

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



Center for Medicaid and CHIP Services (CMCS)

OCT 23 2012

Ms. Kim Malsam-Rysdon
Department Secretary
Department of Social Services
Division of Medical Services
700 Governors Drive
Pierre, SD 57501-2291

Re: South Dakota 12-011

Dear Ms. Malsam-Rysdon:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 12-011. Effective for services on or after July 4, 2012, this amendment updates State plan language by modifying the reimbursement methodology for non-State owned nursing facilities. Specifically, the amendment provides for an optional, prior-authorized, nursing facility reimbursement add-on for individuals with multiple, chronic complex medical conditions requiring specialized medical equipment and or/or increased staff resources.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(13), 1902(a)(30) and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C. We are pleased to inform you that Medicaid State plan amendment 12-011 is approved effective July 4, 2012. We are enclosing the CMS-179 and the amended plan pages.

If you have any questions, please contact Christine Storey at (303) 844-7044

Sincerely,

A handwritten signature in black ink that reads "Cindy Mann". The signature is written in a cursive style.

Cindy Mann
Director, CMCS