At the time of this reporting, Care Coordination Agreements (CCAs) have been fully executed between IHS and each of the providers/systems listed below.

Claims subject to the CCAs will be submitted for federal funding at 100% Federal Medical Assistance Percentage (FMAP) reimbursement rate, rather than the traditional FMAP rate for medical and pharmacy services (currently 64.89% federal).

The difference between what the federal government will now fund at 100% leveraging the “Received Through” policy vs. what the federal government would otherwise have funded, is state general fund savings to the South Dakota Medicaid budget.

State general fund Fiscal Year-to-Date savings to South Dakota Medicaid are detailed below.

Green targets are at or above estimated projections based on completed payrolls YTD. Current threshold = 64.15% (34/53)

The savings leveraged will be used to fund recommendations of the SD Health Care Solutions Coalition, increase provider rates and share savings with providers.

Actual Expenditures include general funds and unique recipients for services provided to all American Indian Medicaid recipients at that provider. Not all actuals would meet the criteria for received-through care and would not qualify for savings through this policy.

SFY2021 final report can be found [here](#).