

# State HEALTH IMPROVEMENT PLAN

2024-2028



SOUTH DAKOTA  
DEPARTMENT OF HEALTH

EVERY  
South Dakotan  
**HEALTHY**  
and Strong

Annual Revision:  
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# Table of Contents

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|   |           |
|---|-----------|
| <b>Message from the Department of Health</b> .....  | <b>3</b>  |
| Executive Summary .....   | 4         |
| Health Priority Aims and Goals: .....   | 5         |
| Priority Strategies: .....  | 5         |
| <b>Health Priority 1: Access to Care</b> .....  | <b>6</b>  |
| Access to Care Goals: .....   | 6         |
| Goal 1: Improve health insurance coverage.....  | 7         |
| Goal 2: Increase utilization of digital devices for telemedicine.....   | 8         |
| Goal 3: Improve the socio-economic condition of South Dakotans living in poverty. ....                          | 9         |
| Goal 4: Improve the American Indian patient experience through the delivery of culturally responsive care. .... | 10        |
| Goal 5: Improve the collection, utilization, and sharing of health data statewide. ....                         | 11        |
| <b>Health Priority 2: Behavioral Health</b> .....   | <b>12</b> |
| Behavioral Health Goals: .....  | 12        |
| Goal 1: Reduce deaths due to behavioral health crises. ....   | 13        |
| Goal 2: Improve behavioral health literacy.....   | 14        |
| Goal 3: Increase cultural representation among the behavioral health workforce.....                             | 15        |
| Goal 4: Improve care coordination following crisis response interventions. ....                                 | 15        |
| <b>Health Priority 3: Care Quality</b> .....  | <b>16</b> |
| Care Quality Goals: .....   | 16        |
| Goal 1: Improve early detection through routine screenings and early interventions. ..                          | 17        |
| Goal 2: Increase healthy behaviors.....   | 19        |
| <b>Aligning, Monitoring, and Evaluating</b> .....   | <b>22</b> |
| State Health Improvement Coalition .....  | 22        |
| 2025 South Dakota Legislative Action .....  | 23        |
| State Agency Guiding Documents .....  | 27        |
| South Dakota Department of Health Data and Reports .....  | 28        |
| Key Health Improvement Partners .....   | 28        |
| Community Health Needs Assessment (CHNA).....   | 32        |
| <b>Appendix A: Priority Area Strategies</b> .....   | <b>35</b> |
| <b>Appendix B: Priority Area Assets</b> .....   | <b>38</b> |

## Message from the Department of Health

### Secretary Melissa Magstadt



The South Dakota Department of Health (SD DOH) encouraged South Dakotans to make their voice heard during the development of the State Health Assessment and State Health Improvement Plan. These valuable insights and perspectives allow us to establish a person-centered foundation for improving health and quality of life in every community.

Overall health is impacted by a wide variety of factors. Understanding barriers and best practices at the national, state, county, and community level allows the public health system to work together to create, champion, and implement policies, plans, and laws that impact health.

The SD DOH is committed to developing and implementing community health improvement strategies collaboratively and the State Health Assessment and State Health Improvement Plan are a positive step forward. I extend my sincere thanks to all the partners and stakeholders who engaged in this extensive and comprehensive process of gathering data, identifying priorities, brainstorming strategies, and highlighting existing programs and assets.

The health priorities are familiar to residents of the state, and the plan provides an accountability framework for using state resources to create positive health impact.

1. Access to Care: Improve the delivery of health services in South Dakota communities.
2. Behavioral Health: Improve behavioral health outcomes.
3. Care Quality: Elevate preventive health care.

While there will certainly be challenges to advancing these health priority goals and objectives, I am confident in our ability to create an impact because of the commitment and passion I've seen from South Dakota champions and leaders to achieve the vision of Every South Dakotan Healthy and Strong.

## Executive Summary

The purpose of the State Health Improvement Plan (SHIP) is to assist in developing and implementing community health improvement strategies collaboratively. The SHIP will contribute to the ongoing monitoring of community health needs, health disparities, and high-risk populations which are needed to identify barriers and take action to find solutions.

The SHIP is a five-year (2024-2029) strategic framework developed through cooperation and collaboration of a multi-sector partnership of stakeholders. Using the 2023 State Health Assessment (SHA) as a data foundation, the SHIP includes health priorities, aims, goals, measurable objectives, strategies, and assets.

### Components of the SHIP:

- 3 Health Priorities and Aims
  1. Access to Care: Improve the delivery of health services in all South Dakota communities.
  2. Behavioral Health: Improve behavioral health outcomes.
  3. Care Quality: Elevate preventive health care.
- 11 Goals
- 54 measurable objectives
- Innovative and evidence-based strategies
- Partners, programs, initiatives, and assets

### State Health Assessment:

Facilitated by the South Dakota Foundation for Medical Care (SDFMC) through contract with the SD DOH, the 2023 State Health Assessment (SHA) used three primary methods to gather information:

- Priority health indicator survey
- Community Conversation forums in communities across the state
- Key informant interviews

SDFMC compiled and analyzed the results to create the framework for the SHIP. Collaborating with the State Health Improvement Coalition (SHIC) and other content experts and key stakeholders from around the state, SDFMC facilitated priority task groups to refine the goals, objectives, strategies, and assets included in the final SHIP.

### Benefits of the SHIP:

The SHIP is designed to aid in fulfilling the SD DOH vision of Every South Dakotan Healthy and Strong by emphasizing three health priorities for a wide range of public and private partners to advance collaboratively. The selection of goals, objectives, and strategies offer communities, partners, organizations, legislators, and change makers flexibility for engagement and assurance of project alignment with state priorities.

- Increases statewide alignment of health improvement and strategic plans.
- Highlights strategies and assets to advance common goals and objectives.
- Identifies key partners for collaborative efforts.

The DOH and SHIC will engage appropriate stakeholders to develop action plans for each priority area, monitor the objectives, and report on the progress toward the goals. Contact the SHIC to learn how to engage.

## Health Priority Aims and Goals:

### Access to Care: Improve the delivery of health services in all South Dakota communities.

1. Improve health insurance coverage.
2. Increase utilization of digital devices for telemedicine.
3. Improve the socio-economic condition of South Dakotans living in poverty.
4. Improve the American Indian patient experience through the delivery of culturally responsive care.
5. Improve the collection, utilization, and sharing of health data statewide.

### Behavioral Health: Improve behavioral health outcomes.

1. Reduce deaths due to behavioral health crises.
2. Improve behavioral health literacy.
3. Increase cultural representation among the behavioral health workforce.
4. Improve care coordination following crisis response interventions.

