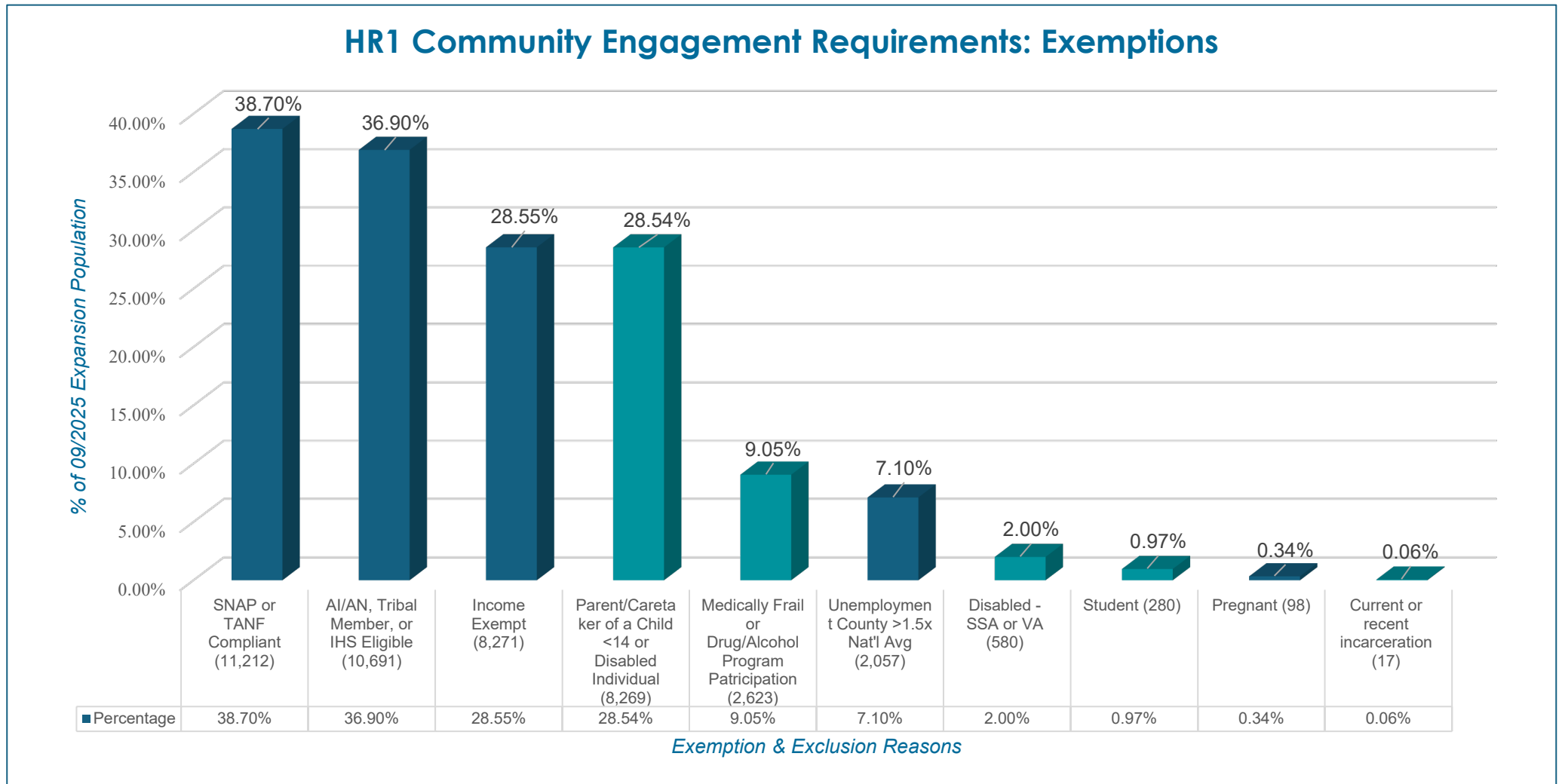
Preparing staff and strengthening clear, accessible communication.

# Community Engagement: Estimated Impacts

Recipients may meet more than one criteria for exemption, based on available, currently-gathered data.

There are **6,066** recipients who appear subject to community engagement requirements.

It's estimated 20% will not be exempt or meet the criteria, resulting in disenrollment of **1,213** individuals.



Data in light blue indicative of areas where full data is not available as some/all of it is not currently collected.

