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State/Territory Name: South Dakota (SD)

State Plan Amendment (SPA) #: SD-23-0022

This file contains the following documents in the order listed:

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

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



Managed Care Group

February 26, 2024

Brenda Tidball-Zeltinger Deputy Cabinet Secretary Department of Social Services 700 Governors Drive Pierre, South Dakota 57505

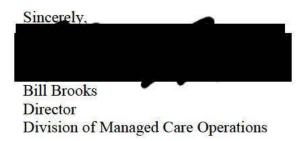
Re: South Dakota State Plan Amendment (SPA) 23-0022

Dear Deputy Cabinet Secretary Tidball-Zeltinger:

The Centers for Medicare & Medicaid Services (CMS) reviewed South Dakota's State Plan Amendment (SPA) submitted under transmittal number 23-0022. This amendment proposes to exempt children with non-Title IV-E adoption assistance under age 21 and individuals under age 21 with an income above 133% of the federal poverty level from the PCCM program.

We conducted our review of this amendment according to statutory requirements of Title XIX of the Social Security Act and implementing Federal regulations. This letter is to inform you that South Dakota Medicaid SPA Transmittal Number 23-0022 was approved on February 26, 2024, with an effective date of November 1, 2023.

If you have any questions, please contact Carleta Belton at 667-414-0685 or via email at carleta.belton@cms.hhs.gov



cc: Tyler Deines
Aimee Campbell-OConnor

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER 2 3 — 0 0 2 2 S D 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI				
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE November 1, 2023				
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2023 \$ 0				
1932(a) of the Social Security Act	a FFY 2023 \$ 0 b. FFY 2024 \$ 0				
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1-F, pages 6 and 8	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 3.1-F, pages 6 and 8 (TN#23-0005).				
9. SUBJECT OF AMENDMENT To exempt children with non-Title IV-E adoption assistance under 133% of the federal poverty level from the PCCM program.	age 21 and individuals under age 65 with an income above				
10. GOVERNOR'S REVIEW (Check One) GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	OTHER, AS SPECIFIED:				
11 SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO				
	DEPARTMENT OF SOCIAL SERVICES				
12. TPED NAME	DIVISION OF MEDICAL SERVICES 700 GOVERNORS DRIVE				
	PIERRE, SD 57501-2291				
Deputy Cabinet Secretary					
14. DATE SUBMITTED December 1, 2023					
FOR CMS U	SE ONLY				
16. DATE RECEIVED 12/1/2023	7. DATE APPROVED 2/26/2024				
PLAN APPROVED - ON	E COPY ATTACHED				
18. EFFECTIVE DATE OF APPROVED MATERIAL 11/1/2023	19. SIGNAT OF APPROV				
20. TYPED NAME OF APPROVING OFFICIAL Bill Brooks	TITLE OF APPROVING OFFICIAL Director, Division of Managed Care Operations				
22. REMARKS					

	······ATTACHMENT 3.1-F
	Page 6
3	OMB No.: 093 8-0933
State: South Dakota	
Citation	Condition or Requirement

A. Optional Eligibility Groups 1. Family/Adult

Eli	gibility Group	Citation (Regulation [42 CFR] or SSA)	M	V	E	Geographic Area (include specifics if M/V/E varies by area)	Notes
1.	Optional Parents and Other Caretaker Relatives	§435.220				20 40	N/A
2.	Optional Targeted Low-Income Children	§435.229	X			Statewide	
3.	Independent Foster Care Adolescents Under Age 21	§435.226			X	Statewide	
4.	Individuals Under Age 65 with Income Over 133%	§435.218			X	Statewide	
5.	Optional Reasonable Classifications of Children Under Age 21	§435.222			X	Statewide	
6.	Individuals Electing COBRA Continuation Coverage	1902(a)(10)(F) of SSA					N/A

2. Aged/Blind/Disabled Individuals

Eligibility Group	Citation (Regulation [42 CFR] or SSA)	M	v	E	Geographic Area (include specifics if M/V/E varies by area)	Notes
 Aged, Blind or Disabled Individuals Eligible for but Not Receiving Cash 	§435.210 and §435.230			X	Statewide	
Individuals eligible for Cash except for Institutionalized Status	§435.211	97		57		N/A
 Individuals Receiving Home and Community-Based Waiver Services Under Institutional Rules 	§435.217			X	Statewide	
10. Optional State Supplement Recipients - 1634 and SSI Criteria States – with 1616 Agreements	§435.232			X	Statewide	
11. Optional State Supplemental Recipients- 209(b) States and SSI criteria States without 1616 Agreements	§435.234	, , , , , , , , , , , , , , , , , , ,				N/A
12. Institutionalized Individuals Eligible under a Special Income Level	§435.236		2	X	Statewide	
13. Individuals Participating in a PACE Program under Institutional Rules	1934 of the SSA					N/A
14. Individuals Receiving Hospice Care	1902(a)(10)(A)(ii) (VII) and 1905(o) of the SSA					N/A
15. Poverty Level Aged or Disabled	1902(a)(10)(A)(ii) (X) and 1902(m)(1) of the SSA					N/A
16. Work Incentive Group	1902(a)(10)(A)(ii) (XIII) of the SSA			X	Statewide	

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Date: July 2023	····· Page 8
	OMB No.: 093 8-0933

State: South Dakota

Citation Condition or Requirement

Population	Citation (Regulation [42 CFR] or SSA)	V	E	Geographic Area	Notes
"Dual Eligibles" not described under Medicare Savings Program - Medicaid beneficiaries enrolled in an eligibility group other than one of the Medicare Savings Program groups who are also eligible for Medicare			X	Statewide	
American Indian/Alaskan Native— Medicaid beneficiaries who are American Indians or Alaskan Natives and members of federally recognized tribes	§438.14			Statewide	Mandatory population—South Dakota contracts with every IHS, Urban Indian Health clinic, and tribal clinic within the state that meet the definition of an Indian Managed Care Entity in 42 CFR 438.14 as an enrolled Primary Care Provider (PCP). American Indians are free to choose one of these entities as their PCP but may also see any IHS or tribal provider without a referral from their chosen PCP.
Children Receiving SSI who are Under Age 19 - Children under 19 years of age who are eligible for SSI under title XVI	§435.120		X	Statewide	
Qualified Disabled Children Under Age 19 - Certain children under 19 living at home, who are disabled and would be eligible if they were living in a medical institution.	§435.225 1902(e)(3) of the SSA		X	Statewide	
Title IV-E Children - Children receiving foster care, adoption assistance, or kinship guardianship assistance under title IV-E *	§435.145		X	Statewide	
Non-Title IV-E Adoption Assistance Under Age 21*	§435.227		X	Statewide	
Children with Special Health Care Needs - Receiving services through a family-centered, community-based, coordinated care system that receives grant funds under section 501(a)(1)(D) of Title V, and is defined by the State in terms of either program participation or special health care needs.			Х	Statewide	

^{* =} Note – Individuals in these two Eligibility Groups who are age 19 and 20 can have mandatory enrollment in managed care, while those under age 19 cannot have mandatory enrollment. Use the Notes column to indicate if you plan to mandatorily enroll 19 and 20 year olds in these Eligibility Groups.