

## Alternative Benefit Plan

State Name: South Dakota	Attachment 3.1-L- OMB Control Number: 09381148	
Transmittal Number: SD - 23 - 0001		
Benefits Assurances ABP7		
EPSDT Assurances		
If the target population includes persons under 21, please complete Prescription Drug Coverage Assurances below.	the following assurances regarding EPSDT. Otherwise, skip to the	
The alternative benefit plan includes beneficiaries under 21 years o	of age. Yes	
The state/territory assures that the notice to an individual include (42 CFR 440.345).	des a description of the method for ensuring access to EPSDT services	
The state/territory assures EPSDT services will be provided to state/territory plan under section 1902(a)(10)(A) of the Act.	individuals under 21 years of age who are covered under the	
Indicate whether EPSDT services will be provided only throug additional benefits to ensure EPSDT services:	gh an Alternative Benefit Plan or whether the state/territory will provide	
○ Through an Alternative Benefit Plan.		
• Through an Alternative Benefit Plan with additional benefits to ensure EPSDT services as defined in 1905(r).		
· · · · · · · · · · · · · · · · · · ·	benefits will be provided, how access to additional benefits will be informed of these processes in order to ensure individuals have access to	
Indicate whether additional EPSDT benefits will be provide	ded through fee-for-service or contracts with a provider:	
State/territory provides additional EPSDT benefits through fee-for-service.		
<ul> <li>State/territory contracts with a provider for additi</li> </ul>	onal EPSDT services.	
Other Information regarding how ESPDT benefits will be provided	d to participants under 21 years of age (optional):	
The EPSDT benefit includes, but is not limited to, reimbursement	for the items listed in Attachment 4.19-B, item 4b.	
Prescription Drug Coverage Assurances		
The state/territory assures that it meets the minimum requirement implementing regulations at 42 CFR 440.347. Coverage is at 1 category and class or the same number of prescription drugs in	least the greater of one drug in each United States Pharmacopeia (USP)	
The state/territory assures that procedures are in place to allow prescription drugs when not covered.	a beneficiary to request and gain access to clinically appropriate	
l <del></del>	cription drugs covered under an Alternative Benefit Plan, it meets the ulations at 42 CFR 440.345, except for those requirements that are emitted under section 1937 of the Act.	
The state/territory assures that when conducting prior authorization of prescription drugs under an Alternative Benefit Plan, it complies with prior authorization program requirements in section 1927(d)(5) of the Act.		

Approval Date: May 23, 2023

Effective Date: July 1, 2023 1 of 2



## **Alternative Benefit Plan**

Other Benefit Assurances		
	The state/territory assures that substituted benefits are actuarially equivalent to the benefits they replaced from the base benchmark plan, and that the state/territory has actuarial certification for substituted benefits available for CMS inspection if requested by CMS.	
<b>V</b>	The state/territory assures that individuals will have access to services in Rural Health Clinics (RHC) and Federally Qualified Health Centers (FQHC) as defined in subparagraphs (B) and (C) of section 1905(a)(2) of the Social Security Act.	
<b>✓</b>	The state/territory assures that payment for RHC and FQHC services is made in accordance with the requirements of section 1902(bb) of the Social Security Act.	
<b>✓</b>	The state/territory assures that it will comply with the requirement of section 1937(b)(5) of the Act by providing, effective January 1, 2014, to all Alternative Benefit Plan participants at least Essential Health Benefits as described in section 1302(b) of the Patient Protection and Affordable Care Act.	
<b>✓</b>	The state/territory assures that it will comply with the mental health and substance use disorder parity requirements of section 1937(b)(6) of the Act by ensuring that the financial requirements and treatment limitations applicable to mental health or substance use disorder benefits comply with the requirements of section 2705(a) of the Public Health Service Act in the same manner as such requirements apply to a group health plan.	
<b>✓</b>	The state/territory assures that it will comply with section 1937(b)(7) of the Act by ensuring that benefits provided to Alternative Benefit Plan participants include, for any individual described in section 1905(a)(4)(C), medical assistance for family planning services and supplies in accordance with such section.	
<b>✓</b>	The state/territory assures transportation (emergency and non-emergency) for individuals enrolled in an Alternative Benefit Plan in accordance with 42 CFR 431.53.	
<b>✓</b>	The state/territory assures, in accordance with 45 CFR 156.115(a)(4) and 45 CFR 147.130, that it will provide as Essential Health Benefits a broad range of preventive services including: "A" and "B" services recommended by the United States Preventive Services Task Force; Advisory Committee for Immunization Practices (ACIP) recommended vaccines; preventive care and screening for infants, children and adults recommended by HRSA's Bright Futures program/project; and additional preventive services for women recommended by the Institute of Medicine (IOM).	

## 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.

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Effective Date: July 1, 2023 2 of 2