SOUTH DAKOTA MEDICAID

STATE PLAN AMENDMENTS AND 1115 DEMONSTRATION APPLICATIONS

Through November 9, 2022

SPA#	Title	Effective Date	Date sent to Tribes for Consultation	Public Notice Published	Date Submitted to CMS	Date Approved	Status
22-0002	Intermediate Care Facility Reimbursement	03/07/22	02/14/22	02/14/22	03/30/22	09/20/22	Approved
22-0005	Organ Transplant Criteria	05/01/22	04/11/22	04/11/22	05/20/22	07/12/22	Approved
22-0006	IHS Care Coordination Agreement Supplemental Payment	05/01/22	04/25/22	04/25/22	06/10/22	07/19/22	Approved
22-0007	Community Health Worker Providers and Certification	06/01/22	05/09/22	05/09/22	06/24/22	08/29/22	Approved
22-0008	Behavioral Health Inflationary Rate Increase and Collateral Contacts	06/01/22	05/09/22	05/09/22	06/24/22	08/02/22	Approved
22-0009	SFY23 Health Home Inflationary Rate Increase	07/01/22	06/27/22	06/27/22	08/08/22	10/27/22	Approved
22-0010	SFY23 Provider Inflationary Rate Increase	07/01/22	06/27/22	06/27/22	08/05/22	11/02/22	Approved
22-0003	COVID-19 Assurance CHIP SPA	03/11/21	07/18/22	07/18/22	09/09/22	09/30/22	Approved
22-0011	COVID-19 Assurance Medicaid SPA	03/11/21	07/18/22	07/18/22	09/09/22		CMS Review
22-0013	Adult Dental Services	09/12/22	08/29/22	08/29/22	09/30/22		CMS Review
22-0012	Sovereign States Drug Consortium Participation	10/01/22	08/29/22	08/29/22	10/11/22		CMS Review
22-0014	Premium Assistance Program	10/01/22	09/12/22	09/12/22	10/24/22		CMS Review