



# ALLIANCE FOR A HEALTHIER SOUTH CAROLINA

## January 26, 2016 Meeting Notes

### Quick links

[Slides](#) | [Handouts](#) | [DHEC Budget Request](#) | [Map of prescription drug drop-boxes](#)

AARP  
AccessHealth SC  
AnMed Health  
AnMed Health  
Behavioral Health Services Association  
BlueCross BlueShield SC  
Bon Secours St. Francis Health System  
Bon Secours St. Francis Health System  
Care Coordination Institute (CCI)  
Children's Trust of South Carolina  
Clemson University  
Drs. Bruce and Lee Foundation  
Health Plans Inc  
Health Sciences SC  
Health Sciences SC (HSSC)  
Hilton Head Hospital  
Mary Black Foundation  
MUSC  
PASOs Programs  
SC AHEC  
SC Association for Community Economic Development  
SC Business Coalition on Health  
SC Campaign to Prevent Teen Pregnancy  
SC Children's Hospital Collaborative  
SC Children's Hospital Collaborative  
SC Department of Alcohol and Other Drug Abuse Services  
SC Department of Alcohol and Other Drug Abuse Services  
SC Department of Health and Environmental Control  
SC Department of Health and Environmental Control  
SC Department of Health and Environmental Control  
SC Department of Health and Human Services  
SC Department of Mental Health  
SC Department of Mental Health  
SC DHHS  
SC DHHS  
SC Hospital Association  
SC Hospital Association  
SC IMPH  
SC Institute of Medicine and Public Health  
SC March of Dimes  
SC Medical Association  
SC Office of Rural Health  
SC Thrive  
Spartanburg Regional Health Care System  
The Carolinas center for Hospice and End of Life Care  
The Carolinas Center for Medical Excellence  
The Duke Endowment  
Tidelands Health System  
Total Comfort Solutions  
United Way Association of SC

Teresa Arnold, State Director  
Melanie Matney, Executive Director  
John Miller, President Emeritus  
Michael Cunningham, VP  
Laura Stuckey, Executive Director  
Shawn Stinson, MD, CMO  
Johnna Reed, VP  
Saria Saccocio, MD, CMO  
Rob Davis, Executive Director  
Sue Williams, CEO  
Ron Gimbel, PhD, Chair Public Health Sciences  
Bradley Callicott, Executive Director  
Camille Reams, Regional VP  
Christine Turley, MD, CMO  
Helga Rippen, MD, PhD, CEO  
Lori Ross, VP  
Kathy Dunleavy, CEO  
Sabra Slaughter, PhD, Senior Advisor to President  
Julie Smithwick, Executive Director  
David Garr, MD, Executive Director  
Bernie Mazyck, CEO  
Lisa Wear-Ellington, CEO  
Doug Taylor, COO  
Maggie Cash Michael, Executive Director  
Ann Faulks, Representative  
Bob Toomey, State Director  
Sara Goldsby, Consultant  
Catherine Heigel, State Director  
Joe Kyle, Chronic Disease Director  
Lisa Davis, Public Health Director  
Christian Soura, State Director  
John Magill, State Director  
Geoff Mason, Deputy Director  
Amanda Williams, Program Manager  
Kevin Bonds, Program Manager  
Thornton Kirby, CEO  
Rick Foster, SVP  
Lee Pearson, DrPH, Director of Operations  
Kester Freeman, Executive Director  
Breana Lipscomb, Policy Director  
Bruce Snyder, MD, Past President  
Tiffany Simpson-Crumpley, Director of Network Development  
Tricia Richardson, Executive Director  
Renée Romberger, VP  
Marisette Hasan, VP for South Carolina  
Karen Southard, State Director QIO  
Mary Piepenbring, VP  
Bruce Bailey, CEO  
Rich Sweet, CFO  
Tim Ervolina, CEO

**Also in attendance:** Heather Jones-CCME, Jennifer Read- DHEC, Sierra Butler- DHHS, Ally Money-DHHS, Ana Hervada-Alliance/AARP intern, Anna Mesa-Student, Lauren Weathers-Student.