### Care Quality: Elevate preventive health care.

1. Improve early detection through routine screenings and early intervention.
2. Increase healthy behavior.

## Work Group Call to Action:

- Maintain collaborative structure to advance SHIP objectives
- Conduct comprehensive data analysis to guide decision making
- Promote health partner alignment with SHIP goals

## Priority Strategies:

|  | Access to Care | Behavioral Health | Care Quality |
|--|----------------|-------------------|--------------|
| Increase maternal and prenatal care coordination   | X              | X                 | X            |
| Develop a youth health task force to collect feedback on risks and behaviors                     | X              | X                 | X            |
| Enhance and integrate cross-agency Medicaid enrollment   | X              | X                 | X            |
| Improve adherence to health care recommendations   |                | X                 | X            |
| Promote implementation of collaborative care models  |                | X                 | X            |
| Explore and implement “Grow Your Own” workforce efforts.   | X              | X                 |              |
| Support the Get Covered Coalition to address awareness and enrollment                            | X              |                   |              |
| Provide care coordination and mental health crisis intervention instruction for first responders |                | X                 |              |

# Health Priority 1: Access to Care

**AIM: Improve the delivery of health services in all South Dakota communities**

## Access to Care Goals:

1. Improve health insurance coverage.  
South Dakotans who lack health insurance coverage may dismiss or delay health care services and treatment, increasing their risk for serious financial, physical, and behavioral health consequences. On July 1, 2023, Medicaid opened the eligibility application process to expand health coverage to an estimated 57,000 South Dakotans.
2. Increase utilization of digital devices for telemedicine.  
The rural and frontier geography of South Dakota creates a business case for telehealth services to ensure all populations can access healthcare services. Limited broadband access and costs for connectivity and digital devices impact access to telehealth services for rural and low-income populations.
3. Improve the socio-economic condition of South Dakotans living in poverty.  
Health disparities are more pronounced for South Dakotans living in poverty. Individuals struggling to meet basic needs face an increased risk of poor health outcomes. Creating an environment with opportunities to thrive may have a positive impact on the socio-economic conditions for individuals living in low-income communities.
4. Improve the American Indian patient experience through the delivery of culturally responsive care.  
Being trustworthy during defining moments in people's lives produces strong relationships. Trust is the foundation for the patient-provider relationship. The patient experience of American Indians in the South Dakota healthcare ecosystem is an area of emphasis for reducing health disparity and improving health outcomes.
5. Improve the collection, utilization, and sharing of health data statewide.  
State agencies and the healthcare community are developing systems to optimize data collection and analysis to monitor and improve health. Establishing a standardized, trusted, and sustainable health risk and outcomes dashboard would provide a trusted source of truth on the delivery and quality of health services for all South Dakotans.

## Access to Care Priority Strategies:

- Increase maternal and prenatal care coordination
- Develop a youth health task force to collect feedback on risks and behaviors
- Enhance and integrate cross-agency Medicaid enrollment
- Explore and implement "Grow Your Own" workforce efforts
- Support the Get Covered Coalition to address awareness and enrollment

## Goal 1: Improve health insurance coverage

Table 1: Access to Care Goal 1 Objectives

| Objective Description   | Source   | Base |      | Progress |      | Target |      |
|---|--|------|------|----------|------|--------|------|
|   |  | %    | Year | %        | Year | %      | Year |
| 1. <b>Decrease</b> the percentage of respondents who indicate their current primary source of health insurance is 'None' to 3% by 2029.                                   | SD BRFSS   | 7%   | 2021 | 7.6%     | 2023 | 3%     | 2029 |
| 2. <b>Decrease</b> the percentage of the population aged 18-64 that have no health insurance coverage to 10%, with emphasis on <i>lowest coverage counties</i> , by 2029. | County Health Rankings<br>Small Area Health<br>Insurance Estimates | 14%  | 2020 | 12%      | 2025 | 10%    | 2029 |
| 3. <b>Decrease</b> the percentage of children under age 19 without health insurance to 4%, with emphasis on <i>lowest coverage counties</i> , by 2029.                    |  | 6%   | 2020 | 7%       | 2025 | 4%     | 2029 |

|       |            |          |            |
|-------|------------|----------|------------|
| Alert | Watch List | On Track | Met Target |
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Table 1.1: Access to Care Goal 1

### Objective 2 Priority Counties

| County        | %   | County      | %   |
|---------------|-----|-------------|-----|
| Dewey         | 24% | Mellette    | 19% |
| Jackson       | 21% | Bennett     | 19% |
| Todd          | 20% | Buffalo     | 19% |
| Tripp         | 19% | Charles Mix | 18% |
| Oglala Lakota | 19% | Gregory     | 18% |

### Objective 3 Priority Counties

| County      | %   | County  | %   |
|-------------|-----|---------|-----|
| Charles Mix | 12% | Hamlin  | 10% |
| Douglas     | 12% | Gregory | 10% |
| Tripp       | 10% | Faulk   | 10% |
| Roberts     | 10% | Custer  | 10% |
| Perkins     | 10% | Butte   | 10% |

## Goal 2: Increase utilization of digital devices for telemedicine.

Table 2: Access to Care Goal 2 Objectives

| Objective Description   | Source  | Base  |           | Progress |      | Target |      |
|---|---|-------|-----------|----------|------|--------|------|
|   |   |       |           |          |      |        |      |
| 1. <b>Increase</b> the percentage of SD households with a broadband internet subscription to 95% by 2029.   | US Census Bureau Quick Facts                  | 85.2% | 2017-2021 | 89.70%   | 2024 | 95%    | 2029 |
| 2. <b>Increase</b> the percentage of adults who had an appointment with health professionals over video or phone in the last 4 weeks to 15.5% by 2029.              | CDC, US Census Bureau, Household Pulse Survey | 13.9% | 2021      | 17.1%    | 2022 | 15.5%  | 2029 |
| 3. <b>Increase</b> the percentage of SD households with a computer, tablet, or smartphone to 96%, with emphasis on the <i>lowest percentage counties</i> , by 2029. | US Census Bureau Quick Facts                  | 91.7% | 2017-2021 | 94.8%    | 2024 | 96%    | 2029 |

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| Alert | Watch List | On Track | Met Target |
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Table 2.1: Access to Care Goal 2

### Objective 3 Priority Counties

| County        | %     | County    | %     |
|---------------|-------|-----------|-------|
| Todd          | 64.4% | Buffalo   | 73.9% |
| Mellette      | 66.0% | Ziebach   | 74.9% |
| Oglala Lakota | 66.6% | Jackson   | 77.0% |
| Corson        | 72.6% | McPherson | 77.5% |
| Dewey         | 73.8% | Bennett   | 79.7% |



### Goal 3: Improve the socio-economic condition of South Dakotans living in poverty.

Table 3: Access to Care Goal 3 Objectives

| Objective Description   | Source   | Base  |      | Progress |      | Target |      |
|---|--|-------|------|----------|------|--------|------|
|   |  | Value | Year | Value    | Year | Value  | Year |
| 1. <b>Decrease</b> the percentage of the population living in poverty to 11.5% by 2029.   | US Census Bureau Quick Facts                                   | 12.5% | 2022 | 11.10%   | 2024 | 11.5%  | 2029 |
| 2. <b>Decrease</b> the percentage of children living in poverty by 2029, with an emphasis on the <i>ten counties with the highest percentages</i> . | County Health Rankings Small Area Income and Poverty Estimates | 14%   | 2021 | 14%      | 2025 | 13%    | 2029 |

|       |            |          |            |
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| Alert | Watch List | On Track | Met Target |
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Table 3.1: Access to Care Goal 3

