

May 2024

You don't have to be a physician to know how important health and wellness around pregnancy is. Gestation is hard work and is a high-risk time for both participants. Optimizing the health of both is essential to good outcomes. South Dakota Medicaid is in a unique perspective in South Dakota since it is the payer for a significant number of pregnancies.

When Medicaid expansion became effective July 1, 2023, pregnant women in the previously limited coverage pregnancy group were transitioned to a full coverage benefits group which meant more resources could be put towards the care of mothers for their overall health, not just for pregnancy related needs. In addition, the postpartum coverage group was transitioned to a full coverage group with 12 months of coverage. To continue the trend of putting more focus and resources into care for healthy moms, (not just pregnancy care)\_South Dakota Medicaid has created a pregnancy focused care management program that went live April 1, 2024. As of April 1, 112 providers have enrolled to participate in this program.

If you were one of the stakeholders that participated in any of the (many!) calls to provide feedback as we worked through the many iterations, we thank you! If you have already signed up, we are so excited to partner with you as we work together towards better outcomes for mothers and babies in the state of South Dakota. We will also be engaging with a vendor to help identify best ways to reach new moms (including naming for the initiative) and address barriers to care. For more information, please check out this page. An additional thank you to the Department of Health for their partnership through the Bright Start and Pregnancy Care programs in this endeavor. This is certainly a great example of how resources from different state agencies can really come together and complement each other when aligned towards common goals.

## **Updates:**

- 1. **Iron-** Over the counter oral iron can be written as a prescription and covered for pregnant women aged 12-50 at outpatient pharmacies.
- 2. **Urgent Care Billing** As a reminder, South Dakota Medicaid will pay for up to four medically necessary urgent care visits per plan year (July 1 through June 30) per recipient without a referral from the recipient's Primary Care Provider (PCP) or Health Home (HH) Provider. Please note that urgent care visits in an emergent setting still require a referral for recipients in the PCP or HH programs.

For the claim to be exempt from the referral requirement, the provider must list a "U" or a "2" in Block 10d of the CMS 1500 form. Block 17b may be left blank. When billing for an urgent care service electronically, enter "Y" in 24c (SV109) and use the situational loop 2300 REF\*4N\*1. For additional guidance regarding completing a claim please refer to the applicable claim instructions manual on Medicaid's website.

Providers may check the number of urgent care visits a recipient has had billed to Medicaid on the Provider Portal using the service limits function.

- 3. Cognitive Assessment and Care Planning- To improve access to diagnosis of and care planning for recipients with Alzheimer's and dementia, South Dakota Medicaid has recently implemented coverage and reimbursement for Cognitive Assessments and Care Planning (CPT code 99483) up to once every 180 days if medically necessary. This visit may include: evaluating cognition, assessing function/decision-making capacity, reviewing/reconciling prescription medications, measuring behavioral symptoms, evaluating safety (including driving ability), identifying and assessing a primary caregiver, developing advance care directives, creating a care plan, including referral to community resources. Please refer to the <a href="Physician Services Manual">Physician Services Fee Schedule</a> for additional information and reimbursement rates.
- 4. **Updated Prior Authorizations-** South Dakota Medicaid continues to review and develop prior authorization criteria for physician administered drugs, vaccines and immunizations. Please take note of the recent and upcoming changes to medications that will require prior authorization from South Dakota Medicaid: Teplizumab (Tzield), Evinacumab (Evkeeza), Sutimlimab (Enjaymo), Pegloticase (Krystexxa), Brexanolone (Zulresso) and Esketamine (Spravato).

For a full list of medications that require prior authorization, please see the <u>Physician Administered Drugs</u>, <u>Vaccines and Immunizations page</u> on the prior authorization section of our website.

Clarissa Barnes, MD, MBA, FACP

