

**South Dakota Medicaid**  
**Outpatient Hospital Prospective Payment System Fee Schedule**  
Effective July 1, 2020

Indicator	Medicare Description	South Dakota Medicaid Use of Payment Status Indicator
A	Services furnished to a hospital outpatient that are paid under a fee schedule or payment system other than OPPS.	Paid on a fee schedule basis or at a percent of charge if no fee is established.
B	Codes that are not recognized by OPPS when submitted on an outpatient hospital Part B bill type (12x and 13x).	Not paid under OPPS.
C	Inpatient Procedures	Not paid under OPPS.
D	Discontinued Codes	Not paid under OPPS or any other payment system.
E1	Items, Codes, and Services: *Not covered by any Medicare outpatient benefit category *Statutorily excluded by Medicare. *Not reasonable and necessary.	Not paid under OPPS or any other payment system.
E2	Items, Codes, and Services: For which pricing information and claims data are not available.	Not paid under OPPS or any other payment system.
F	Corneal Tissue Acquisition; Certain CRNA Services and Hepatitis B Vaccines	Not paid under OPPS. Paid on a fee schedule basis or at a percent of charge if no fee is established.
G	Pass-Through Drugs and Biologicals	Paid under OPPS; Separate APC payment includes pass-through amount.
H	Pass-Through Device Categories	Paid at a percent of charge.
J1	Hospital Part B Services Paid Through a Comprehensive APC	Paid under OPPS; all covered services on the claim are packaged with the primary "J1" service for the claim, except services with OPPS status indicator of "F", "G", "H", "L" and "U"; ambulance services; diagnostic and screening mammography; all preventive services; and certain inpatient services.
J2	Hospital Part B Services That May Be Paid Through a Comprehensive APC	Paid under OPPS; fee schedule displays APC assignments when services are separately payable.
K	Nonpass-Through Drugs and Nonimplantable Biologicals, Including Therapeutic Radiopharmaceuticals	Paid under OPPS; Separate APC payment.
L	Influenza Vaccine; Pneumococcal Pneumonia Vaccine	Not paid under OPPS. Paid on a fee schedule basis or at a percent of charge if no fee is established.

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M	Items and Services Not Billable to the Fiscal Intermediary	Not paid under OPSS.
N	Items and Services Packaged into APC Rates	Paid under OPSS; Payment is packaged into payment for other services, including outliers. Therefore, there is no separate APC payment.
P	Partial Hospitalization	Paid under OPSS; Per diem APC payment.
Q1	STV-Packaged Codes	Paid under OPSS; Fee schedule displays APC assignments when services are separately payable.
		(1) Packaged APC payment if billed on the same claim as a HCPCS code assigned status indicator "S", "T", or "V".
		(2) Composite APC payment if billed with specific combinations of services based on OPSS composite-specific payment criteria. Payment is packaged into a single payment for specific combinations of services.
(3) In other circumstances, payment is made through a separate APC payment.		
Q2	T-Packaged Codes	Paid under OPSS; Fee schedule displays APC assignments when services are separately payable.
		(1) Packaged APC payment if billed on the same claim as a HCPCS code assigned status indicator "T".
		(2) In other circumstances, payment is made through a separate APC payment.

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Q3	Codes That May Be Paid Through a Composite APC	Paid under OPPS; Fee schedule displays APC assignments when services are separately payable.
		Addendum M displays composite APC assignments when codes are paid through a composite APC.
		(1) Composite APC payment based on OPPS composite-specific payment criteria. Payment is packaged into a single payment for specific combinations of services.
		(2) In other circumstances, payment is made through a separate APC payment or packaged into payment for other services.
Q4	Conditionally Packaged Laboratory Tests	Paid under OPPS or fee schedule.
		(1) Packaged APC payment if billed on the same claim as a HCPCS code assigned published status indicator "J1", "J2", "S", "T", "V", "Q1", "Q2", or "Q3".
		(2) In other circumstances, laboratory tests should have a status indicator of "A" and payment is made under the fee schedule.
R	Blood and Blood Products	Paid under OPPS; Separate APC payment.
S	Significant Procedure, Not Discounted when Multiple	Paid under OPPS; Separate APC payment.
T	Significant Procedure, Multiple Reduction Applies	Paid under OPPS; Separate APC payment.
U	Brachytherapy Sources	Paid under OPPS; Separate APC payment.
V	Clinic or Emergency Department Visit	Paid under OPPS; Separate APC payment.
Y	Non-Implantable Durable Medical Equipment	Not paid under OPPS.