# Noncitizens: Estimated Impacts

## Preparation

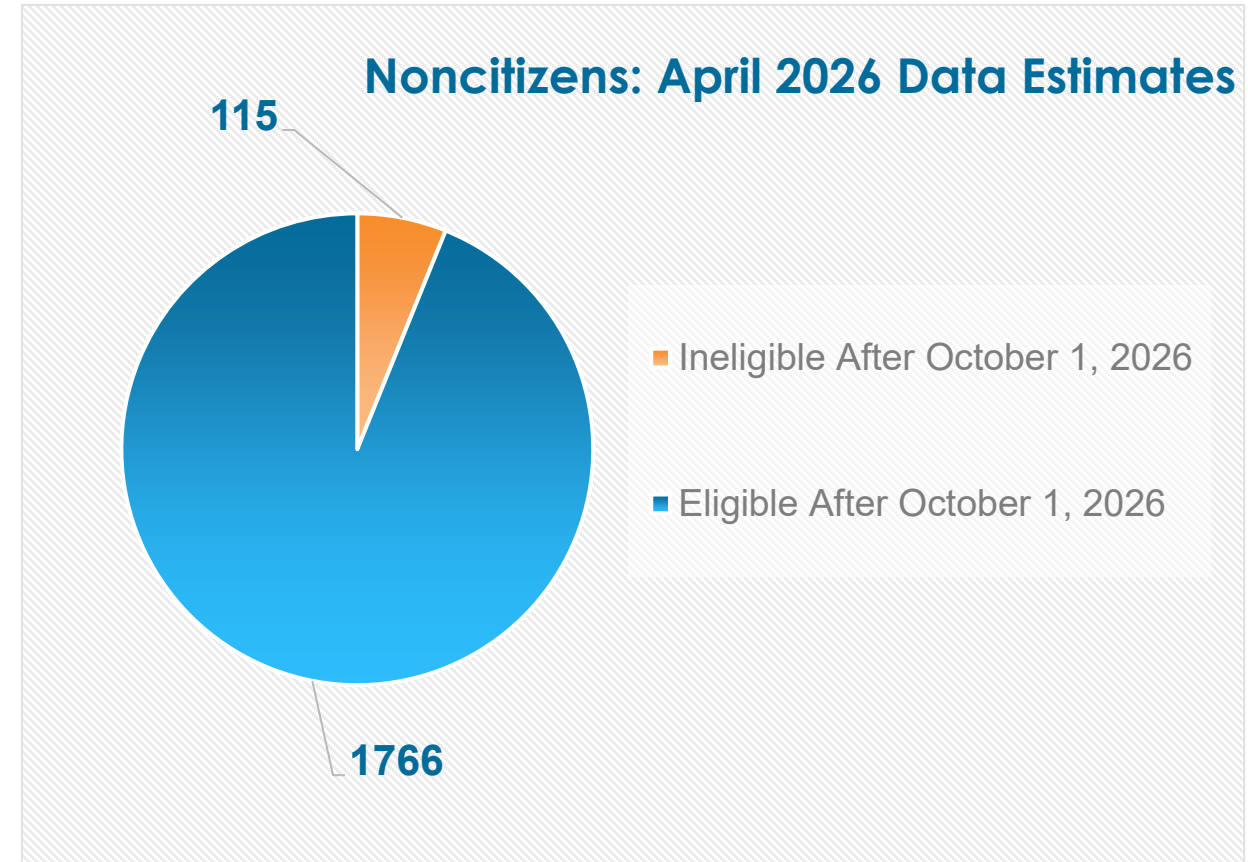
Recipients with immigration statuses that will no longer be “FFP-eligible noncitizens” will have renewal dates moved to 09/30/2026. They’ll be sent renewal packets no later than 07/11/2026, which will request they attest to their current immigration status, which we must verify through SAVE.

All federal renewal requirements, including Reasonable Opportunity Periods (ROPs), will be provided.

## Eligibility

Individuals who are not “FFP-eligible noncitizens” after 09/30/2026 will be disenrolled at that time.

FFP-ineligible noncitizens may still be eligible for Emergency Medical Services or, if pregnant, the Unborn Child of Ineligible Noncitizens program. Those programs remain unchanged.



## 2. Customer Centric

- ★ **DSS' Goal**  
Streamline the customer-facing experience by delivering clear, transparent communication; providing responsive and timely assistance; simplifying processes; leveraging technology to enhance efficiency and engagement; and empowering our team with education and resources to deliver customer-focused services.

### Accomplishing the Goal

- ✓ Update online and paper applications – new & amended questions
- ✓ Utilize existing interfaces and data sources
- ✓ Create new interfaces and data sources
- ✓ Notify customers timely through multiple channels
- ✓ Provide educational and resource materials
- ✓ Utilize DSS website and social media for updates and information
- ✓ Ongoing review of customer survey responses from BEES Customer Portal
- ✓ Leverage workgroups for feedback and review:
  - Medical Eligibility Advisory Committee (MEAC)
  - Medicaid Advisory Committee (MAC)
  - Beneficiary Advisory Committee (BAC)
  - Tribal Consultation

# Customer Notifications

## Initial Notification (NEW)

An initial notice must be sent to all applicable individuals in September 2026. The notice will indicate they've been identified as an "applicable individual" (e.g., Medicaid Expansion recipient) and will include information on how they can comply with CE through qualifying activities or if they should be exempt or excluded.

## Ongoing Notification (NEW)

Ongoing notice will be sent every six months to applicable individuals through incorporation into the renewal process.

Initial and ongoing notifications will include:

- CE Implementation Dates
- CE Compliance Requirements
- CE Exemptions and Exclusions (Short-Term Hardships)
- Available resources through DLR and 211 Helpline Volunteer Services
- Customer Portal Information – Including how to sign up for text/email notifications
- How customers can stay informed (Recipient Listserv, [dss.sd.gov](https://dss.sd.gov) CE landing page, etc.)



## Eligibility-Related Notices (Updated)

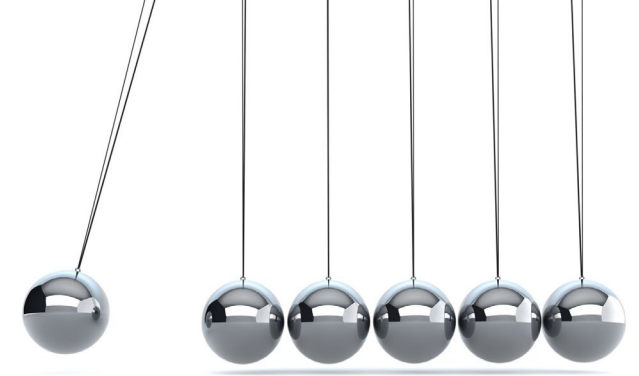
- CE Requirement Two-Pager for Customers

## BEES Online Customer Portal (TBD)

- Awaiting CE-specific Portal updates from vendor, Merative. Once received, will utilize the framework to guide any DSS customizations. The estimated timeframe is April 2026.

