

DEPARTMENT OF SOCIAL SERVICES

DIVISION OF MEDICAL SERVICES

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Strong Families - South Dakota's Foundation and Our Future

ATTENTION: South Dakota Medicaid Providers

FROM: South Dakota Medicaid

RE: Appeals

On June 1, 2018 South Dakota Medicaid added the “Add Communication” tab for providers to submit Claim Reviews and Coverage Requests in the Provider Online Portal. This feature has allowed providers, to submit, edit, and view results of reviews and requests directly in the Portal. While South Dakota Medicaid currently allows this communication to be submitted on paper, we will only be allowing electronic submission starting **October 1, 2018**.

There was a webinar held in June and the Skype link was posted. You can find additional information about how to login to the portal and submit appeals here: [Medicaid portal](#)

Also, effective July 1, 2018 claims review will only be considered if they are received within 6 months of the date of service or within 3 months of the date a claim was denied. A claim review should only be submitted if a provider does not agree with a denial determination. As a reminder per [ARSD 67:16:35:03](#) a provider may only submit claims for those supplies and services provided which the provider knows, or should have known are covered by South Dakota Medicaid.

In addition, effective July 1, 2018 South Dakota Medicaid implemented a new review process for provider requested diagnosis and procedure code coverage requests and fee schedule changes. Coverage requests and fee schedule requests are not claim specific and will not be used to re-adjudicate specific claims. These requests will be reviewed on a quarterly basis. Only requests from enrolled providers will be considered. If the request is approved, you will be notified in writing on the portal.

Thank you,
South Dakota Medicaid