South Dakota Medicaid
BabyReady Fee Schedule

Effective July 1, 2026

Providers must bill for services at their usual and customary charge. The fee listed below is the maximum allowable amount a provider may be reimbursed. Providers must be enrolled as a BabyReady provider to bill for the BabyReady program services. Enhanced payments and PMPM will be paid in addition to the FFS if the criteria is met. Please refer to the BabyReady manual for more information.

Providers should refer to South Dakota Medicaid's provider manual webpage for applicable coverage criteria and claim instructions: https://dss.sd.gov/medicaid/providers/billingmanuals/. For information regarding requesting a coverage or rate change refer to the Reconsideration, Reviews, Coverage Requests, and Fair Hearing provider manual.

Code	Description	Fee
NA	Care Coordination PMPM	$ 43.04
NA	Barriers to Care PMPM	$ 10.00
S0280	Person-centered Care Plan	$ 102.67
S0281	Transitional Care Plan	$ 51.34
G9151	Prenatal Care Enhanced Payment	$ 333.30
G9152	Postpartum Visit Enhanced Payment	$ 102.67