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**State/Territory Name: South Dakota**

**State Plan Amendment (SPA) #: 18-0007**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) 179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
1961 Stout Street, Room 08-148  
Denver, CO 80294



**Denver Regional Operations Group**

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May 30, 2019

William Snyder, Medicaid Director  
South Dakota Department of Social Services  
Richard F. Kneip Building  
700 Governors Drive  
Pierre, SD 57501-2291

Dear Mr. Snyder:

CMS has reviewed the proposed State Plan Amendment (SPA) submitted under transmittal number (TN) 18-007 and approved as SD-18-0007. This SPA amends the coverage and reimbursement policies for Other Licensed Practitioners, specifically pertaining to mental health practitioners, nutritionists, and dieticians in South Dakota's State Plan.

Please be informed that this State Plan Amendment was approved today with an effective date of December 1, 2018. We are enclosing the CMS-179 and the amended plan pages(s).

If you have any questions concerning this amendment, please contact Kirstin Michel at (303) 844-7036.

Sincerely,



Mary Marchioni  
Acting Deputy Director

cc: Brenda Tidball-Zeltinger, Deputy Secretary  
Sarah Aker, South Dakota

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b> <b>FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>	1. TRANSMITTAL NUMBER: SD-18-007	2. STATE: South Dakota
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE December 1, 2018	
5. TYPE OF PLAN MATERIAL ( <i>Check One</i> ):		
<input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT		


**COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate Transmittal for each amendment*)**

6. FEDERAL STATUTE/REGULATION CITATION:  42 CFR 440.60 and 42 CFR 447.201	7. FEDERAL BUDGET IMPACT: a. FFY 2019: \$ 396,579.00 b. FFY 2020: \$ 396,579.00
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  Attachment 3.1-A page 11 and Attachment 4.19-B introduction page 1 and page 11	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT ( <i>If Applicable</i> ):  Attachment 3.1-A page 11 and Attachment 4.19-B introduction page 1 and page 11


10. SUBJECT OF AMENDMENT:  
  
The State Plan Amendment (SPA) clarifies coverage and reimbursement of independent mental health practitioner services including the providers allowed to provide services. The proposed SPA clarifies coverage for medically necessary medical nutrition therapy provided by nutritionists and dieticians and provides a corresponding reimbursement methodology.

11. GOVERNOR'S REVIEW (*Check One*):

GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED:  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO:  DEPARTMENT OF SOCIAL SERVICES DIVISION OF MEDICAL SERVICES 700 GOVERNORS DRIVE PIERRE, SD 57501-2291
13. TYPED NAME:  Lynne A. Valenti	
14. TITLE: Cabinet Secretary	
15. DATE SUBMITTED: December 21, 2018      Resubmission March 15, 2018 & March 18, 2019	

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED: December 21, 2018	18. DATE APPROVED: May 30, 2019
<b>PLAN APPROVED - ONE COPY ATTACHED</b>	
19. EFFECTIVE DATE OF APPROVED MATERIAL: December 1, 2018	20. SIGNATURE OF REGIONAL OFFICIAL: 
21. TYPED NAME: Mary Marchioni	22. TITLE: Acting Deputy Director, DROG

23. REMARKS:

## SUPPLEMENT TO ATTACHMENT 3.1-A

6d. Other Licensed Practitioner Services

1. Services of a licensed physician assistant. See service limitations under section 5a of this attachment.
2. Services of a licensed certified nurse practitioner other than pediatric or family nurse practitioners. See service limitations under section 5a of this attachment.
3. Services of a licensed certified registered nurse anesthetist. See service limitations under section 5a of this attachment.
4. Services of a licensed registered nurse or licensed practical nurse which are determined medically necessary by the Department, and are limited to no more than 18 hours of nursing during a calendar quarter.
5. Services of a licensed psychologist, licensed professional counselor – mental health, licensed professional counselor working toward a mental health designation, licensed clinical nurse specialist, licensed certified social worker – PIP, licensed certified social work – PIP candidate, or licensed marriage and family therapist provided within their scope of licensure.
6. Services of a licensed nutritionist and licensed dietician provided within their scope of licensure.

