

## **Table of Contents**

**State/Territory Name: South Dakota**

**State Plan Amendment (SPA) #: 24-0009**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

**DEPARTMENT OF HEALTH & HUMAN SERVICES**  
Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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July 11, 2024

Heather Petermann  
Medicaid Director  
Department of Social Services  
700 Governors Drive  
Pierre, South Dakota 57501-2291

Re: South Dakota State Plan Amendment (SPA) 24-0009

Dear Director Petermann:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 24-0009. This amendment proposes coverage of substance use disorder treatment services provided to eligible individuals in an eligible institution for mental diseases.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and the Consolidated Appropriations Act of 2024. This letter is to inform you that South Dakota Medicaid SPA 24-0009 was approved on July 11, 2024, with an effective date of October 1, 2023.

If you have any questions, please contact Tyler Deines at 202-571-8533 or via email at [tyler.deines@cms.hhs.gov](mailto:tyler.deines@cms.hhs.gov)

Sincerely,

**Ruth**

**Hughes -S**

Ruth A. Hughes, Acting Director  
Division of Program Operations

Digitally signed by  
Ruth Hughes -S  
Date: 2024.07.11  
20:30:06 -05'00'

cc: Matthew Ballard, South Dakota Medicaid

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER <u>2 4 — 0 0 0 9</u>	2. STATE <u>S D</u>
3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	

TO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE  
~~October 1, 2024~~ October 1, 2023

5. FEDERAL STATUTE/REGULATION CITATION  
Section 1915(l) of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)  
a. FFY 2024 \$ 1,125,138  
b. FFY 2025 \$ 1,125,138


7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  
Attachment 3.1-M, Page 1

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)  
Attachment 3.1-M, Page 1 (TN# 19-0011)

9. SUBJECT OF AMENDMENT  
Restores permanent coverage of substance use disorder (SUD) services provided to eligible individuals in institutions for mental disease (IMDs) formerly allowed under the SUPPORT Act which sunset on September 30, 2023.

10. 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

11. SIGNATURE OF STATE AGENCY OFFICIAL  


12. TYPED NAME  
Heather Petermann

13. TITLE  
Director

14. DATE SUBMITTED  
May 9, 2024

15. RETURN TO  
DEPARTMENT OF SOCIAL SERVICES  
DIVISION OF MEDICAL SERVICES  
700 GOVERNORS DRIVE  
PIERRE, SD 57501-2291

**FOR CMS USE ONLY**

16. DATE RECEIVED May 9, 2024	17. DATE APPROVED July 11, 2024
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**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL October 1, 2023	19. SIGNATURE OF APPROVING OFFICIAL <b>Ruth Hughes -S</b> Digitally signed by Ruth Hughes -S Date: 2024.07.11 20:30:32 -05'00'
20. TYPED NAME OF APPROVING OFFICIAL Ruth A. Hughes	21. TITLE OF APPROVING OFFICIAL Acting Director, Division of Program Operations

22. REMARKS  
Box 4: State approved pen and ink changes 07/09/24

State/Territory: South Dakota

State Option to Provide Medicaid Coverage for Certain Individuals with Substance Use Disorders who are Patients in Certain Institutions for Mental Diseases

South Dakota Medicaid covers substance use disorder treatment services provided to eligible individuals in an eligible institution for mental disease (IMD) in accordance with Section 1915(l) of the Social Security Act.

Eligible Individuals

Eligibility is limited to Medicaid recipients age 21 through 64 who have at least one substance use disorder and reside in an eligible IMD primarily to receive withdrawal management or substance use disorder treatment services.

General Assurances

The State provides the following assurances regarding the scope of IMD services:

1. Coverage is limited to services provided after October 1, 2019.
2. Coverage is limited to a maximum of 30 days per 12-month period per eligible individual from the date an eligible individual is first admitted to an eligible IMD.

IMD Assurances

The State provides the following assurances regarding eligible IMDs:

1. Eligible IMDs follow reliable evidence-based practices and offer at least two forms of medication-assisted treatment (MAT) onsite, including one antagonist and one partial agonist for opioid use disorder. The State ensures IMDs meet these requirements through standards established by the State's Single State Agency for Substance Abuse Services for providers.
2. Eligible IMDs provide services at lower levels of clinical intensity or establish relationships with Medicaid-enrolled providers offering services at lower levels of care. The State ensures IMDs meet these requirements through standards established by the State's Single State Agency for Substance Abuse Services for providers.

Evidence-Based Clinical Screening Assurance

The State provides the following assurance regarding evidence-based clinical screenings:

1. Eligible individuals receive an appropriate evidence-based clinical screening prior to receiving services in an eligible IMD, including initial and periodic reassessments to determine the appropriate level of care, length of stay, and setting for each individual. Eligible IMDs are required to perform an integrated assessment. The integrated assessment includes both functional and diagnostic components. The assessment shall