#### Objective 2 Priority Counties

| County        | %   | County      | %   |
|---------------|-----|-------------|-----|
| Ziebach       | 56% | Bennett     | 36% |
| Oglala Lakota | 41% | Jackson     | 36% |
| Corson        | 40% | Mellette    | 33% |
| Buffalo       | 38% | Dewey       | 29% |
| Todd          | 38% | Charles Mix | 26% |

## Goal 4: Improve the American Indian patient experience through the delivery of culturally responsive care.

Table 4: Goal 4 Objectives

| Objective Description   | Source  | Project Completion Target |      |   |      |                      |      |
|---|---|---------------------------|------|---|------|----------------------|------|
|   |   | Base                      | 2025 | 2026  | 2027 | 2028                 | 2029 |
| 1. <b>Initiate</b> use of the American Indian Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey in healthcare facilities where AI patients are served by 2029, with focus on the patient experience measures. | Agency for Healthcare Research and Quality (AHRQ)   | 0%                        | 0%   |   |      |                      | 100% |
| 2. <b>Determine</b> the utilization of culturally competent training programs in the public and private health care community by 2026.  |   | 0%                        | 0%   | 100%  |      |                      |      |
| Objective Description   | Source  | Base                      |      | Progress  |      | Target               |      |
| 3. <b>Increase</b> licensed healthcare professional cultural representation to align with the population by 2029.   | South Dakota Nursing Workforce Report   | <a href="#">Table 4.1</a> | 2023 | <a href="#">Table 4.1</a>   | 2024 | <b>Match percent</b> | 2029 |
| 4. <b>Determine</b> the number and <b>increase</b> the proportion of tribal communities that have a health improvement plan by 2029.  | Healthy People 2030, PHI-08; Public Health in Indian Country Capacity Scan; Great Plains Tribal Epidemiology Center | <b>Create Baseline</b>    |      |   |      |                      | 2029 |
| 5. <b>Decrease</b> the rate of adults who had a doctor's office or clinic visit in the last 6 or 12 months whose health providers sometimes or never listened carefully to them to 2.8 by 2029.                                     | National Healthcare Quality and Disparities Reports State Profile-South Dakota, AHRQ                                | 3.4                       | 2022 | 2.9  | 2024 | 2.8                  | 2029 |

|       |            |          |            |
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| Alert | Watch List | On Track | Met Target |
|-------|------------|----------|------------|

Table 4.1: Access to Care Goal 4

**Objective 3 Workforce Representation Baseline**

| Description   | American Indian | Asian/<br>Pac Island | Black | Hispanic/<br>Latino | White | 2+ Races |
|---|-----------------|----------------------|-------|---------------------|-------|----------|
| <b>2022 Population</b><br>(US Census July 1, 2022)          | 8.5%            | 1.9%                 | 2.6%  | 4.9%                | 84.2% | 2.8%     |
| 2023 Registered Nurses                                      | 2.1%            | 2.1%                 | 1.8%  | 1%                  | 92%   | 1%       |
| 2023 Certified Nurse Midwife                                | 0%              | 0%                   | 2%    | 0%                  | 94.2% | 3.8%     |
| <b>2024 Population</b><br>(US Census Estimate July 1, 2024) | <b>8.5%</b>     | 1.9%                 | 2.6%  | <b>5.1%</b>         | 84.2% | 2.8%     |
| 2024 Registered Nurses                                      | <b>2.1%</b>     | 2.1%                 | 1.8%  | <b>1%</b>           | 92%   | 1%       |
| 2024 Certified Nurse Midwife                                | <b>0%</b>       | 0%                   | 2%    | <b>0%</b>           | 94.2% | 3.8%     |

Source: [2023 South Dakota Nursing Workforce \(sd.gov\)](https://sd.gov)

**Goal 5: Improve the collection, utilization, and sharing of health data statewide.**

Table 5: Goal 5 Objectives

| Objective Description   | Source | Project Completion Target |      |      |      |                         | 2029 |
|---|--------|---------------------------|------|------|------|-------------------------|------|
|   |        | Base                      | 2025 | 2026 | 2027 | 2028                    |      |
| 1. <b>Implement</b> a data-driven framework for the SHIC to monitor disparities and plan improvement efforts by 2028. | N/A    | 0%                        | 80%  |      |      | 100%<br>implement<br>ed |      |

|       |            |          |            |
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| Alert | Watch List | On Track | Met Target |
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# Health Priority 2: Behavioral Health

**AIM: Improve behavioral health outcomes.**

## Behavioral Health Goals:

1. Reduce deaths due to behavioral health crises.  
The correlation between behavioral health and physical health impacts overall health and quality of life. Suicide rates have reached an all-time high, and suicide is the leading cause of death of South Dakotans aged 10-29 years. Challenges to obtain treatment for behavioral health concerns include cost, lack of help-seeking behavior, stigma, health professional shortage areas, and limited access to inpatient psychiatric beds.
2. Improve behavioral health literacy.  
Education and normalizing conversations about behavioral health care services will create awareness and reduce stigma. Everyone will experience major events and uncontrollable circumstances within their lifetime. An increased understanding of the types of behavioral health care services available to work through situational, crisis, or chronic health concerns can empower individuals and create positive health outcomes.
3. Increase cultural representation among the behavioral health workforces.  
Building a trust relationship between a behavioral health professional and a person seeking treatment is integral for achieving positive health outcomes. Properly interpreting behaviors and language through the lens of cultural understanding improves the health assessment and diagnosis process. Diverse representation in the behavioral health workforce helps eliminate racial assumption, reduce bias, and enhance patient adherence by using culturally responsive care.
4. Improve care coordination following crisis response interventions.  
Providing a comprehensive continuum of care with linked, flexible services to South Dakotans with mental illness is critical to success in treatment and recovery. Delayed or non-existent follow-up care after a behavioral health crisis may lead to emergency department visits, decreased physical and mental condition, and noncompliance with prescribed recommended healthcare instructions.

## Behavioral Health Priority Strategies:

- Increase maternal and prenatal care coordination
- Develop a youth health task force to collect feedback on risks and behaviors
- Enhance and integrate cross-agency Medicaid enrollment
- Improve adherence to health care recommendations
- Explore and implement “Grow Your Own” workforce efforts
- Promote implementation of collaborative care models
- Provide care coordination and mental health crisis intervention instruction for first responders

## Goal 1: Reduce deaths due to behavioral health crises.

Table 6: Behavioral Health Goal 1 Objectives

| Objective Description   | Source  | Base  |      | Progress |      | Target |      |
|---|---|-------|------|----------|------|--------|------|
|   |   | Value | Year | Value    | Year | Value  | Year |
| 1. <b>Reduce</b> the age-adjusted suicide death rate to 18 by 2029.   | DOH Office of Health Statistics, CDC Wonder                                     | 22.7  | 2021 | 20.7     | 2023 | 18     | 2029 |
| 2. <b>Reduce</b> the percentage of students who seriously considered attempting suicide in the past 12 months to 19.9% by 2029. | SD Youth Risk Behavior Survey   | 21.5% | 2021 | 17.1%    | 2023 | 19.9%  | 2029 |
| 3. <b>Reduce</b> the percentage of students who attempted suicide one or more times during the past 12 months to 9% by 2029.    | SD Youth Risk Behavior Survey   | 11.9% | 2021 | 8.4%     | 2023 | 9.0%   | 2029 |
| 4. <b>Reduce</b> the drug overdose death rate (all drugs) to 10.6 by 2029.  | SD DOH Office of Health Statistics  | 11.6  | 2021 | 11.2     | 2023 | 10.6   | 2029 |
| 5. <b>Increase</b> the 988 Suicide and Crisis Lifeline calls to 4,661 by 2025.  | SD Department of Social Services, SDSP Data and Reports                         | 3,307 | 2021 | 12,072   | 2024 | 4,661  | 2025 |
| 6. <b>Decrease</b> the rate of veteran suicides to 36 by 2029.  | US Department of Veterans Affairs, South Dakota Veteran Suicide Data Sheet 2020 | 39.4  | 2020 | 28.1     | 2022 | 36     | 2029 |

|       |            |          |            |
|-------|------------|----------|------------|
| Alert | Watch List | On Track | Met Target |
|-------|------------|----------|------------|

