

Alternative Benefit Plan

State Name: South Dakota	Attachment 3.1-L- OMB Control N	Number: 09381148
Transmittal Number: SD - 23 - 0001		
General Assurances		ABP10
Economy and Efficiency of Plans		
 ✓ The state/territory assures that Alternative Benefit Plan coverage requirements and other economy and efficiency principles that through which the coverage and benefits are obtained. Economy and efficiency will be achieved using the same approximately. 	would otherwise be applicable to the services or deliv	
Compliance with the Law		
The state/territory will continue to comply with all other provis state/territory plan under this title.	ions of the Social Security Act in the administration of	of the
✓ The state/territory assures that Alternative Benefit Plan benefits CFR 430.2 and 42 CFR 440.347(e).	s designs shall conform to the non-discrimination requ	uirements at 42
The state/territory assures that all providers of Alternative Bend the Base Benchmark Plan and/or the Medicaid state plan.	efit Plan benefits shall meet the provider qualification	requirements of

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 5 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Approval Date: May 23, 2023

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