



South Dakota Department of Social Services

DEPARTMENT OF SOCIAL SERVICES

DIVISION OF MEDICAL SERVICES 700 GOVERNORS DRIVE PIERRE, SD 57501-2291 PHONE: 605.773.3495 FAX: 605.773.5246 WEB: dss.sd.gov

CARE MANAGEMENT PROVIDER RESIGNATION FORM

*Please complete this form at least 30 days prior to the departure of a provider and submit to CMforms@state.sd.us

PROVIDER NAME: PROVIDER ID#

BILLING NPI: SERVICING NPI:

FINAL DATE AT THE CLINIC:

INTENTIONS FOR PCP AND/OR CARE CONNECT CASELOADS

- OPTION 1: Transfer all recipients to 1 provider within the facility.
OPTION 2: Close the caseload and send recipients a letter to select a new provider.

If selecting option 1 Please complete the following for the new provider:

PROVIDER NAME: PROVIDER ID#

BILLING NPI: SERVICING NPI:

INTENTIONS FOR BABYREADY CASELOAD

BabyReady caseloads are required to be transferred and can not be closed.

Please complete the following for the new provider:

PROVIDER NAME: PROVIDER ID#

BILLING NPI: SERVICING NPI:

NAME OF PERSON COMPLETING FORM:

EMAIL ADDRESS:

REQUIRED STEP: CHECK THIS BOX TO CONFIRM THE PROVIDER ENROLLMENT RECORD FOR THE DEPARTING PROVIDER HAS BEEN MODIFIED TO INCLUDE END DATES FOR THE PCP STATUS AND LOCATION.

FOR OFFICE USE ONLY:

CARE MANAGEMENT PANELS END DATE:

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, sexual orientation or disability in admission or access to, or treatment or employment in its programs, activities, or services.

ATENCIÓN: si 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).