## Goal 2: Improve behavioral health literacy.

Table 7: Behavioral Health Goal 2 Objectives

| Objective Description  | Source                                       | Base  |      | Progress |      | Target |      |
|--|--|-------|------|----------|------|--------|------|
|  |  | Value | Year | Value    | Year | Value  | Year |
| 1. <b>Decrease</b> the percentage of adults who report their mental health was not good for 20-30 days of the past 30, including stress, depression, and problems with emotions to 5% by 2029. | SD BRFSS                                     | 8%    | 2021 | 9.1%     | 2023 | 5%     | 2029 |
| 2. <b>Increase</b> the percentage of South Dakotans who are receiving treatment for mental health or emotional problems to 18% by 2029.  | SD BRFSS                                     | 14%   | 2021 | 19.4%    | 2023 | 18%    | 2029 |
| 3. <b>Increase</b> the percentage of students who most of the time or always get the kinds of help they need when they feel sad, empty, hopeless, angry, or anxious to 22% by 2029.            | SD Youth Risk Behavior Survey                | 19.8% | 2021 | NA       | 2023 | 22%    | 2029 |
| 4. <b>Increase</b> the percentage of students who asked for help from someone such as a doctor, counselor, or hotline before their suicide attempt during the past 12 months to 20% by 2029.   | SD Youth Risk Behavior Survey                | 16.6% | 2021 | 18.7%    | 2023 | 20%    | 2029 |
| 5. <b>Increase</b> the percentage of Medicaid Health Home recipients who are screened for depression to 88% by 2029.   | SD Medicaid Health Home Data Dashboard, 2022 | 86%   | 2022 | 89%      | 2023 | 88%    | 2029 |
| 6. <b>Increase</b> the percentage of Medicaid Health Home recipients with a positive screen for depression who have a follow-up plan to 87% by 2029.   | SD Medicaid Health Home Data Dashboard, 2022 | 85%   | 2022 | 91%      | 2023 | 87%    | 2029 |

|       |            |          |            |
|-------|------------|----------|------------|
| Alert | Watch List | On Track | Met Target |
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### Goal 3: Increase cultural representation among the behavioral health workforce.

Table 8: Behavioral Health Goal 3 Objectives

| Objective Description  | Project Completion Target |      |      |      |      |      |
|--|---------------------------|------|------|------|------|------|
|  | Base                      | 2025 | 2026 | 2027 | 2028 | 2029 |
| 1. <b>Establish</b> a baseline of cultural representation among the licensed behavioral health professional workforce by 2029. | 0%                        | 0%   |      |      |      | 100% |
| 2. <b>Establish</b> a baseline for the cultural competence training program completion rate in the state by 2029.              | 0%                        | 0%   |      |      |      | 100% |

### Goal 4: Improve care coordination following crisis response interventions.

Table 9: Behavioral Health Goal 4 Objectives

| Objective Description   | Source   | Base                     |      | Progress                  |  | Target |      |
|---|--|--------------------------|------|---------------------------|--|--------|------|
|   |  |                          |      |                           |  |        |      |
| 1. <b>Decrease</b> median wait time of outpatients with psychiatric or mental conditions spent at the emergency department, arrival to departure, to 140 minutes by 2029. | Agency for Healthcare Research and Quality, National Healthcare Quality and Disparities Report, South Dakota | 143                      | 2021 |                           |  | 140    | 2029 |
| 2. <b>Facilitate</b> Community Information Exchange and Health Information Exchange integration by 2027.  |  | Integration in progress. |      | Funding ended 05/31/2025. |  |        | 2027 |
| 3. <b>Increase</b> the percentage of follow up visits within 7 days after hospitalization discharge by 2029.  | SD DOH, Office of Rural Health, 2020 Primary Care Needs Assessment   | 34.2%                    | 2019 |                           |  | 39.7%  | 2029 |

|       |            |          |            |
|-------|------------|----------|------------|
| Alert | Watch List | On Track | Met Target |
|-------|------------|----------|------------|

# Health Priority 3: Care Quality

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**AIM: Elevate preventive health care.**

## Care Quality Goals:

1. Improve early detection through routine screenings and early interventions.  
Early detection is made up of two components: screening and education. Early detection is a major part of improving the quality of life for those who may experience an illness or medical event. Screening for risk factors to aid early detection is expected to positively impact health outcomes. South Dakota has seen growth in early detection, although disparities persist, and rates of early detection of certain diseases are lower in disparate populations.
2. Increase healthy behaviors.  
The risk factors that contribute to acute, chronic disease, and poor health outcomes may be decreased by engaging in healthy behaviors. Preventive care, prenatal care, oral care, regular checkups, and physical activity are all examples of healthy behaviors that each South Dakotan should have the opportunity in which to engage.

## Care Quality Priority Strategies:

- Increase maternal and prenatal care coordination
- Develop a youth health task force to collect feedback on risks and behaviors
- Enhance and integrate cross-agency Medicaid enrollment
- Improve adherence to health care recommendations
- Promote implementation of collaborative care models



## Goal 1: Improve early detection through routine screenings and early interventions.

Table 10: Care Quality Goal 1 Objectives

| Objective Description   | Source   | Base  |           | Progress |      | Target |      |
|---|--|-------|-----------|----------|------|--------|------|
|   |  |       |           |          |      |        |      |
| 1. <b>Improve</b> screening rates for lung/bronchus cancer to 16.4% and   | SDDOH, SD Cancer Registry, SD Cancer Plan 2021-2025            | 14.9% | 2019      | 11.4%    | 2025 | 16.4%  | 2029 |
| <b>decrease</b> lung/bronchus cancer mortality to 35 by 2029.   | CDC, National Cancer Institute, State Cancer Profiles          | 36.2  | 2016-2020 | 32.6     | 2025 | 35     | 2029 |
| 2. <b>Improve</b> screening rates for breast cancer in women aged 50-74 to 86% and  | SDDOH, SD Cancer Registry, SD Cancer Plan 2021-2025            | 80.1% | 2020      | 78.7%    | 2025 | 86%    | 2029 |
| <b>decrease</b> the female breast cancer mortality rate to 17.5 by 2029.  |  | 18.6  | 2019      | 17.2     | 2025 | 17.5   | 2029 |
| 3. <b>Improve</b> the percentage of people with a dentist or dental clinic visit to 73.8% and   | SD BRFSS   | 69.6% | 2022      |          |      | 73.8%  | 2029 |
| <b>decrease</b> late-stage oral cancer detection to 55% by 2029.  | National Cancer Institute, State Cancer Profiles, South Dakota | 57.2% | 2020      | 60.3%    | 2023 | 55%    | 2029 |
| 4. <b>Increase</b> the percentage of individuals who have been told by their healthcare provider that they have prediabetes to 8% and | South Dakota Diabetes State Strategic Plan 2022-2027           | 7%    | 2022      |          |      | 8%     | 2029 |
| <b>decrease</b> prevalence of diagnosed diabetes type 2 to 8.1% by 2029.  | CDC, BRFSS 2022, America's Health Rankings                     | 9.1%  | 2022      | 11.8%    | 2023 | 8%     | 2029 |
| 5. <b>Increase</b> the number of participants who complete Better   | SDDOH, Data Dashboard,   | 460   | 2021      | 433      | 2025 | 741    | 2026 |