# Education & Resource Materials

- “Town Hall” Public Webinars - August 2026\*
- Notices – September 2026
  - ❖ Initial Notice, Ongoing Notice, Eligibility-Related Notices
  - ❖ CE Requirement Two-Pager for Customers
- [DSS.SD.GOV HR1 Landing Page](https://dss.sd.gov/hr1)
  - ❖ Live: How to Stay Informed for Customers, Providers, & Stakeholders
  - ❖ Live: HR1 Changes Impacting Customers
  - ❖ *Coming Soon*: FAQ document of questions for the public, webinar sign-ups, social media tools
  - ❖ *Closer to Implementation*: Banners on dss.sd.gov main page
- Recipient Handbook updates
- Provide resource documents to local office to print for customers

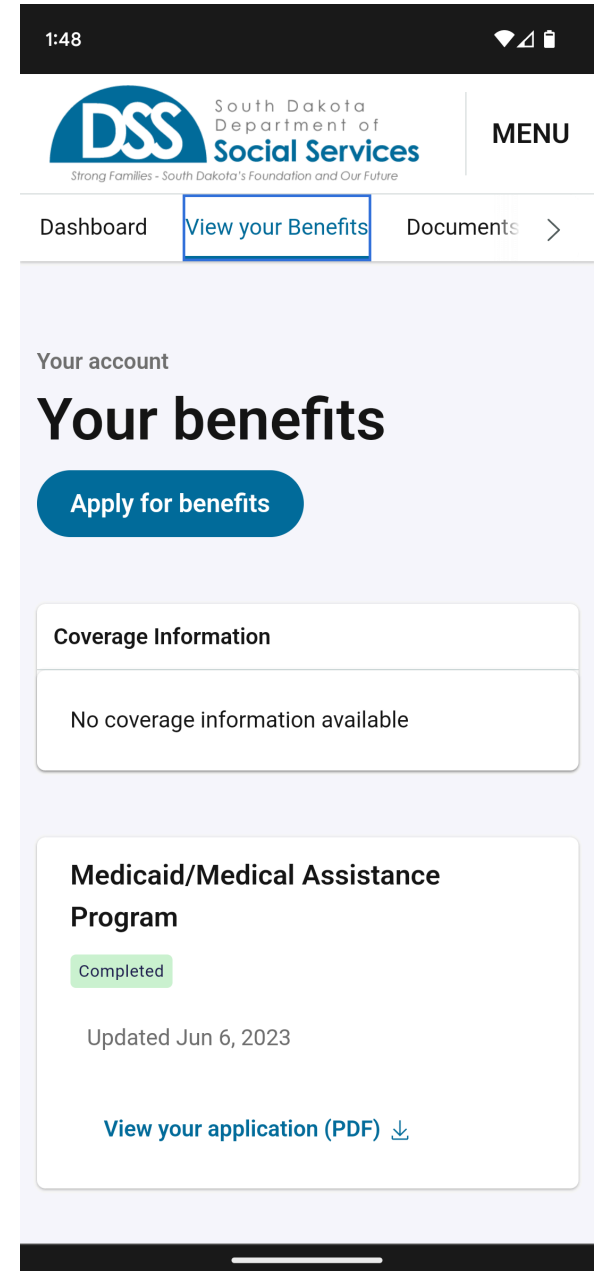


# BEES Customer Portal Functionality

The BEES Customer Portal includes multiple functionalities not previously available to customers:

- ✿ Apply for Medicaid/CHIP and/or SNAP;
- ✿ Report changes;
- ✿ Upload documents;
- ✿ Complete renewals;
- ✿ Check coverage/application status;
- ✿ Opt-in to text and/or email notifications;
- ✿ View notices;
- ✿ Request appeals; and
- ✿ Find contact information.

The site is optimized so it **will scale and work on any device** – desktop computers, laptop, tablet, cell phone, etc.



# Customer Portal Accounts

Customers can download a copy of their application, access notices, upload information and documents, renew their coverage, and view their current coverage information. They can also report changes, file an appeal, and easily view local office information.

The screenshot shows the 'Your benefits' page in a customer portal. At the top, there is a navigation bar with links: Dashboard, View your Benefits (highlighted), Documents, Report Changes, Notices, Appeals, Local Office, and Settings. Below the navigation bar, the page title is 'Your account' followed by 'Your benefits' in a large font. A blue button labeled 'Apply for benefits' is positioned to the right of the title. The main content area is titled 'Coverage Information' and contains four entries for 'Henrietta Beesbox'. Each entry shows the name and the eligible coverage period: February 1, 2024 through July 31, 2024, and August 1, 2024 through January 31, 2025.

## Report Changes

[< Back](#)

### Overview

Here you can report changes. If you are the primary member on this case, you can report changes for other household member(s).

#### Economic Assistance Benefits

##### 1 Prepare

You will be asked to review the information we have on this case. Type of changes that can be reviewed and reported on:

- **Personal details:** name, SSN
- **Income:** wages, lottery winnings
- **Expenses:** rent, health insurance premiums
- **Resources:** bank accounts, vehicles

##### 2 Report your change

It's important we have the latest information so everyone in the household receives the assistance for which they might be eligible. Complete this form to report changes.


After submitting, you will get a confirmation message telling about next steps.

##### 3 Decision

Once we've processed your documents, you will receive a notice if there are any changes to your benefits.

[Start](#)

# 3. Partnerships to Maximize Results

-  **DSS' Goal**  
Create a framework to pursue innovative solutions and enhanced collaboration – identify and implement innovative solutions through enhanced partnerships to create better outcomes for our customers and stakeholders and promote an agency that values critical thinking.

