

**South Dakota Medicaid**  
**Assisted Daily Living Services Waiver Fee Schedule**  
 Effective July 1, 2022

Providers must bill for services at their usual and customary charge. The fee listed below is the maximum allowable amount a provider may be reimbursed.

Providers should refer to South Dakota Medicaid's provider manual webpage for applicable coverage criteria and claim instructions: <https://dss.sd.gov/medicaid/providers/billingmanuals/>. For information regarding requesting a coverage or rate change refer to the Reconsideration, Reviews, Coverage Requests, and Fair Hearing provider manual.

<b>Code</b>	<b>Description</b>	<b>Rate</b>
T1019	Personal Care Services-Provider Managed, per 15 minutes	\$ 8.49
S5125	Personal Care Services-Self Directed, per 15 minutes	\$ 8.49
S5115	Home Care Training, nonfamily, per 15 minutes	\$ 11.14
S5161	Emergency Response System, service fee, per month	\$ 45.00
T1000	Private Duty/Independent Nursing Service(s) - licensed, up to 15 minutes	\$ 19.56
T1005	Respite, per 15 minutes	\$ 7.33
A9900	Specialized Medical Equipment & Supplies	Billed Charges
T2039	Vehicle Modifications	Billed Charges
S5165	Environmental Accessibility Adaptations	Billed Charges