

SOUTH DAKOTA MEDICAID
STATE PLAN AMENDMENTS
Through January 10, 2019

SPA #	Title	Effective Date	Date sent to Tribes for Consultation	Public Notice Published	Date Submitted to CMS	Date Approved	Status
14-01	Breast and Cervical Cancer Cost Share Exemption	01/01/14	12/23/13	12/30/13	03/19/14		RAI Review
18-04	Substance Use Disorder Services	07/01/18	05/07/18	05/07/18	08/13/18		RAI Review
18-05	Graduate Medical Education Rural Residency	07/01/18	06/11/18	06/11/18	07/30/18		RAI Review
18-06	Prescription Drug Reimbursement	08/01/18	06/25/18	06/25/18	08/13/18		RAI Review
18-07	Dietician/Nutritionists and Independent Mental Health Practitioners	12/01/18	10/22/18	10/22/18	12/21/18		CMS Review
19-01	Durable Medical Equipment Coverage and Reimbursement	01/01/19	11/19/18	11/19/18			Preparing for Submission
19-02	High Priority Healthcare Population Supplemental Payments	01/01/19	12/10/18	12/10/18			Preparing for Submission
19-03	Health Home Quality Incentive Payments	01/01/19	12/10/18	12/10/18			Preparing for Submission
19-04	Payment Method Clarifications	01/01/19	12/10/18	12/10/18			Preparing for Submission