## Accomplishing the Goal

- ✓ Medical Eligibility Advisory Committee Internal Workgroups
- ✓ Cross-Divisional Internal Workgroups
- ✓ Beneficiary Advisory Committee, Medical Advisory Committee, & Tribal Consultation Customer Partnership
- ✓ Provider, Beneficiary, and Tribal Bulletins
- ✓ [DSS.SD.GOV HR1 Landing Page](#)
- ✓ Partnership with Department of Labor
- ✓ Partnership with 211 Helpline Volunteer Connections
- ✓ National Association of Medicaid Directors (NAMD)
- ✓ State Health & Value Strategies (SHVS)
- ✓ Vendor & System Updates
- ✓ New System Interfaces

# Resource Education: DLR

## South Dakota Job Services

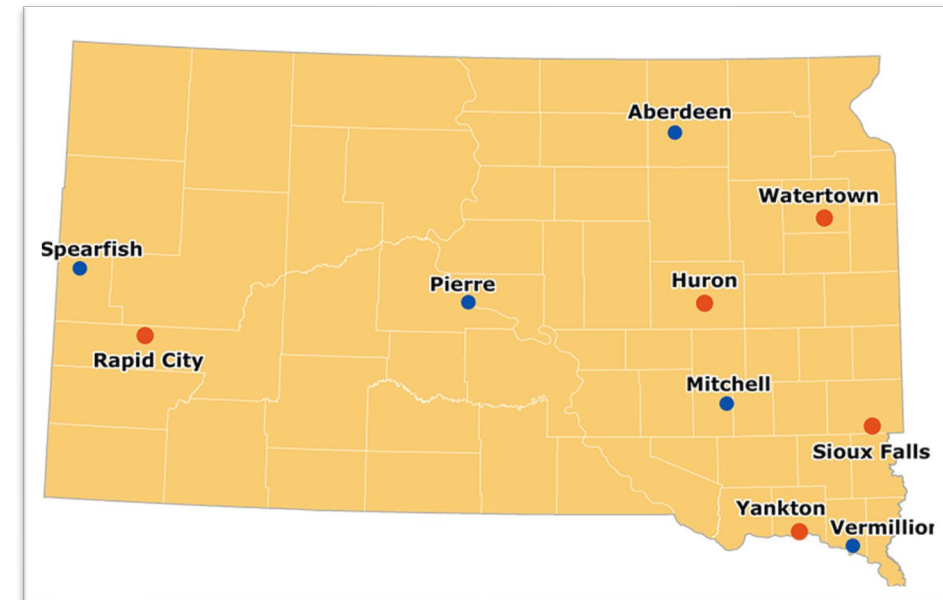
Job Service offices are staffed with trained professionals ready to help job seekers with career coaching, job searches, free skills training, and more. Offices co-located with DSS can include warm handoffs.

## SDWORKS

DLR's online jobs database has the most job listings statewide. Like the BEES Customer Portal, it uses the mySD single sign on process for customers to access services within SD.

## Additional DLR Services

- **Reemployment Assistance Services:** File by telephone and the RA Benefits Portal
- **Workforce Services:** Adult Education, Disability Resources, Layoff Assistancess, Training Opportunities, & more
- **Workforce Innovation and Opportunity Act (WIOA) Programs:** Help job seekers access employment, education, training, and support services to succeed in the labor market and to match employers with skilled workers.



# Resource Education: 211 Helpline & More



## Helpline Center: Volunteer Connections

Helpline Center's Volunteer Connections program is the critical link between great community volunteers and the nonprofit agencies that need them. It serves as the volunteer center in the Sioux Empire, Black Hills, and Brookings regions of South Dakota.

In addition to providing and maintaining a searchable and refinable database list of hundreds of volunteer opportunities, Volunteer Connections also provides resources and information to non-profit organizations and businesses.

## Helpline Center: 211 Community Resources

The search feature assists in locating resources available in each customer's community for their specific needs.

### ✓ CE-Specific Resources

- Adult Education & GED Programs
- Career & Technical Education Programs available through Department of Education (DOE)
- Employment – Career Counseling, Job Training, Vocational Rehabilitation

### ✓ Additional Resources

- Financial and legal assistance
- Food, clothing, housing & shelter
- Mental health, substance use, support groups
- Transportation assistance

A graphic with the text "HUNDREDS of ways to VOLUNTEER". The word "HUNDREDS" is in large blue capital letters. Below it is a yellow stylized human figure with arms raised. To the right of the figure, the words "of ways to" are in blue lowercase letters, and "VOLUNTEER" is in large yellow capital letters.

# 4. Develop our People



## DSS' Goal

Staff will receive comprehensive training on HR1 requirements, policy and procedure updates, eligibility system changes, and potential impacts to customers. Staff will be equipped with the knowledge and tools necessary to accurately determine eligibility, connect customers with appropriate resources to meet their needs, and effectively respond to HR1 and Community Engagement questions from customers, providers and other stakeholders.

## Economic Assistance Benefits Specialists (EABS)

There are 29 offices with 241 Economic Assistance Benefits Specialists (EABS) statewide. There are 105 EABS who specialize in medical program eligibility. EABS must have a Bachelor's Degree or higher in Human Services or related fields, effective communication, organization, and critical thinking skills, attention to detail, policy, and documentation, and must be compassionate, respectful, and committed to public service.

## Accomplishing the Goal

- ✓ Current Training:
  - New Hire Training on Systems, Policy, Customer Engagement, Customer service, Civil Rights, Confidentiality, Voter Registration, Guided Conversations, Cybersecurity, Ethics, Mandatory Reporting, & Ongoing Refresher Trainings Quarterly and Annually
- ✓ HR1-Related Training:
  - Staff have already received an overview training of upcoming changes. Once CMS' full guidance is received, policy and system trainings are scheduled to begin in July 2026 through November 2026.
- ✓ Desk Guides
- ✓ Job Aids
- ✓ Customer Service Scripts
- ✓ Policy 101s

# Communication Feedback



# Communication

## Live Communication

- Federal Regulation Updates Landing Page: <https://dss.sd.gov/medicaid/HR1.aspx>
  - Stay Informed: Recipient Listserv, BEES Customer Portal, & Provider Listserv
  - HR1 Summaries: Who is Impacted, What is Changing, & When

## In progress

- Landing Page Updates:
  - Communications & Social Media Toolkit:
    - ✓ Social Media Graphics
    - ✓ Partner Tip Sheet
  - Frequently Asked Questions
  - Work Requirements Screener Tool
  - Community Engagement Brochure (also to be available at [dss.sd.gov/formsandpubs](https://dss.sd.gov/formsandpubs))
  - Community Engagement Handout (will be included on customer notices and available at the same location as the brochure)
- Community Service Verification Form
  - Similar to the wage verification form, which customers may use to verify community service and DSS staff can send to providers to complete as verification.