| Objective Description   | Source  | Base                      |           | Progress     |      | Target       |      |
|---|---|---------------------------|-----------|--------------|------|--------------|------|
|   |   |                           |           |              |      |              |      |
| Choices Better Health® SD to 741 by <b>2026</b> and   | Cardiovascular Collaborative                                      |                           |           |              |      |              |      |
| <b>decrease</b> the mortality rate due to heart disease to 153 by <b>2026</b> ,   |   | <b>155.1</b>              | 2020      | <b>151.7</b> | 2023 | <b>153</b>   | 2026 |
| with emphasis on American Indian population.  |   | <b>258.3</b>              | 2020      | <b>288.7</b> | 2022 | <b>253.3</b> | 2026 |
| 6. <b>Improve</b> screening rates for colorectal cancer to 80% and  | SDDOH, SD Cancer Registry, SD Cancer Plan 2021-2025               | <b>69.1%</b>              | 2019      | <b>63.1%</b> | 2025 | <b>80%</b>   | 2025 |
| <b>decrease</b> colorectal cancer mortality rate to 14 by <b>2025</b> .   | SDDOH, SD Cancer Registry, Colorectal Cancer in SD, May 2023      | <b>14.2</b>               | 2016-2020 | <b>13.6</b>  | 2025 | <b>14</b>    | 2025 |
| 7. <b>Increase</b> the percentage screening for syphilis in pregnant women, and to reduce the rate of congenital syphilis to 138.2 by 2029.   | CDC, Sexually Transmitted Disease Surveillance 2021, Table 20     | <b>140.7</b>              | 2021      | <b>762.6</b> | 2023 | <b>138.2</b> | 2029 |
| <b>1)</b> three times during pregnancy  | SDDOH, Syphilis Outbreak Plan                                     | <b>Establish Baseline</b> |           |              |      |              |      |
| <b>2)</b> all women delivering a stillbirth,  |   | <b>5</b>                  | 2024      |              |      |              |      |
| 8. <b>Increase</b> Screening, Brief Intervention, and Referral to Treatment (SBIRT) or other standard screening protocol administration in primary care locations for <b>alcohol</b> to 81.8% | SD DOH, Office of Rural Health 2020 Primary Care Needs Assessment | <b>80%</b>                | 2020      | <b>71.8%</b> | 2023 | <b>81.8%</b> | 2029 |
| and <b>drug use</b> to 74% by 2029.   |   | <b>73%</b>                | 2020      | <b>70.5%</b> | 2021 | <b>74%</b>   | 2029 |

|       |            |          |            |
|-------|------------|----------|------------|
| Alert | Watch List | On Track | Met Target |
|-------|------------|----------|------------|

## Goal 2: Increase healthy behaviors.

Table 11: Care Quality Goal 2 Objectives

| Objective Description  | Source  | Base              |      | Progress          |      | Target            |      |
|--|---|-------------------|------|-------------------|------|-------------------|------|
|  |   |                   |      |                   |      |                   |      |
| 1. <b>Increase</b> the percentage of South Dakotans who report visiting their doctor for a routine checkup within the last year to 83% by <b>2026</b> .  | SDDOH, Data Dashboards, Cardiovascular Collaborative          | <b>76.2%</b>      | 2020 | <b>75.8%</b>      | 2022 | <b>83.2%</b>      | 2026 |
| 2. <b>Increase</b> the percentage of adults with high blood pressure who regularly check their blood pressure to 65% by <b>2026</b> .  | SDDOH, Data Dashboards, Cardiovascular Collaborative          | <b>63%</b>        | 2019 | <b>57%</b>        | 2021 | <b>65%</b>        | 2026 |
| 3. <b>Decrease</b> the percentage of adults who currently use commercial tobacco products (smoke cigarettes, use smokeless tobacco or use E-cigarettes) to 21% by 2029.                              | SD BRFSS  | <b>24%</b>        | 2021 | <b>23.4%</b>      | 2023 | <b>21%</b>        | 2029 |
| 4. <b>Decrease</b> the percentage of youth who currently smoke cigarettes or cigars, used smokeless tobacco or electronic vapor products on at least 1 day during the last 30 days to 13.5% by 2029. | SD YRBS   | <b>16.5%</b>      | 2021 | <b>6%</b>         | 2023 | <b>13.5%</b>      | 2029 |
| 5. <b>Increase</b> the average number of years a South Dakotan can expect to live to 80.2 years by 2029,   | National Center for Health Statistics, County Health Rankings | <b>78.2 years</b> | 2022 | <b>76.6 years</b> | 2025 | <b>80.2 years</b> | 2029 |
| with <b>emphasis</b> on counties where the life expectancy falls below the SD average.   |   |                   |      |                   |      |                   | 2029 |
| 6. <b>Decrease</b> the percentage of adults and youth who report binge drinking to 18% of adults and   | SD BRFSS  | <b>20%</b>        | 2021 | <b>19.8%</b>      | 2023 | <b>18%</b>        | 2029 |

| Objective Description   | Source   | Base  |      | Progress |      | Target |      |
|---|--|-------|------|----------|------|--------|------|
|   |  |       |      |          |      |        |      |
| 9.1% of youth by 2029.  | SD YRBS  | 11.1% | 2021 | 11.1%    | 2023 | 9.1%   | 2029 |
| 7. <b>Increase</b> the percentage of adults and youth who engage in physical activity to 80% of adults and  | SD BRFSS   | 77%   | 2021 | 74.30%   | 2023 | 80%    | 2029 |
| 53.2% of youth by 2029.   | SD YRBS  | 51.2% |      | 53.2%    | 2023 | 53.2%  | 2029 |
| 8. <b>Decrease</b> the percentage of South Dakotans who are obese. Adults with a BMI of 30+ to 36%,   | SD BRFSS   | 38%   | 2021 | 36%      | 2023 | 36%    | 2029 |
| adults with a BMI of 35+ to 11%,  |  | 13%   | 2021 | 17.60%   | 2023 | 11%    | 2029 |
| adults with a BMI of 40+ to 3% and  |  | 5%    | 2021 | 8%       | 2023 | 3%     | 2029 |
| youth who are obese to 14.6% by 2029.   | SD YRBS  | 16.6% | 2021 | 15.5%    | 2023 | 14.6%  | 2029 |
| 9. <b>Increase</b> the percentage of pregnant women, who have had a live birth, who receive prenatal care in the first four months of pregnancy to 85.5% by 2029, with emphasis on <b>American Indian</b> population. | America's Health Rankings, March of Dimes, Perinatal Data Center | 75.5% | 2021 | 76.7%    | 2022 | 85.5%  | 2029 |
| 10. <b>Increase</b> the percentage of youth who reported eating vegetables one or more times per day during the past seven days to 58.1% 2029.  | SD YRBS  | 55.1% | 2021 | 56%      | 2023 | 58.1%  | 2029 |
| 11. <b>Increase</b> the percentage of SD females aged 18-49 who are currently using birth control to 90% by 2026.   | SD BRFSS   | 83%   | 2021 | 82.6%    | 2021 | 90%    | 2026 |
| 12. <b>Increase</b> the proportion of women delivering a live birth who discussed preconception health with a   | SDDOH, 2020 PRAMS Surveillance Data Report, Jan 2022             | 25%   | 2020 | 16.1%    | 2022 | 27%    | 2029 |