The Alliance for a Healthier SC is an unprecedented collaboration of 50+ diverse organizations across the state working together on coordinating action to achieve healthier bodies, minds and communities for ALL—while reducing the future cost of care. Through the collective efforts of its members paired with those of other strong state and community coalitions, the Alliance is working toward the day when South Carolina leads the nation in the continuous improvement of health and healthcare for ALL people in the state.

## 1 Progress and updates

- Progress and challenges in all priority areas of the Alliance are available [HERE](#).
- Follow-up to October 25 Alliance meeting:
  - *Prescription Drug Drop-boxes*: We are up to 29 in the state. We need one in each of the 46 counties. A hospital pharmacy or retail pharmacy would be the ideal place. See inventory of drop-boxes [here](#).
    - Follow-up with [sgoldsby@daodas.sc.gov](mailto:sgoldsby@daodas.sc.gov).
  - *Crisis Stabilization Center*: Funding from MUSC, Trident, and Roper St. Francis has been secured to open the Charleston Unit (1 million needed per year). This unit will serve adult mental health and co-occurring patients at the old site of the Naval Hospital in Charleston. Anderson, Florence and Spartanburg have also shown interest.
    - Follow up with Geoff Mason: [GJM45@SCDMH.ORG](mailto:GJM45@SCDMH.ORG)
  - *Tax-credits for MDs, NPs, and PAs who teach in community settings*: AHEC and partners have secured a sponsor in the senate. The bill is now in the office of legislative affairs. The same bill will be presented in the House.
    - Follow up with David Garr: [garrdr@musc.edu](mailto:garrdr@musc.edu)
- 5 Health Equity webinars will be done in 2016.
  - Thank you CCME for offering to sponsor the webinars!
  - Helga Rippen-HSSC offered to provide ARCGIS data to support the team.
  - Major focus on cultural competence, data stratification, diversity, and community engagement
- Slide sets for 1, 5, 20 and 60 minute presentations are available by request to [agallego@scha.org](mailto:agallego@scha.org)
- Communications Team will include sample tweets in the weekly newsletter. Follow [@healthierSC](#) and retweet, or send your own tweets including [#HealthierSC](#).
- Other examples of communication alignment
  - AARP sending items of the Alliance Weekly Newsletter to their 600,000 subscribers in SC.
  - Present Alliance to own stakeholders (board, staff, partners)
- 2016 Invoices went out on December 11. 24 organizations have paid. The Duke Endowment and Spartanburg Regional have made additional contributions for a total of \$15,000.

## 2 DHEC Director, Catherine Heigel

- DHEC has just finished its strategic plan
  - Vision: Healthy people in healthy communities
  - Mission: Improve the lives of people
- The agency is in a major state of transformation. One of the first steps is building an operating budget. Examples of other things that are being considered are living wages.
- Some examples of things that will start happening in the agency, is paying a closer look to the money that is returned to the federal government; to make sure it stays in South Carolina.
- DHEC sold the Home Health business in 2015 for 17.5 Million Dollars. All jobs were secured.
- The Health Services area of DHEC under the leadership of Lisa Davis will be creating “big audacious goals” for the public health needs of the state in the first semester of 2016. Partnerships will be very important to determine the role of DHEC in each priority.

- **Director Heigel's ask to the Alliance:** Support the [DHEC Budget Request](#). Among others, this request includes the purchase of EHRs for the clinics so that they are in compliance to receive Title X funding in 2018 (currently at risk) and separate funding for immunizations and tuberculosis. All items have a business case.
  - **Action:**
    - Alliance will distribute the request to members. Members to individually consider supporting the Budget request.
    - Alliance staff to work with DHEC to explore the creation of a crosswalk between DHEC's request and Alliance priorities, and provide that information to Alliance members.
- **Q&A**
  - At this point, a separation of the Health and Environmental aspects of DHEC won't be advisable. The agency must finish creating budgets and transforming itself operationally to make an informed decision.
  - Disparities have been raised in importance. The Office of Minority Health has been elevated.