# Questions & Feedback

[dss.sd.gov](https://dss.sd.gov) 



**PHONE:**  
**TOLL FREE:**  
**FAX:**

April 13, 2026

Case Number:

**Community Engagement**

Some adults must take part in Community Engagement (CE) activities each month to be eligible for Medicaid Expansion. CE activities help connect people with work, education, and community services. Learn how you can meet the requirement — or qualify not to participate — based on federal rules.

If you are not exempt or excluded from participation, you must demonstrate you meet the criteria in the month prior to the month in which you want coverage to begin.

If you meet one of the following criteria and were denied or terminated for Medicaid Expansion based solely on Community Engagement criteria, contact your local office. Find your local office at <https://dss.sd.gov/findyourlocaloffice/>.

- ✓ American Indian or Alaska Native
- ✓ Pregnant or Postpartum (the pregnancy must have ended within the last 12 months, and you must have been enrolled in Medicaid when the pregnancy ended)
- ✓ Parents, guardians, caretaker relatives, or family caregivers of a dependent child under the age of 14 or a disabled individual of any age
- ✓ Incarcerated currently or within the 90 days prior to application date

**Ways to Meet the Community Engagement Requirement**

You can meet the requirement by completing one or a combination of the following activities.

If we are unable to electronically verify your Community Engagement activities, you will need to provide verification. The chart below explains the activities and acceptable verifications.

<b>Community Engagement Activities</b>	<b>Acceptable Documents</b>
Working 80+ hours per month or a monthly income of \$580 (the Federal Minimum Wage multiplied by 80 hours per month) per month (if you are a seasonal employee, the last 6 months of work are averaged)	<ul style="list-style-type: none"> <li>✓ Wage Verification Form</li> <li>✓ Written Employer Statement</li> <li>✓ Pay Stub/Earning Statement</li> <li>✓ Self-Employment Ledgers</li> <li>✓ Gross Income Statement</li> </ul>
Completing 80+ hours per month of community service	<ul style="list-style-type: none"> <li>✓ Written Community Service Provider Statement</li> <li>✓ Time Sheets</li> <li>✓ Completed Attestation Form</li> </ul>
Participating in a formal Employment-Training Program (such as SNAP, TANF, or WIOA) 80+ hours per month	<ul style="list-style-type: none"> <li>✓ Written Program Statement</li> <li>✓ Written Employer Statement</li> </ul>
Enrollment in an educational program at least half-time, such as an institution of higher education or a career and technical education program	<ul style="list-style-type: none"> <li>✓ Enrollment Verification Letter</li> <li>✓ Current Class Schedule</li> <li>✓ Tuition or Billing Statement</li> </ul>

	<ul style="list-style-type: none"> <li>✓ Transcript with Current Registration</li> <li>✓ Letter or Statement from the Educational Program</li> </ul>
--	--

If you need assistance verifying your activities, please contact your local DSS office. You can find local office information at <https://dss.sd.gov/findyourlocaloffice/>.

### Employment Assistance

The South Dakota Department of Labor and Regulation provides support, education, and training to individuals seeking employment in South Dakota.

Search for jobs online using **SDWORKS** at <https://www.southdakotaworks.org/vosnet/default.aspx>.

Find one on one support at a local office at <https://dlr.sd.gov/localoffices/default.aspx#find-office>.

### Community Service and Community Resource Assistance

The Helpline Center’s Volunteer Connections program is the critical link between individuals looking to volunteer and the nonprofit agencies that need volunteers. Locate volunteer opportunities in the Sioux Empire, Brookings, and Black Hills communities at <https://volunteer.helplinecenter.org/>.

The Helpline Center can connect you to resources and support in your community through the 211 Helpline. Call 211, text your zip code to 898211, or visit <https://www.helplinecenter.org/> to learn more.

### **Community Engagement Exemptions**

You do not have to meet Community Engagement requirements to qualify for Medicaid Expansion if any of the following apply. You must still meet other eligibility criteria.

If we are unable to electronically verify your exemption, you may need to provide verification. The chart below explains exemptions and acceptable verifications.

<b>Community Engagement Exemptions</b>	<b>Acceptable Documents</b>
Determined currently disabled by the Social Security Administration	✓ Statement from the Social Security Administration
Veteran with a disability rated as total	✓ Statement from the Veteran’s Administration
Medically Frail (see below) and/or Participating in a drug addiction or alcohol treatment and rehabilitation program	<ul style="list-style-type: none"> <li>✓ Written statement by a medical provider</li> <li>✓ Medical records of your diagnoses</li> <li>✓ Completed Medical Frailty Screening Tool</li> </ul>

You may be considered medically frail if you have a serious physical, mental, or emotional health condition that makes it hard for you to work, volunteer, or participate in community activities.

You may fit this category if you:

- ✓ Have a significant or long-term medical condition
- ✓ Are recovering from major treatment or surgery
- ✓ Have a disability or functional limitation that affects daily activities
- ✓ Have a serious mental health condition or substance use disorder
- ✓ Need ongoing help with personal care or daily tasks

### **Short-Term Hardships**

You may qualify for a temporary exemption if you are experiencing one of the following short-term hardships:

- ✓ Receiving inpatient hospital services, nursing facility services, services in an intermediate care facility for individuals with intellectual disabilities, inpatient psychiatric hospital services, or such other services of similar acuity, or

- ✓ Traveling outside of your community for yourself or a dependent for an extended period of time to receive medical services necessary to treat a serious or complex medical condition that are not available within your community of residence.

