

SOUTH DAKOTA STATE PRIORITIES

The Community HealthCare Association of the Dakotas (CHAD) is a non-profit membership organization that serves as the primary care association for North Dakota and South Dakota, supporting community health centers (CHCs) and South Dakota Urban Indian Health (SDUIH) in their mission to provide access to quality health care for all Dakotans. SDUIH and CHCs in South Dakota provide primary care, behavioral health services, and/or dental care to more than 100,000 South Dakotans.



WORKFORCE DEVELOPMENT AND RECRUITMENT OF HEALTH CARE PROFESSIONALS

Support and enhance programs that develop the health care workforce.

Health care workforce solutions in rural communities continue to need additional investment. One promising program is the State Loan Repayment Program. This program allows states to set local priorities for loan repayment for health professionals who work in health professional shortage areas. We appreciate that the South Dakota Department of Health recently took advantage of these funds to support the recruitment of health professionals.

We know that the demand for this type of program is high, and we would encourage additional support for these programs to meet that demand. Other solutions include strengthening existing health care workforce pipeline programs, investing in developing new pipeline programs, and expanding investment in training programs.



WORKFORCE OPTIMAL TEAM PRACTICE LEGISLATION

CHAD supports giving physician assistants (PAs) more flexibility to practice to the full extent of their education, training, and experience.

Community health centers and South Dakota Urban Indian Health rely on the professionalism and expertise of physician's assistants (PAs) and other advanced practice providers to meet the needs of the rural and urban communities they serve. The evolving medical practice environment requires flexibility in the composition of teams to meet the diverse needs of patients. The manner in which PAs and physicians practice together should not be determined at the legislative or regulatory level. Instead, that determination should be made by the practice in the best interest of the patients and communities they serve. Current requirements diminish team flexibility and limit patient access to care without improving patient safety.



340B PROTECT ACCESS TO AFFORDABLE MEDICATION THROUGH THE 340B PROGRAM

Health centers are the type of safety net program that the 340B program was intended to support.

Community health centers and South Dakota Urban Indian Health are working to provide a full range of affordable health care services, including pharmacy. One tool we use to serve that mission is the 340B drug pricing program. This program was established in 1992 to offer more affordable pricing to patients served by rural and safety net providers.

Health centers exemplify the type of safety net program the 340B program was intended to support.

By law, all health centers:

- Serve only health professional shortage areas;
- Ensure that all patients can access the full range of services they provide, regardless of insurance status, income, or ability to pay; and,
- Are required to reinvest all 340B savings into federally approved activities to advance their charitable mission of ensuring access to care for the underserved.

We are asking the state to protect this important program that offers all health center patients access to affordable prescription medications. Various manufacturers have threatened the loss of drug discounts for drugs shipped to contract pharmacies that administer 340B drugs on behalf of some of our state's most impactful providers. This targeting of contract pharmacies is especially troubling in rural communities, where local pharmacies are already struggling to stay afloat.



MEDICAID EXPANSION IMPLEMENTATION

CHAD continues to support expanded access to health coverage and looks forward to working with the legislature to ensure adequate funding and smooth implementation for this program.

In South Dakota, Medicaid will expand the program in July 2023. Other states that have expanded their Medicaid program have seen improved access to care, improved health outcomes, and reduced uncompensated care, which makes health care more affordable for everyone.

To ensure implementation of South Dakota Medicaid expansion is effective, we ask that you prioritize with the Department of Social Services these recommendations:

- Develop a Medicaid Expansion Advisory Committee, or sub-committee of the Medicaid Advisory Committee, to facilitate and enhance communication with providers, health systems, and patients that this will impact;
- Support Governor Noem's budget request to increase staff and technology in the Medicaid program; and,
- Provide funding to organizations that are a trusted voice in community health care and health insurance coverage to do specific outreach to new Medicaid patients.