

DEPARTMENT OF SOCIAL SERVICES

DIVISION OF MEDICAL SERVICES

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Strong Families - South Dakota's Foundation and Our Future

March 28, 2019

ATTENTION: South Dakota Medicaid Providers

FROM: South Dakota Medicaid

RE: April 1, 2019 Updates

Senate Bill 191, the General Appropriations Act, provides the following increases effective for April 1, 2019 dates of service and ongoing in FY2019.

1.5 percent increase for Medicaid providers including:

- Hospitals
- Physicians
- Dentist
- Optometrists/Ophthalmologist
- DME (except CPTs subject to the federal Upper Payment Limit)
- EPSDT

4 percent increase for other targeted services including:

- Community Mental Health Centers
- Substance Use Disorder Agencies
- Personal Care Services
- Child Private Duty Nursing
- Select In-Home Services:
 - CPT S9123
 - CPT S9122
 - CPT S9124
- Select Outpatient Psychiatric:
 - CPT 90791
 - CPT 90832
 - CPT 90837
- Select Emergency Transportation:
 - CPT A0429
 - CPT A0430
 - CPT A0431

6.5 percent increase for Community Support Providers (Developmental Disability)

10 percent increase for Nursing Homes

South Dakota Medicaid has revised the fee schedules and updated the fee schedules with rates effective April 1, 2019. The fee schedules are available online: <http://dss.sd.gov/medicaid/providers/feeschedules/>

The Department of Social Services does not exclude, deny benefits to, or otherwise discriminate against any person on the basis of actual or perceived race, color, religion, national origin, sex, age, gender identity, sexual orientation or disability in admission or access to, or treatment or employment in its programs, activities, or services. For more information about this policy or to file a Discrimination Complaint you may contact: Discrimination Coordinator, Director of DSS Division of Legal Services, 700 Governor's Drive, Pierre SD 57501, 605-773-3305.

ATENCIÓN: is habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-305-9673 (TTY: 711).

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-305-9673 (TTY: 711).

In addition to the above changes, South Dakota Medicaid has added CPT codes A0426 and A0428 to the transportation fee schedule. Please be advised that non-emergent ground ambulance claims with a date of service of April 1, 2019 or later must be submitted using procedure code A0426, ALS non-emergency, or A0428, BLS non-emergency, as applicable. Non-emergent ground ambulance services must not be billed using A0427 or A0429.

Information regarding when non-emergent ground ambulance services are covered is provided in the Ground Ambulance provider manual, which is available on our website at <https://dss.sd.gov/medicaid/providers/billingmanuals/>. The Ground Ambulance manual was recently updated to a standalone manual as part of provider manual update project.

If you have any questions, please contact the Division of Medical Services at 1-800-452-7691.