ATTACHMENT 4.19-B  
PAYMENTS FOR MEDICAL AND REMEDIAL CARE AND SERVICES

6d. Other Practitioner Services

1. Physician Assistants. Reimbursement will be 90% of the fee established under Physician Services, Section 5 of this attachment.
2. Nurse Practitioners. Reimbursement will be 90% of the fee established under Physician Services, Section 5 of this attachment.
3. Certified Registered Nurse Anesthetists. Payment will be made following the anesthesia service provisions of Section 5 of this attachment.
4. Nursing Services. Payment will be based on reasonable and allowable costs for the service provided.
5. Independent Mental Health Practitioners. Payment will be the lower of the provider's usual and customary charge or the amount established on the State agency's fee schedule website <https://dss.sd.gov/medicaid/providers/feeschedules/dss/>. The rates are effective for services on or after the date listed on the Attachment 4.19-B Introduction Page.
6. Nutritionist and Dietician Services. Payment will be the lower of the provider's usual and customary charge or the amount established on the State agency's fee schedule website <https://dss.sd.gov/medicaid/providers/feeschedules/dss/>. The rates are effective for services on or after the date listed on the Attachment 4.19-B Introduction Page.

ATTACHMENT 4.19-B  
INTRODUCTION

Payment rates for the services listed below are effective for services provided on or after the corresponding date. Fee schedules are published on the Department's website at <http://dss.sd.gov/medicaid/providers/feeschedules/>. Effective dates listed on the introductory page supersede the effective dates listed elsewhere in Attachment 4.19-B. Unless otherwise noted in the referenced state plan pages, reimbursement rates are the same for both governmental and private providers.

<b>Service</b>	<b>Attachment</b>	<b>Effective Date</b>
Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)	Attachment 4.19-B, Page 4	April 1, 2018
Physician Services	Attachment 4.19-B, Page 6	April 1, 2018
Optometrist Services	Attachment 4.19-B, Page 9	April 1, 2018
Chiropractic Services	Attachment 4.19-B, Page 10	April 1, 2018
Independent Mental Health Practitioners	Attachment 4.19-B, Page 11	December 1, 2018
Nutritionist and Dietician Services	Attachment 4.19-B, Page 11	December 1, 2018
Home Health Services	Attachment 4.19-B, Page 12	April 1, 2018
Durable Medical Equipment	Attachment 4.19-B, Page 13	April 1, 2018
Clinic Services	Attachment 4.19-B, Page 15	April 1, 2018
Dental Services	Attachment 4.19-B, Page 16	April 1, 2018
Physical Therapy	Attachment 4.19-B, Page 17	April 1, 2018
Occupational Therapy	Attachment 4.19-B, Page 18	April 1, 2018
Speech, Hearing, or Language Disorder Services	Attachment 4.19-B, Page 19	April 1, 2018
Dentures	Attachment 4.19-B, Page 21	April 1, 2018
Prosthetic Devices	Attachment 4.19-B, Page 22	April 1, 2018
Eyeglasses	Attachment 4.19-B, Page 23	April 1, 2018
Diabetes Self-Management Training	Attachment 4.19-B, Page 26	April 1, 2018
Community Mental Health Centers	Attachment 4.19-B, Page 26	July 1, 2018
Substance Use Disorder Agencies	Attachment 4.19-B, Page 26	July 1, 2018
Nurse Midwife Services	Attachment 4.19-B, Page 31	April 1, 2018
Transportation	Attachment 4.19-B, Page 38	April 1, 2018
Personal Care Services	Attachment 4.19-B, Page 38	April 1, 2018
Freestanding Birth Centers	Attachment 4.19-B, Page 39	April 1, 2018
Professional Services Provided in a Freestanding Birth Center	Attachment 4.19-B, Page 39	April 1, 2018