| Objective Description  | Source  | Base  |      | Progress |      | Target |      |
|--|---|-------|------|----------|------|--------|------|
|  |   |       |      |          |      |        |      |
| healthcare worker prior to pregnancy to 27% by 2029.   |   |       |      |          |      |        |      |
| 13. <b>Increase</b> the percentage of students who are sexually active, who used a condom to 57.3% by 2029.            | SD YRBS   | 52.3% | 2021 | 47.4%    | 2023 | 57.3%  | 2029 |
| 14. <b>Increase</b> the percentage of students who have had oral health care during the last 12 months to 80% by 2029. | SD YRBS   | 76.2% | 2022 | 76.4%    | 2023 | 80%    | 2029 |
| 15. <b>Increase</b> breastfeeding initiation percentage to 84% and   | National Vital Statistics System, Birth Certificates                                    | 80.7% | 2021 | 91.1%    | 2025 | 84%    | 2029 |
| <b>decrease</b> the disparity percentage between racial/ethnic groups and the state rate to 19.5% by 2029.             | 2020 SD Breastfeeding Report, CDC, National Vital Statistics System, Birth Certificates | 23.5% | 2021 | 12.7%    | 2025 | 19.5%  | 2029 |

|       |            |          |            |
|-------|------------|----------|------------|
| Alert | Watch List | On Track | Met Target |
|-------|------------|----------|------------|

# Aligning, Monitoring, and Evaluating

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As the SHIP becomes the primary and expert resource for establishing and maintaining health policies and laws, the SHIC members will be actively engaged in ensuring alignment, monitoring, and evaluating progress. Alignment with existing plans or program objectives enhances ownership, accountability, and collaboration throughout the public health system. Using a collection of measurable objectives, progress toward achieving the goals of the SHIP can be monitored and evaluated.

## State Health Improvement Coalition

The State Health Improvement Coalition (SHIC) was established in June 2022 to guide the development of the State Health Improvement Plan (SHIP) and support efforts to promote alignment, monitor progress, and evaluate outcomes. SHIC members engaged in a collaborative effort to develop a health assessment and health improvement plan by participating in data collection activities, attending multiple in-person and virtual sessions focused on prioritizing health challenges and identifying potential solutions.

Membership consists of representatives from 24 key stakeholders who share a commitment to improve health and quality of life for South Dakotans.

### Represented SHIC Member Organizations

- Avera Health
- Black Hills Special Services Cooperative
- City of Sioux Falls Health Department
- Disability Rights of South Dakota
- Helpline Center
- Horizon Health Care
- Indian Health Services
- Lutheran Social Services
- Monument Health
- Pennington County Health & Human Services
- Sanford Health
- South Dakota Association of Healthcare Organizations
- South Dakota Council of Community Behavioral Health
- South Dakota Department of Education
- South Dakota Department of Health
- South Dakota Department of Labor & Regulation
- South Dakota Department of Social Services
- South Dakota Department of Transportation
- South Dakota Department of Tribal Relations
- South Dakota Department of Veterans Affairs
- South Dakota Sheriff's Association
- South Dakota State University Extension
- Wellmark Blue Cross Blue Shield
- WIC Breastfeeding Peer Counselor Program

## 2025 South Dakota Legislative Action

### Bill Activity by Health Category

| Category  | Bill                     | Title  | Disposition                     |
|---|--------------------------|--|---------------------------------|
| 911 Surcharge   | <a href="#">SB 019</a>   | repeal the expiration date for the 911 emergency surcharge increase.   | Tabled                          |
| 911 Surcharge and Reporting                           | <a href="#">SB 037</a>   | Revise and repeal provisions related to the 911 emergency surcharge and the 911 Coordination Board.  | <b>Signed by Governor</b>       |
| Advanced Life Support Supervision                     | <a href="#">HB 1014</a>  | modify provisions related to emergency medical services personnel and to declare an emergency.   | <b>Signed by Governor</b>       |
| Appropriation for Victim Services & Nonprofit Support | <a href="#">HB 1221</a>  | make an appropriation for victim services provided by nonprofit organizations.   | <b>Signed by Governor</b>       |
| Cash Payments   | <a href="#">HB 1048</a>  | require that cash be accepted for certain transactions.  | Deferred to 41st day            |
| Chiropractor and Optometrist Recruitment              | <a href="#">SB 086</a>   | expand eligibility for the rural recruitment assistance program to include chiropractors and optometrists.   | Tabled                          |
| Collection and Reporting                              | <a href="#">HB 1058</a>  | prohibit the collecting and reporting of medical debt in certain situations and to provide a penalty, therefore.   | Killed on House Floor           |
| Constitutional Amendments                             | <a href="#">HJR 5003</a> | Proposing and submitting to the voters at the next general election an amendment to the Constitution of the State of South Dakota, requiring a constitutional amendment receive an affirmative vote of two-thirds of the votes cast before the measure is enacted. | Delivered to Secretary of State |
| Controlled Substance List                             | <a href="#">SB 035</a>   | modify substances listed on the controlled substances schedule and declare an emergency.   | <b>Signed by Governor</b>       |
| Dietitian Licensure                                   | <a href="#">HB 1144</a>  | adopt the dietitian licensure compact.   | <b>Signed by Governor</b>       |
| Drug Testing  | <a href="#">HB 1146</a>  | require hospitals to implement drug testing programs.  | Tabled                          |
| Emergency Medical Services                            | <a href="#">HB 1219</a>  | require counties and municipalities to provide emergency medical services within their jurisdictions   | Deferred to 41st day            |

