

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
State/Territory: SOUTH DAKOTA

SECTION 4. GENERAL PROGRAM ADMINISTRATION

<u>Citation</u>	<u>4.18 Recipient Cost Sharing and Similar Charges</u>
42 CFR 447.51 through 447.58	(a) Unless a waiver under 42 CFR 431.55(g) applies, deductibles, coinsurance rates, and co-payments do not exceed the maximum allowable charges under 42 CFR 447.54.
Section 1916(a) and (b) of the Act	(b) Except as specified in items 4.18(b)(4), (5), and (6) below, with respect to individuals covered as categorically needy or as qualified Medicare beneficiaries (as defined in section 1905(p)(1) of the Act) under the plan:  (1) No enrollment fee, premium, or similar charge is imposed under the plan.  (2) No deductible, coinsurance, co-payment, or similar charge is imposed under the plan for the following:  (i) Services to individuals under age 18, or under—  ____ Age 19 ____ Age 20 <u>X</u> Age 21  Reasonable categories of individuals who are age 18 or older, but under age 21, to whom charges apply are listed below, if applicable:  (ii) Services to pregnant women related to the pregnancy or any other medical condition that may complicate the pregnancy.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
State/Territory: SOUTH DAKOTA

SECTION 4. GENERAL PROGRAM ADMINISTRATION

Citation

4.18 Recipient Cost Sharing and Similar Charges (continued)

42 CFR 447.50 through  
447.57

(b) (2) (continued)

(iii) All services furnished to pregnant women.

X Not applicable. Charges apply for services provided to pregnant women unrelated to the pregnancy. Services relating to a pregnancy, post-partum condition, a condition caused by the pregnancy, or a condition that may complicate the pregnancy, including services listed in Supplement to Attachment 3.1-A, page 39, are exempt from cost sharing.

(iv) Services furnished to any individual whose medical assistance for services furnished in an institution or in a home and community-based setting, is reduced by amounts reflecting available income other than required for personal needs.

(v) Emergency services if the services meet the requirements in 42 CFR 447.56(a)(2)(i).

(vi) Family planning services and supplies described in section 1905(a)(4)(C) of the Act.

Section 1916(a) and (j), and  
1916A(b) of the Act

(vii) Services furnished to an individual receiving hospice care, as defined in section 1905(o) of the Act.

(viii) Services furnished to individuals who are receiving Medicaid under 42 CFR 435.213.

(ix) Services furnished to an Indian who is receiving or has ever received an item or service furnished by an Indian health care provider or through referral under contract health services.

(x) Provider-preventable services as defined in §447.26(b).

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
State/Territory: SOUTH DAKOTA

SECTION 4. GENERAL PROGRAM ADMINISTRATION

This page is superseded by SPA 24-0012.

Revision: HCFA-PM-91-4 (BPD) Page 56a  
AUGUST 1991

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
State/Territory: SOUTH DAKOTA

SECTION 4. GENERAL PROGRAM ADMINISTRATION

This page is superseded by SPA 24-0012.

TN No. 24-0012  
Supersedes  
TN No. 91-18

Approval Date

Effective Date 7/01/24

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
State/Territory: SOUTH DAKOTA

SECTION 4. GENERAL PROGRAM ADMINISTRATION

Citation 4.18 Recipient Cost Sharing and Similar Charges (continued)

(b) (continued)

- Section 1916(c) of the Act (4) \_\_\_\_\_ A monthly premium is imposed on pregnant women and infants who are covered under section 1902(a)(10)(A)(ii)(IX) of the Act and whose income equals or exceeds 150 percent of the Federal poverty level applicable to a family of the size involved. The requirements of section 1916(c) of the Act are met. **ATTACHMENT 4.18-D** specifies the method the State uses for determining the premium and the criteria for determining what constitutes undue hardship for waiving payment of premiums by recipients.
- 1902(a)(52) and 1925(b) of the Act (5) \_\_\_\_\_ For families receiving extended benefits during a second 6-month period under section 1925 of the Act, a monthly premium is imposed in accordance with sections 1925(b)(4) and (5) of the Act.
- 1916(d) of the Act (6) \_\_\_\_\_ A monthly premium, set on a sliding scale, is imposed on qualified disabled and working individuals who are covered under section 1902(a)(10)(E)(ii) of the Act and whose income exceeds 150 percent (but does not exceed 200 percent) of the Federal poverty level applicable to a family of the size involved. The requirements of section 1916(d) of the Act are met. **ATTACHMENT 4.18-E** specifies the method and standards the State uses for determining the premium.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
State/Territory: SOUTH DAKOTA

