The Alliance for a Healthier South Carolina was established as a statewide, multi-sector coalition committed to collectively improving the health and wellbeing of everyone in South Carolina. The Alliance has been structured to focus on these improvement efforts from both a policy and practice perspective and to ensure our work is always conducted through a health equity lens. The Alliance Policy and Advocacy Action Team concluded in 2017 that healthcare coverage and access limitations and equity gaps in SC were a high priority for Alliance review and action. In response to this recommendation, the Alliance Senior Leadership Team established a Healthcare Coverage and Access Task Force consisting of key leaders from provider, payer, employer, consumer, government and policy sectors. Through a series of meetings, this task force has developed the following healthcare coverage and access policy position statement for review and final action by the Alliance membership.

In November 2018, the Alliance in partnership with SC DHEC released the first ever state health improvement plan under the name Live Healthy SC. One of the priority areas of this plan relates to health system transformation, including a focus on how to improve access to and coverage for basic healthcare services for everyone in SC.

The South Carolina Institute of Medicine and Public Health (IMPH) is currently convening the Workforce for Health Taskforce in order to develop recommendations that will improve access to and coordination of care. This effort is focusing on innovative approaches to care that focus on prevention, community settings and the social-environmental determinants of health and their implications for the non-traditional health care workforce. In June 2019, a report of this taskforce’s work will be published, containing actionable recommendations for improving health in South Carolina through workforce-related strategies.

This position statement focuses on a core set of guiding principles and proposed collective actions on the major health coverage and access policy gaps in SC across the life continuum from the perspective of individuals, families and specific populations most impacted by these preventable gaps. These proposed principles and strategic actions are primarily intended to help improve health outcomes for everyone in SC while reducing healthcare costs.

**Guiding Healthcare Coverage and Access Principles for South Carolina:**

- Everyone in SC should have access to affordable and comprehensive healthcare coverage; closing the coverage gap means reconsidering existing eligibility rules, but also a more concerted effort to ensure that those who are already eligible for employer-sponsored or publicly-supported coverage take advantage of this opportunity.
- Each person across our state should have direct access to and coverage for a medical home that provides preventive, behavioral health and oral health care in both a face to face and virtual setting.
- Coverage and access policy actions should include a specific focus on impacting and addressing the social and environmental drivers of poor health outcomes and higher healthcare costs.
- A targeted policy focus should be placed on closing and eliminating the major equity-based coverage and access gaps that most negatively impact health outcomes and healthcare costs.
- Specific gaps in behavioral health coverage and access by geography, patient type and payer source should be reduced at both the provider and payer levels.
- Decisions about healthcare access and coverage should be evidence-based and informed and supported by transparent and easily accessible sharing of de-identified health data.
**Recommended Coverage and Access Policy Actions:**

1. **Access to affordable, comprehensive healthcare coverage**
   **Strategic Actions:**
   - Expand and enhance collective efforts to maximize enrollment of children and adults that are eligible for Medicaid coverage or marketplace subsidies.
   - Evaluate potential Medicaid waiver or health insurance exchange options that could expand access and coverage for specific vulnerable populations.
   - Identify effective models for reducing out of pocket costs for low income employees and beneficiaries (e.g. tiered HSA contributions, healthy behavior premium incentives).

2. **Access to and coverage for care in a medical home setting**
   **Strategic Actions:**
   - Enhance access to medical homes that are structured and financially supported to ensure direct access to primary and preventive physical, behavioral and oral health services.
   - Expand coverage for and access to services provided through telemedicine in both traditional and non-traditional care settings (e.g. school-based clinics, home).
   - Expand access to and coverage for advanced practice nurses and other non-physician healthcare practitioners in the office and community settings with a specific focus on residents of rural communities.
   - Ensure coverage of recommended preventive care services with no or minimal out of pocket cost for the employee/beneficiary.

3. **Coverage and access to programs/services that directly address the social and environmental drivers of poor health outcomes and higher healthcare costs**
   **Strategic Actions:**
   - Expand access to and coverage for innovative care models like CenteringPregnancy that can demonstrate improved health outcomes and cost savings for specific at risk populations.
   - Provide coverage and access to programs and services focused on specific social determinants of health (e.g. coverage for community health workers as navigators for high risk populations; coverage for defined housing, education and job training programs).
   - Establish shared funding models to ensure sustainability of upstream, social determinants-focused programs that demonstrate effectiveness in improving health outcomes and healthcare costs.

4. **Targeted focus on the major equity-based coverage and access gaps**
   **Strategic Actions:**
   - Identify the specific equity-based gaps by race/ethnicity, geography, sexual/gender orientation, and education and income levels that most impact poor health outcomes and higher healthcare costs.
   - Ensure that coverage and access policies fully take into account equity-based barriers to good health and include explicit actions to reduce or eliminate specific equity gaps in health outcomes and costs.
   - Provide coverage and access to evidence-based programs and services that have demonstrated effectiveness in reducing equity-based health outcomes and cost gaps in SC.
5. Coverage and access gaps in behavioral healthcare services

**Strategic Actions:**

- Ensure timely access to and coverage for medication assisted treatment (MAT) in both urban and rural practice settings including MAT provided via telemedicine.
- Provide direct access to and coverage for behavioral health practitioners and services in every SC secondary school.
- Establish integrated, regional crisis stabilization systems statewide that are universally accessible to patients suffering from an acute mental illness and/or substance use disorder.
- Align training, staffing and financial incentives that promote direct access to primary and preventive behavioral health services in the medical home setting.

6. Evidence-based, data informed coverage and access decision making

**Strategic Actions:**

- Ensure more timely and transparent access to aggregate, de-identified healthcare utilization and cost data from all key public and private data sources in SC, while at all times protecting the confidentiality and privacy of patient-specific data.
- Promote more active alignment of the various health information exchanges and data registries operating in SC to improve the quality, safety and efficiency of care coordination across providers and systems.
- Incorporate equity stratification and tracking of specific social and environmental drivers at all levels of health data collection, analysis and dissemination.

**TASKFORCE**

- AARP
- BlueCross BlueShield of SC
- Michelin North America
- Medical University of SC
- PEBA
- Select Health
- SC Business Coalition on Health
- SC Department of Health and Environmental Control
- SC Department of Health and Human Services
- SC Hospital Association
- SC Institute of Medicine and Public Health
- SC Medical Association
- SC Office of Rural Health
- SC Thrive