| Category                                    | Bill                    | Title  | Disposition               |
|---|-------------------------|--|---------------------------|
| Emergency Services Regulations              | <a href="#">SB 077</a>  | update terminology related to ambulance operators  | <b>Signed by Governor</b> |
| Funding for Caregivers                      | <a href="#">HB 1098</a> | make an appropriation to the Department of Human Services for reimbursing the cost of respite care services for caregivers of individuals with dementia and to declare an emergency  | Tabled                    |
| Government Authority & Public Health Policy | <a href="#">HB 1152</a> | prohibit the enforcement and implementation of directives from the United States Centers for Disease Control and intergovernmental organizations, and to provide a penalty therefor. | Killed on House Floor     |
| Health Care Exemptions                      | <a href="#">HB 1223</a> | provide for conscience exemptions from certain medical treatments.   | Killed on House Floor     |
| Health Care Reporting                       | <a href="#">HB 1225</a> | update and repeal provisions related to the reporting of hospital charge information   | <b>Signed by Governor</b> |
| Health Insurance Policy                     | <a href="#">HB 1070</a> | prohibit cost-sharing in certain health insurance policies for diagnostic and supplemental breast imaging examinations.  | Deferred to 41st day      |
| Health Insurance Policy                     | <a href="#">HB 1112</a> | require the coverage of biomarker testing in certain health insurance policies.  | Deferred to 41st day      |
| Health Resources Allocation                 | <a href="#">SB 099</a>  | make an appropriation for purchasing, storing, and distributing sexual assault kits.   | <b>Signed by Governor</b> |
| HealthCare & Minors' Rights                 | <a href="#">HB 1248</a> | clarify informed consent requirements for the provision of prenatal and postnatal care to a minor.   | Withdrawn                 |
| Healthcare Data Reporting                   | <a href="#">HB 1102</a> | require the submission of medical, dental, and pharmaceutical claims data to the Division of Insurance and to establish a health care data system.                                   | Tabled                    |
| Healthcare Education Development            | <a href="#">HB 1110</a> | make an appropriation to the South Dakota Board of Technical Education to provide a grant to Southeast Technical College for the purchase of the healthcare simulation center.       | Effective 6/30/25         |
| Healthcare Workforce Development            | <a href="#">HB 1097</a> | establish and modify provisions for the temporary training of nonresident physicians.  | <b>Signed by Governor</b> |
| Healthcare Workforce                        | <a href="#">SB 194</a>  | classify nicotine products as tobacco products, increase tax rates on cigarettes   | Tabled                    |



| Category                              | Bill                     | Title  | Disposition                            |
|---------------------------------------|--------------------------|--|--|
| Development Fund                      |                          | and tobacco products, to create the healthcare workforce development fund, and to make an appropriation therefore.   |  |
| Investigative Authority               | <a href="#">SB 060</a>   | To expand the access and investigatory authority of the state auditor.   | <b>Signed by Governor</b>              |
| Investigative Treatments              | <a href="#">HB 1139</a>  | allow individualized investigative treatments for patients with life-threatening or debilitating diseases or conditions  | <b>Signed by Governor</b>              |
| Kratom                                | <a href="#">HB 1056</a>  | prohibit the preparation, sale, and distribution of certain kratom products and to provide a penalty, therefore.   | <b>Signed by Governor</b>              |
| Licensing and Regulation              | <a href="#">SB 110</a>   | revise licensure and supervision requirements for physical therapists and physical therapist assistants  | <b>Signed by Governor</b>              |
| Long-Term Care Reporting Requirements | <a href="#">SB 076</a>   | repeal reporting and testifying requirements to the committees on health and human services regarding nursing facilities and long-term healthcare needs  | <b>Signed by Governor</b>              |
| Medicaid Expansion                    | <a href="#">HJR 5001</a> | Proposing and submitting to the voters at the next general election an amendment to the Constitution of the State of South Dakota, conditioning the requirement of expanded Medicaid on the level of federal medical assistance. | <b>Delivered to Secretary of State</b> |
| Medical Cannabis                      | <a href="#">HB 1055</a>  | modify medical cannabis certification requirements   | Deferred to 41st day                   |
| Medical Cannabis                      | <a href="#">HB 1209</a>  | repeal authorization for the use of medical cannabis by a probationer or parolee   | Withdrawn                              |
| Medical Debt Reporting                | <a href="#">HB 1210</a>  | prohibit a hospital from reporting medical debt for collection in certain situations   | Killed in Committee                    |
| Medical Marijuana                     | <a href="#">HB 1101</a>  | repeal provisions related to medical marijuana.  | Deferred to 41st day                   |
| Medical Records of a Minor            | <a href="#">HB 1061</a>  | prohibit a health care provider from restricting or denying a parent or guardian's access to certain medical records and other health information of a minor.  | <b>Signed by Governor</b>              |
| Mental Health Education               | <a href="#">HB 1077</a>  | provide for the inclusion of education regarding mental health in the South Dakota health education standards.   | Tabled                                 |
| Newborn Safety Device                 | <a href="#">HB 1044</a>  | authorize the use of a newborn safety device for the voluntary surrender of a newborn and to make clarifying changes.  | <b>Signed by Governor</b>              |

| Category                                  | Bill                    | Title   | Disposition               |
|---|-------------------------|---|---------------------------|
| Opioid Antagonists                        | <a href="#">HB 1141</a> | provide an exception for employers to acquire and distribute opioid antagonists that are available over the counter.  | <b>Signed by Governor</b> |
| Pain Treatment                            | <a href="#">HB 1137</a> | establish provisions related to the treatment of pain with non-opioid drugs.  | <b>Signed by Governor</b> |
| Paramedic Endorsement                     | <a href="#">HB 1099</a> | modify the community paramedic endorsement  | <b>Signed by Governor</b> |
| Parental Rights                           | <a href="#">SB 113</a>  | Provide protections for parental rights.  | Conference Committee      |
| Pharmaceutical Regulations / 340B Program | <a href="#">SB 154</a>  | prohibit pharmaceutical manufacturers and wholesale drug distributors from interfering in contracts between 340B entities and pharmacies and to provide a penalty, therefore. | <b>Signed by Governor</b> |
| Pharmacy License Fees                     | <a href="#">HB 1016</a> | Revise provisions related to pharmacy.  | <b>Signed by Governor</b> |
| Practice Regulations                      | <a href="#">HB 1071</a> | modify practice criteria for physician assistants   | <b>Signed by Governor</b> |
| Practice Regulations                      | <a href="#">SB 102</a>  | revise provisions related to the practice of physician assistants   | Deferred to 41st day      |
| Preauthorization Requirements             | <a href="#">SB 158</a>  | address preauthorization requirements for certain health care services and utilization review requirements for certain health benefit plans.                                  | Effective 6/30/25         |
| Prior Authorization                       | <a href="#">SB 087</a>  | address preauthorization requirements for certain health care services and utilization review requirements for certain health benefit plans.                                  | Withdrawn                 |
| Prior Year General Bill                   | <a href="#">HB 1046</a> | Revise the General Appropriations Act for fiscal year 2025.   | <b>Signed by Governor</b> |
| Public Health Policy                      | <a href="#">HB 1078</a> | establish provisions related to the disclosure of COVID-19 vaccination status and blood donations   | Deferred to 41st day      |
| Recruitment Assistance Programs           | <a href="#">HB 1047</a> | make an appropriation to reimburse health care professionals who have complied with the requirements for rural recruitment assistance programs, and to declare an emergency.  | <b>Signed by Governor</b> |
| Renal Disease                             | <a href="#">HB 1006</a> | repeal provisions for state assistance to people experiencing chronic renal failure.  | Deferred to 41st day      |
| Rural EMS                                 | <a href="#">HB 1043</a> | require counties and municipalities to provide emergency medical services within  | Tabled                    |

| Category           | Bill                    | Title  | Disposition         |
|--------------------|-------------------------|--|---------------------|
|                    |                         | their jurisdictions, increase liquidated court costs, and create the emergency medical services fund and make an appropriation, therefore. |                     |
| Telehealth Kiosks  | <a href="#">HB 1111</a> | make an appropriation for grants to support the purchase of telehealth kiosks.   | Effective 6/30/25   |
| Water Fluoridation | <a href="#">SB 133</a>  | repeal enforcement provisions and modify requirements related to the fluoridation of public water supplies.                                | Killed in Committee |