### 3 Policy and Advocacy Team recommendations

See [Slides](#) for the breakout of the uninsured and proposed consensus statements.

Improve access to care is one of the goals of the Alliance. It includes at least four equally important components: timely and adequate resources, navigation and other support services, adequate coverage, high quality care.

One of them is adequate coverage, which is the topic being discussed by the Policy and Advocacy Team.

At this point, the team is focusing on what can be done to maximize access to health insurance based on existing resources and without legislative action: Maximize enrollment in marketplace for gold and silver plans; and maximize enrollment on Medicaid for those who are eligible.

The type of insurance that people buy is very important. We should drive people to the insurance that best fit their needs. For example, insurance that covers mental health and drug abuse services. People with low-income may behave as an uninsured if they have bronze plans.

South Carolina has one of the highest deductibles in the nation.

**Next steps:** If you are interested in being part of the consensus building on this topic. Attend the February 17 Policy and Advocacy Team meeting.

### 4 Alignment efforts

For detailed efforts and opportunities, see [Slides](#)

- Upcoming Child Health Outcomes Initiative requires funding for a backbone. The leadership for this team originated in the Alliance and Title V needs assessment discussions.
- Blueprint for Health is the newest initiative sponsored by BlueCross BlueShield Foundation, and is run by the SC Office of Rural Health. Two counties have been selected for hands-on technical

assistance to build improvement capacity and infrastructure: Dillon and Marion. First meeting will be this month. Get in touch with Melinda Merrell [merrell@scorh.net](mailto:merrell@scorh.net) for additional information.

- The Duke Endowment is learning from the BluePrint initiative so that in 2017 they can expand the current community funding being used in North Carolina to South Carolina. The model will be similar to AccessHealth.
- Pay for Success is a model where South Carolina is leading the nation. It currently pays for Nurse Family Partnership. There is a Medicaid waiver that allows for reimbursement of NFP. Through the program 4000 new moms in Greenville will be served (there are about 11,000 pregnant women per year)
  - Put Pay for Success in an upcoming Alliance agenda.
  - *Follow-up with:* Sue Williams [swilliams@scchildren.org](mailto:swilliams@scchildren.org)
- The HeART Committee is expanding its scope to test and find models that work to increase access to care for all. Their retreat will be on Jan 27 to define their new scope.
  - *Follow-up with:* Julie Smithwick – [julie@scpasos.org](mailto:julie@scpasos.org) and David Garr: [garrdr@musc.edu](mailto:garrdr@musc.edu)
- SC Population Health Summit: This summit will be in May and it will test a de-centralized model. Charleston, Columbia, and Greenville-based people are encouraged to attend one of the regional locations. We are looking for local conveners and facilitators in: Clemson, Kershaw, Colleton, and Florence. (Locations were updated on January 27. One location per DHEC region)
  - *Follow up with:* [agallego@scha.org](mailto:agallego@scha.org)
- Consider the possibility of the Alliance becoming an organization that analyzes policy/budgets and provides a rating of how aligned it is with the vision for a Healthier SC.
  - *Action item:* Discuss feasibility of idea at Leadership Team and Policy and Advocacy Team meetings.
- Consider linking the Alliance website to Enroll America/Palmetto Project
- The communications team could help create stories for the 6 categories of uninsured; as well as messages that link the access to health insurance with bankruptcy prevention, as was shown in Boston.
- Alliance members to consider offering to testify about the health of the state.

## 5 Next meetings

Alliance: April 26, 10am

Communications: February 5, 11am

Policy and Advocacy: Feb 17, 10am (Originally scheduled for Feb 16)

Health Equity: March 1, 1pm