The same information that may be used to verify medical frailty is acceptable documentation for short-term hardships. If you need assistance verifying a short-term hardship, please contact your local DSS.

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## Community Engagement Resources



Locate volunteer opportunities in the Sioux Empire, Brookings, and Black Hills at <https://volunteer.helplinecenter.org/>.

The 211 Helpline Center can connect you to resources and support in your area. Call 211, text your zip code to 898211, or visit <https://www.helplinecenter.org/>.

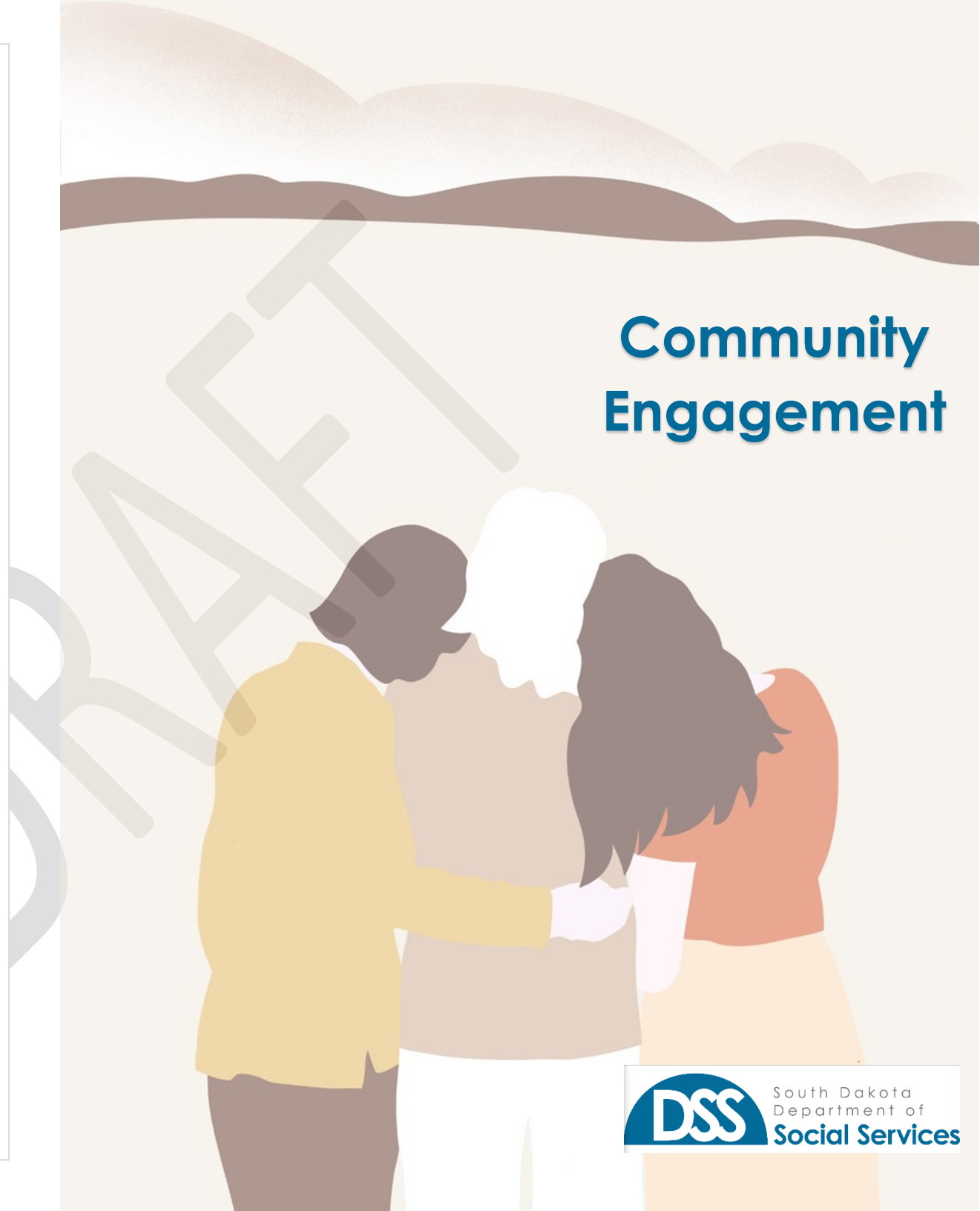


The Department of Labor and Regulation provides support, education, and training to individuals seeking employment.

Search for jobs online using **SDWORKS** at <https://www.southdakotaworks.org/vosnet/default.aspx>.

Find one on one support at a local office at <https://dlr.sd.gov/localoffices/default.aspx#find-office>.

# Community Engagement



## Community Engagement

Some adults must complete monthly qualifying activities to keep Medicaid Expansion coverage.

### Qualifying Activities

You can meet the requirements by completing one or a combination of the following activities.

- ✓ Work at least 80 hours a month or have income of \$580 a month
- ✓ Complete 80 hours a month of community or volunteer service
- ✓ Participating in job training programs
- ✓ Attend school at least half-time

## You May Be Exempt If You:

- ✓ Are American Indian or Alaska Native
- ✓ Pregnant or Postpartum
- ✓ Care for a child under 14 or a disabled person
- ✓ Were recently incarcerated
- ✓ Have a disability or are medically frail
- ✓ Are in treatment for substance abuse

You may be considered medically frail if you have a serious physical, mental, or emotional health condition that makes it hard for you to work, volunteer, or participate in community activities.

## You May Qualify for a Short-Term Hardship If you:

- ✓ Are receiving inpatient medical services
- ✓ Are traveling for serious or complex medical conditions for yourself or a dependent

### If You Have Questions

If you need assistance, contact your local DSS.

Find local office information:

<https://dss.sd.gov/findyourlocaloffice/>.

