

State of South Dakota

NINETY-FIRST SESSION
LEGISLATIVE ASSEMBLY, 2016

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HOUSE BILL NO. 1234

Introduced by: Representatives Haggar (Don), Anderson, Bolin, Gosch, Heinemann (Leslie), Hunt, Langer, Qualm, Stevens, Westra, and Wollmann and Senators Holien, Ewing, Haggar (Jenna), Heineman (Phyllis), and Otten (Ernie)

1 FOR AN ACT ENTITLED, An Act to require the approval of the Legislature before the state
2 adopts any changes to the Medicaid program.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF SOUTH DAKOTA:

4 Section 1. That the code be amended by adding a NEW SECTION to read:

5 The Governor or a secretary of a principal department that administers any Medicaid
6 entitlement program may not submit a state plan amendment or waiver for approval by the
7 federal centers for Medicare and Medicaid Services regarding eligibility for Medicaid
8 entitlements without the express approval of the Legislature as an extraordinary expense in a
9 special appropriation separate and distinct from the General Appropriations Act.

10 Section 2. That § 28-6-1 be amended to read:

11 28-6-1. The Department of Social Services may provide medical services ~~and medical care,~~
12 or remedial care on behalf of persons having insufficient income and resources to meet the
13 necessary cost ~~thereof, of the medical services, care, or remedial care.~~

14 However, the services or care are only available if the person has exhausted all other



possible public and private medical and remedial care programs, income, or benefits, with the exception of county poor relief;~~in accordance with.~~ The medical services, care, or remedial care are provided pursuant to the rules which the secretary of social services ~~shall~~ may promulgate pursuant to chapter 1-26 in accordance with the provisions of Title XIX and Title XXI of the federal Social Security Act, as amended to January 1, 2004. The rules shall specify the individuals and services for which state funds or federal financial participation are available and may include:

- (1) The amount, scope, and duration of medical and remedial services;
- (2) The basis for and extent of provider payments on behalf of an eligible person;
- (3) The establishment and collection of copayments, premiums, fees, or charges for sharing the cost of risk protection or services provided to persons. All such collections shall be remitted to the general fund;
- (4) Methods of administration found necessary for the operation of the medical assistance program;
- (5) Safeguards against the disclosure or improper use of information, required by statutory law to be held confidential, concerning applicants for or recipients of medical assistance; ~~and~~
- (6) ~~Such~~ The poverty guidelines updated periodically in the *Federal Register* by the U.S. Department of Health and Human Services under the authority of 42 U.S.C. 9902(2);
and
- (7) The other requirements as may be necessary to obtain federal financial participation in the medical assistance program.