SECTION 4. GENERAL PROGRAM ADMINISTRATION

Citation 4.18 Recipient Cost Sharing and Similar Charges (continued)

42 CFR 447.51 through 447.58 (c) \_\_\_\_\_ Individuals are covered as medically needy under the plan.

(1) \_\_\_\_\_ An enrollment fee, premium, or similar charge is imposed. **ATTACHMENT 4.18-B** specifies the amount of and liability period for such charges subject to the maximum allowable charges in 42 CFR 447.52(b) and defines the State's policy regarding the effect on recipients of non-payment of the enrollment fee, premium, or similar charge.

42 CFR 447.51 through 447.58 (2) No deductible, coinsurance, co-payment, or similar charge is imposed under the plan for the following:

(i) Services to individuals under age 18, or under—

- \_\_\_\_\_ Age 19
- \_\_\_\_\_ Age 20
- \_\_\_\_\_ Age 21

Reasonable categories of individuals who are age 18 or older, but under age 21, to whom charges apply are listed below, if applicable:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
State/Territory: SOUTH DAKOTA

SECTION 4. GENERAL PROGRAM ADMINISTRATION

Citation 4.18 Recipient Cost Sharing and Similar Charges (continued)

42 CFR 447.51 through  
447.58

(c) (2) (continued),

(ii) Services to pregnant women related to the pregnancy or any other medical condition that may complicate the pregnancy.

(iii) All services furnished to pregnant women.

\_\_\_\_\_ Not applicable. Charges apply for services to pregnant women unrelated to the pregnancy.

(iv) Services furnished to any individual who is an inpatient in a hospital, long-term care facility, or other medical institution, if the individual is required, as a condition of receiving services in the institution, to spend for medical care costs all but a minimal amount of his income required for personal needs.

(v) Emergency services if the services meet the requirements in 42 CFR 447.53(b)(4).

1916 of the Act  
P.L. 99-272 (section  
9505)

42 CFR 447.51 through  
447.58

(vi) Family planning services and supplies furnished to individuals of childbearing age.

(vii) Services furnished to an individual receiving hospice care, as defined in section 1905(o) of the Act.

(viii) Services provided by a health maintenance organization (HMO) to enrolled individuals.

\_\_\_\_\_ Not applicable. No such charges are imposed.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
State/Territory: SOUTH DAKOTA

SECTION 4. GENERAL PROGRAM ADMINISTRATION

Citation 4.18 Recipient Cost Sharing and Similar Charges (continued)

42 CFR 447.51 through 447.58 (c) (continued)

- (3) Unless a waiver under 42 CFR 431.55(g) applies, nominal deductible, coinsurance, co-payment, or similar charges are imposed for services that are not excluded from such charges under item (b)(2) above.

\_\_\_\_\_ Not applicable. No such charges are imposed.

- (i) For any service, no more than one type of charge is imposed.
- (ii) Charges apply to services furnished to the following age groups:

\_\_\_\_\_ 18 or older  
\_\_\_\_\_ 19 or older  
\_\_\_\_\_ 20 or older  
\_\_\_\_\_ 21 or older

Reasonable categories of individuals who are 18 years of age, but under 21, to whom charges apply are listed below, if applicable:

Revision: HCFA-PM-91-4 (BPD) Page 56f  
AUGUST 1991

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
MEDICAL ASSISTANCE PROGRAM  
State/Territory: SOUTH DAKOTA

SECTION 4. GENERAL PROGRAM ADMINISTRATION

This page is superseded by SPA 24-0012.

TN No. 24-0012  
Supersedes  
TN No. 91-18

Approval Date

Effective Date 7/01/24