You can apply, renew, and sign up for text and/or email notifications online using the BEES Customer Portal.

Create or log into your account at

<https://eaportal.sd.gov/>.

DRAFT



South Dakota  
Department of  
**Social Services**

**DEPARTMENT OF SOCIAL SERVICES**  
**DIVISION OF ECONOMIC ASSISTANCE**

**PHONE:**  
**FAX:**  
**EMAIL:**

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April 13, 2026

Customer Name:

Customer DOB:

Dear \_\_\_\_\_,

The above referenced individual has authorized the release of information to the Department of Social Services. **Please complete this form to verify their volunteer or community service participation and return by fax or email to the contact information at the top of this page.** If you have received this through the mail, you may also return it in the enclosed self-addressed stamped envelope.

Our programs have increased responsibility in:

- ✓ Supporting individuals in meeting assigned volunteer or community service requirements; and
- ✓ Accurately documenting participation hours and service completion to ensure compliance with program requirements and to reduce the risk of a financial sanction against the State of South Dakota.

Thank you for taking the time to complete all the information requested on this form. Your help is very much appreciated. Please contact our office using the information at the top of this page if you have any questions.

Sincerely,

Economic Assistance Staff

To be completed by Economic Assistance Benefits Specialist before sending to volunteer site manager or providing to customer.

<b>Volunteer/Participant Name:</b>	
DOB:        /        /	
<b>Volunteer Program/Site:</b>	<b>Address/Fax:</b>

### VOLUNTEER / COMMUNITY SERVICE VERIFICATION FORM

Volunteer Manager – Please complete entire form & return by email and/or fax to: \_\_\_\_\_

#### Section 1: Organization Information

Organization Name: \_\_\_\_\_

Organization Address: \_\_\_\_\_

Organization Phone Number: \_\_\_\_\_

Organization Email Address: \_\_\_\_\_

Organization Contact Individual Name: \_\_\_\_\_

Type of organization (check one or more):

Nonprofit  Government  School  Faith-Based  Other (complete): \_\_\_\_\_

#### Section 2: Volunteer Verification

Position/Role of Volunteer: \_\_\_\_\_

Service Location (if different than above): \_\_\_\_\_

Volunteer Start Date: \_\_\_\_\_

Volunteer Quit Date (if applicable): \_\_\_\_\_

Please complete for the current month (in which you received this) and the prior 6 months:

Month (current month & last six months)	Did the volunteer complete 80 or more hours of service?	If the volunteer <u>did not</u> complete 80 or more hours, how many hours did the volunteer complete?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Name & Title of Person Completing Form: \_\_\_\_\_

X \_\_\_\_\_

SIGN ABOVE



# HR1 & SD DSS: Medicaid Changes

Community Engagement



# Medical Frailty



# HR 1 and Community Engagement

Community Engagement requirements from HR 1 start **Jan 1, 2027**.

Multiple exclusions:

- An individual in the former foster care children eligibility group
- An American Indian, California Indian, or Alaskan Native; or an individual determined to be eligible as an Indian for the Indian Health Service
- A parent, guardian, caretaker relative, or family caregiver of a dependent child age 13 and under or a disabled individual
- A veteran with a total disability
- **An individual who is medically frail or has special needs (yet to be defined), including an individual:**
  - **Who is blind or disabled**
  - **With a substance use disorder**
  - **With a disabling mental disorder**
  - **With a physical, intellectual, or developmental disability that significantly impairs their ability to perform one or more tasks of daily living, or**
  - **With a serious or complex medical condition**
- An individual who is compliant with any requirements applied by their state's Temporary Assistance for Needy Families program who is part of a household that receives Supplemental Nutrition Assistance Program benefits and is not exempt from a work requirement
- A participant in a drug addiction or alcoholic treatment and rehabilitation program
- An inmate of a public institution
- A woman who is pregnant or entitled to postpartum medical assistance

## Applicable individuals:

- Medicaid Expansion applicants not otherwise excluded



***This section is referred to as “Medical Frailty”***

# CMS Guidance

CMS refers to HR1 as the Working Families Tax Cut (WFTC) legislation. CMS is required to publish a final rule and guidance by June 1, 2026.

## CMS/NAMD Call – February 13, 2026

Verbal guidance that a medical screening tool is necessary versus a “yes/no” question on an application, as a screening tool allows for “auditable self-declaration.” Reiterated the primacy of electronic verification through claims and then either receiving documentation or using auditable self-declaration.



## CMS/NAMD Call – April 8, 2026

CMS Interim Final Rule related to community Engagement Requirements in final stages of review prior to release (sent to OMB on 3/31).

## CMS Slide

### Key Definitions: Medical Frailty Exclusion

- CMS intends to require states to use a definition of medical frailty similar to that described in regulations at 42 CFR § 440.315(f). This regulatory definition includes certain individuals described in the community engagement statute (e.g., those with serious and complex medical conditions or who have a disabling mental disorder). (See slide 36 for comparison.)
  - CMS does not intend to provide states with flexibility to add other types of individuals to the definition of medical frailty, beyond those listed in the statute.
- CMS will expect states to implement an auditable approach to verify medical frailty, in alignment with certain guardrails.
  - E.g., medical claims data review or provider documentation, or completion of a screening tool. States may require new applicants without any claims history to complete a screening tool to verify medical frailty, but CMS expects to require states to confirm that determination via claims data/documentation within 6 months post enrollment.
- CMS will expect states to distinguish between conditions justifying a medical frailty exclusion that are permanent (to be reverified at least every 12 months) vs. temporary (to be reverified at least at every renewal).
- Additional details and guardrails forthcoming.

