

South Dakota Medicaid Benefits Guide

Learn what benefits are included in your Medicaid coverage and who you need to get them from. Care Management Programs include the Primary Care Provider program, Care Connect, and BabyReady.

Care Management Services

These services must be provided by your Care Management provider or referred by them.

- Primary Care and Preventative Services
- Specialty Services (e.g. Cardiologist, Dermatologist, Ophthalmologist, etc.)
- Acute/Urgent Care Services*
- Lab and X-Ray
- Pregnancy and Postpartum Services
- Inpatient and Outpatient Hospital Services
- Medical Equipment and Supplies
- Occupational, Physical, and Speech Therapy
- Dietitian and Nutritionist Services
- Diabetes Self-Management Training
- Surgical Services
- Audiology Services
- Doula Services

Non-Care Management Services

These services do **not** need to be provided by your Care Management provider or referred by them.

- Prescription Drugs
- Immunizations
- Emergency Services*
- Family Planning Services
- Dental Services
- Optometry Services and Eyeglasses
- Ground and Air Ambulance Services
- Non-emergency Transportation
- Mental Health Services
- Substance Use Disorder Treatment
- Podiatry Services
- Chiropractic Services
- Community Health Worker Services

Frequently Asked Questions

What are Care Management programs?

Medicaid has three care management programs: Primary Care Provider, Care Connect, and BabyReady. Most Medicaid recipients are in one of the programs. The programs provide you with a single provider (physician, physician assistant, or nurse practitioner, or certified nurse midwife) to help coordinate your care.

How do I choose a provider?

You can choose or change your provider online at <https://dss.sd.gov/pcphhselection>. If you are new to Medicaid and do not choose a provider, one will be assigned to you.

Who is my Care Management Provider?

After a provider is chosen or assigned, South Dakota Medicaid will send you a letter with the name of your provider. If you do not know who your provider is, you may contact your Benefit Specialist at your local DSS office, call 605.773.3495, or make a selection online at <https://dss.sd.gov/pcphhselection>.

When should I see my Care Management Provider?

Medicaid recommends establishing care with a new provider as soon as reasonable. Establishing care is important in case you need a referral from the provider.

Do I need a referral to go to an Acute/Urgent care clinic?

Recipients can have up to four acute or urgent care visits in a plan year without a referral (July 1-June 30). After four visits, all acute or urgent care visits require a referral from your care management provider. It is recommended that you notify your Care Management provider of all acute or urgent visits.

Do I need a referral to go to the Emergency Room?

No, you do not need a referral from your Care Management provider to go to the emergency room for a true emergency. If you use the emergency room for a non-emergency, you may have to pay the bill. Only use the emergency room for serious health problems that may cause lasting injury or death, such as severe bleeding, chest pain, shortness of breath, severe pain, severe allergic reaction or loss of consciousness.

Disclaimer: This page is an overview of benefits covered by South Dakota Medicaid and an indication of which require a referral from a Care Management provider when recipients are enrolled in a Care Management program. It is not a guarantee of coverage.