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2017 Advocacy Agenda

South Dakota State Medical Association

Make your voice heard in Washington...

Know South Dakota’s members of Congress.

Sen. Mike Rounds
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502 Hart Senate Office Bldg.
Washington, DC 20510
www.rounds.senate.gov

Sen. John Thune
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511 Dirksen Senate Office Bldg.
Washington, DC 20510
www.thune.senate.gov

Rep. Kristi Noem
Phone: 202.225.2801
Fax: 202.225.5823
2422 Rayburn House Office Bldg.
Washington, DC 20515
www.noem.house.gov

…and in Pierre

Know your state senators and representatives.

Phone: 605.773.3251
Fax: 605.773.6806
South Dakota LRC:
www.sdlrc.us

Write to:
The Honorable (name)
500 E. Capitol Ave.
Pierre, SD 57501-5070

Want to learn more? Contact the SDSMA at 605.336.1965 or visit www.sdsma.org

Expand Access to Health Care

In states that do not expand Medicaid, those with incomes below the federal poverty level (FPL) are left without coverage while those with incomes above the FPL can access coverage on the exchange. Medicaid expansion would mean better access to care for low-income families and therefore, the SDSMA supports expanding Medicaid eligibility. The SDSMA also supports increasing Medicaid payment rates for physicians. Medicaid payments must keep pace with inflation and be based on outcomes and value. The SDSMA believes that all Medicaid recipients should have access to a primary care provider and a medical home.

Improve Quality & Ensure Patient Safety

The SDSMA believes in the delivery of safe, efficient, and quality health care. Therefore, we must ensure that our patients receive the best medical care from the people best trained to deliver that care, and to eliminate unnecessary medical liability. The SDSMA will oppose any efforts to allow non-physicians to independently practice medicine beyond the scope of their education and training.

Save the Lives of South Dakotans

When used appropriately, opiate analgesics can be important tools for relieving moderate to severe pain arising from a wide range of conditions, disease states, and medical procedures; however, the potential for prescription drug abuse is substantial. The soaring use of opiate analgesics to treat chronic pain has led to escalating rates of opiate diversion, abuse, addiction, and overdose. The current level of prescription opiate abuse nationwide has been described as an “epidemic” by the Centers for Disease Control and Prevention. The SDSMA believes that in order to protect and preserve a life, opioid antagonists need to be available to those at risk of experiencing a drug overdose. The SDSMA also believes, those acting in good faith and for need for additional funding to support graduate medical education.

Improve Public Health

Access to high quality and affordable health care is essential in improving public health. The SDSMA also believes in implementing programs to promote healthy lifestyles, eliminate health disparities, and improve awareness of public health issues such as the harmful effects of tobacco use and secondhand smoke, obesity, drug and alcohol abuse, and violence prevention. The SDSMA supports funding, education, and state requirements for vaccines and opposes exemptions related to vaccines and immunization requirements. The SDSMA also supports limiting indoor tanning to individuals 18 years of age and above, and supports the efforts of the South Dakota QuitLine.

Reduce Regulatory and Administrative Burdens

The SDSMA believes reducing administrative and other nonclinical costs that do not contribute value to patient care should be one of several broad strategies to address rising health care costs. Such administrative costs and unnecessary burdens are imposed by complex procedures for filing insurance claims and countless Medicare, Medicaid and insurance regulations. The SDSMA believes in the benefits of electronic medical records (EHRs); however, current EHR systems are problematic. The SDSMA supports adopting a consistent format and will advocate for the elimination of administrative waste and the simplification and standardization of technology to improve the affordability of health care EHR functionality.

Reform Medical Liability

Experts agree that the practice of defensive medicine adds billions of dollars to our health care costs. The U.S. Department of Health and Human Services estimates the cost of defensive medicine to be between $70 and $126 billion per year. These costs mean higher health insurance premiums and higher medical costs for all, as well as higher taxes. Every dollar that goes toward medical liability and defensive medicine is a dollar that does not go to patient care. South Dakota has a $500,000 cap on non-economic damages in medical liability cases. The SDSMA supports federal medical liability reforms and will defend South Dakota’s reform laws.

Support Increased Funding for Medical Education

South Dakota is facing a critical shortage of physicians as more than one in four South Dakota residents live in what has been classified as a “primary care shortage area.” Given the need for more physicians in many areas of the state, the SDSMA strongly supports increased funding for medical education to improve access to care in South Dakota. The SDSMA further supports the need for need for additional funding to support graduate medical education. Currently, South Dakota has 225 medical students and only 134 residency training slots – South Dakota is ranked sixth worst in the nation for residency slots for the population.