



South Dakota
Department of
Social Services

DEPARTMENT OF SOCIAL SERVICES

DIVISION OF MEDICAL SERVICES
700 GOVERNORS DRIVE
PIERRE, SD 57501-2291
PHONE: 605.773.3495
FAX: 605.773.5246
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May 28, 2024

RE: South Dakota Medicaid State Plan Amendment #SD-24-0010

South Dakota Department of Social Services intends to make changes to the South Dakota Medicaid State Plan to update 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. The supplemental payment amounts are listed below:

Inpatient Provider	Amount
Abbot House Inc	\$1,616
Aurora Plains Academy	\$9,167
Avera	\$359,552
Bennett County	\$13,320
Black Hills Surgical	\$25,597
Mobridge Regional	\$7,605
Monument Health	\$611,528
Lutheran Social Services	\$2,660
Our Home	\$3,833
Rushmore Ambulatory Surgery	\$4,898
Sanford	\$438,720
Sioux Falls Children's Home	\$8,913

Nursing Facility Provider	Amount
Avera	\$62,377
Bennett County	\$27,289
Monument Health	\$3,209
Sanford	\$45,292

We intend to make this SPA effective June 1, 2024. The SPA amends page 14 of Attachment 4.19-A, and amends page 17b of Attachment 4.19-D of the South Dakota Medicaid State Plan.

The department estimates the fiscal impact will be \$650,556 in State funds and \$975,024 in Federal funds, totaling \$1,625,577 in Federal Fiscal Year 2024 (June 1, 2024 to September 30, 2024) and \$0.00 in Federal Fiscal Year 2025 (October 1, 2024 to September 2025).

The SPA is available to view on the department's website at <http://dss.sd.gov/medicaid/medicaidstateplan.aspx>. Copies of the proposed SPA pages are also available at the Department of Social Services, Division of Medical Services. Written requests for a copy of these changes, and corresponding comments, may be emailed to MedicaidSPA@state.sd.us or sent to:

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The public comment period will start May 28, 2024, and end June 28, 2024.

Sincerely,

Matt Ballard

Matthew Ballard
Deputy Director
Division of Medical Services
South Dakota Department of Social Services

CC: Matt Althoff, Cabinet Secretary
Heather Petermann, Director

PUBLIC NOTICE

South Dakota Medicaid Program

Notice is hereby given that the South Dakota Department of Social Services intends to make changes to the South Dakota Medicaid State Plan to update 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. The supplemental payment amounts are listed below:

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Medicaid State Plan Amendment Proposal

Transmittal Number: SD-24-0010

Effective Date: 06/1/2024

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.

Area of State Plan Affected: Attachment 4.19-A and Attachment 4.19-D

Page(s) of State Plan Affected: Amends page 14 of Attachment 4.19-A, and amends page 17b of Attachment 4.19-D

Estimate of Fiscal Impact, if Any: FFY24: \$1,625,577
FFY25: \$0.00

Reason for Amendment: Update care coordination provider list and supplemental payment amounts.

The Department of Social Services (DSS) supports ensuring access and proper coordination of care. The department will make supplemental payments to further these goals to the following private providers in the following amounts:

Provider	Amount
Abbot House Inc	\$1,616
Aurora Plains Academy	\$9,167
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Sioux Falls Children's Home	\$8,913

Supplemental payments will be made using data calculated for the period of January 1, 2023 to December 31, 2023. Payments for the supplemental payment period will be made during the last quarter of the state fiscal year.

The payment will be made to the provider through the MMIS system. Payments will be made directly to the qualifying provider through a supplemental payment mechanism and will appear on their remittance advice. Each provider will receive written notification at the time of payment of the payment amount from the Division of Medical Services.

Payments made in error will be recovered via a supplemental recovery mechanism and will appear on the provider's remittance advice. The agency will notify the provider in writing explaining the error prior to the recovery. The Federal share of payments made in excess will be returned to CMS in accordance with 42 CFR Part 433, Subpart F.

The maximum aggregate payment to all qualifying providers shall not exceed the available upper payment limit in accordance with 42 CFR 447.272.

TN # 24-0010
Supersedes
TN # 23-0011

Approval Date

Effective Date 6/1/24

The Department of Social Services (DSS) supports ensuring access and proper coordination of care. The department will make supplemental payments to further these goals to the following private providers in the following amounts:

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Approval Date

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