# Key Components

- 1. Define Medical Frailty** – Utilize prior South Dakota definitions (SNAP etc), CMS or federal references, academic resources, experience of other states, national network of Medicaid agencies, etc. to create South Dakota Medicaid’s working definition of Medical Frailty for the purposes of HR 1.
- 2. Create Medical Frail Screener** - Use the *Draft South Dakota Medical Frailty Definition* to create questions, criteria and data sources that could be that can utilized on enrollment
- 3. Develop Clinical Code List for Data Validation**- Using the *Draft South Dakota Medical Frailty Definition*, identify diagnosis codes, procedure codes, or other system driven indicators that can be used for automated data validation.
- 4. Consider whether option for physician attestation is required, and what that would include**

# South Dakota Medicaid Working Definition (1)

Medical frailty is a clinical condition where a person has significantly reduced strength, endurance, and physiological reserve, making them more vulnerable to illness, injury, or stressors (like infections, surgery, or hospitalization). A person could be considered medically frail by meeting any of the following criteria (subject to official diagnosis and/or verification):

- Blind or disabled
- With substance use disorder
- Disabling mental disorder
- Physical, intellectual, or developmental disability that significantly impairs their ability to perform 1 or more activities of daily living
- With a serious or complex medical condition\*

# Condition Examples that indicate frailty (2/3)

- Solid or hematologic cancer diagnoses with ongoing treatment
- Significant end organ damage such as end-stage liver disease or severe heart failure
- Solid organ transplant status
- Substance abuse disorders
- Autoimmune disorders requiring biologic treatment such as rheumatoid arthritis
- Neurologic disorders such as Alzheimer's or Lewy Body dementia

Preliminary code set has been identified, but need CMS final guidance before it can be finalized

Screener cannot be finalized until the codes are finalized

# Physician attestation (4)

- CMS allows for medical screener at time of enrollment that would then need to be verified with medical claims.
- Unclear at this point whether the medical screener can be repeated at renewal. There is a potential “gap” between enrollment and renewal at 6 months where there may be no claims yet.
- In this gap, physicians may be asked to “attest” to recipient info.

## Potential options:

- Could be “signing off” on the medical screener (validating diagnoses)
- Could be separate form with check boxes for different types of diagnoses or impairments.
- Other ideas?

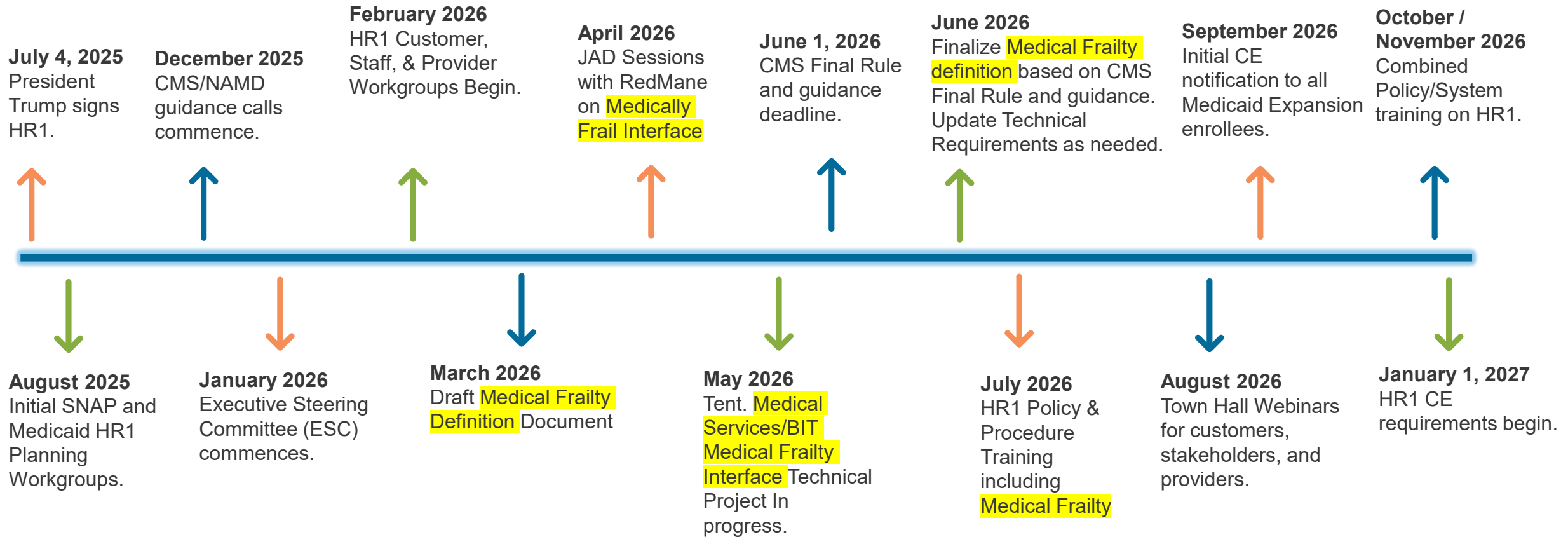
# Medical Frailty Immediate Next Steps

## What needs to happen next?

- ✓ CMS final rule to be released soon
- ✓ Finalize Code set
- ✓ Finalize Medical Screener
- ✓ Determine if physician verification is required
- ✓ Bring back to MAC/BAC for feedback



# Medical Frailty Timeline





# Questions?

[dss.sd.gov](https://dss.sd.gov)





## RHTP RFPs



South Dakota  
Department of  
**Social Services**

# RFPs and Important Dates

RFP	Proposal Released	Proposals Due	Anticipated Award Date	Amount
Project Management	02/25/2026	03/27/2026	04/08/2026	\$ 500,000 – 2 years
Rural Strong Grant	04/02/2026	05/22/2026	06/22/2026	\$ 31,750,000 – Year 1
PACT Methodology and Modeling	02/25/2026	04/03/2026	04/30/2026	\$ 450,000 – Not to exceed
PACT Population Health and Case Management Tool	Q2 Anticipated	TBD	TBD	TBD