## State Agency Guiding Documents

The current index of state agency strategic plans, assessments, and other key data collections is updated to reduce duplication and reinforce collaboration and alignment.

| Agency   | Guiding Document  | Date                                    |
|--|---|---|
| Department of Health (DOH)   | <a href="#">State Health Assessment</a>   | 2023                                    |
|  | <a href="#">Strategic Plan</a>  | 2025-2027                               |
|  | <a href="#">Tobacco State Plan</a>  | 2020-2025                               |
|  | <a href="#">Chronic Disease State Plan</a>                                      | 2022-2027                               |
|  | <a href="#">Diabetes State Strategic Plan</a>                                   | 2022-2027                               |
|  | <a href="#">Oral Health Plan</a>  | 2022-2027                               |
| DOH Office of Chronic Disease Prevention and Health Promotion Statewide Coalitions |   |   |
| <a href="#">SD Suicide Prevention</a>  | <a href="#">SD Suicide Prevention State Plan</a>                                | 2025-2030                               |
| <a href="#">Let's Be Clear</a>   | <a href="#">SD Opioid Abuse Strategic Plan</a>                                  | 2025-2030                               |
| <a href="#">Cancer Coalition</a>   | <a href="#">SD Cancer Plan</a>  | 2021-2025<br>(partial updates Feb 2025) |
| <a href="#">Cardiovascular Collaborative</a>                                       | <a href="#">Cardiovascular Collaborative Strategic Plan</a>                     | 2022-2026                               |
| Department of Social Services (DSS)  | <a href="#">Behavioral Health Prevention Services Strategic Plan</a>            | 2023-2028                               |
|  | <a href="#">Prevention Strategic Plan</a>                                       | 2023-2028                               |
|  | <a href="#">Suicide Prevention Strategic Plan</a>                               | 2020-2025                               |
|  | Workforce Assessment – In Progress  | 2024-                                   |
| DOH/DSS  | <a href="#">Statewide Targeted Response to the Opioid Crisis Strategic Plan</a> | October 2017                            |
|  | <a href="#">Connect SD Five Year Action Plan</a>                                | 2023-2028                               |

| Agency                                    | Guiding Document                                    | Date |
|---|---|------|
| Governor's Office of Economic Development | <a href="#">Connect SD Digital Opportunity Plan</a> | 2024 |

## South Dakota Department of Health Data and Reports

- [American Indian Health Data Book](#)
- [Chronic Disease Data & Reports](#)
- [Data Dashboards](#)
- [Health Behaviors of South Dakotans Reports](#)
- [Infectious & Communicative Disease Data & Reports](#)
- [Injury Prevention](#)
- [Maternal Child Health](#)
- [Office of Health Statistics](#)
- [Oral Health Data & Reports](#)
- [Sexually Transmitted Infections Data & Reports](#)
- [SD Health Care Workforce Data](#)
- [Substance Use Data & Reports](#)
- [Youth Risk Behavior Survey \(YRBS\) Data & Reports](#)
- [Vital Reports](#)

## Key Health Improvement Partners

Stakeholder work groups have been established for each health priority area. Members collaborate to prioritize goals and objectives and implement strategies and activities.

| State Agencies  | Access to Care | Behavioral Health | Care Quality |
|---|----------------|-------------------|--------------|
| <a href="#">Department of Education (DOE)</a>   | X              | X                 | X            |
| <a href="#">Department of Health (DOH)</a>  | X              | X                 | X            |
| <a href="#">Department of Human Services (DHS)</a>  | X              | X                 | X            |
| <a href="#">Department of Labor and Regulation (DLR)</a>  | X              | X                 |              |
| <a href="#">Department of Social Services (DSS)</a>   | X              | X                 | X            |
| <a href="#">Department of Tribal Relations (DTR)</a>  | X              | X                 | X            |
| <a href="#">Department of Veterans Affairs (DVA)</a>  | X              | X                 | X            |
| <a href="#">Governor's Office of Economic Development (GOED)</a>  | X              |                   |              |
| <a href="#">Office of Health Statistics (OHS)</a>   | X              | X                 | X            |
| <a href="#">South Dakota Board of Regents (BOR)</a>   | X              | X                 | X            |
| <ul style="list-style-type: none"> <li>• <a href="#">Black Hills State University (BHSU)</a></li> <li>• <a href="#">Dakota State University (DSU)</a></li> <li>• <a href="#">Northern State University (NSU)</a></li> </ul> |                |                   |              |

|   |   |   |   |
|---|---|---|---|
| <ul style="list-style-type: none"> <li>• <a href="#">South Dakota State University (SDSU)</a></li> <li>• <a href="#">South Dakota School of Mines and Technology (SDSMT)</a></li> <li>• <a href="#">University of South Dakota (USD)</a></li> </ul>         |   |   |   |
| <a href="#">South Dakota Board of Technical Education</a>   | X | X | X |
| <ul style="list-style-type: none"> <li>• <a href="#">Lake Area Technical College</a></li> <li>• <a href="#">Mitchell Tech</a></li> <li>• <a href="#">Southeast Technical College</a></li> <li>• <a href="#">Western Dakota Technical College</a></li> </ul> |   |   |   |

| <b>Community and Healthcare Organizations</b>   | <b>Access to Care</b> | <b>Behavioral Health</b> | <b>Care Quality</b> |
|---|-----------------------|--------------------------|---------------------|
| <a href="#">AARP SD</a>   | X                     | X                        | X                   |
| <a href="#">ALS Association South Dakota</a>  |                       |                          |                     |
| <a href="#">American Cancer Society- SD</a>   |                       |                          | X                   |
| <a href="#">American Heart Association</a>  | X                     |                          | X                   |
| <a href="#">American Lung Association</a>   |                       |                          | X                   |
| <a href="#">Black Hills Special Services Cooperative</a>  | X                     |                          | X                   |
| <a href="#">Center for the Prevention of Child Maltreatment</a>   |                       |                          |                     |
| <a href="#">Community Health Worker Collaborative of South Dakota</a>   | X                     | X                        | X                   |
| <a href="#">Community Healthcare Association of the Dakotas (CHAD)</a>  | X                     | X                        | X                   |
| <a href="#">Community Mental Health Centers</a>   |                       | X                        |                     |
| <a href="#">Delta Dental</a>  | X                     |                          | X                   |
| <a href="#">Federally Qualified Healthcare Centers (FQHC)</a>   | X                     | X                        | X                   |
| <a href="#">Great Plains Indian Health Services (IHS)</a>   | X                     | X                        | X                   |
| <a href="#">Great Plains Tribal Leaders Health Board</a>  | X                     | X                        | X                   |
| <a href="#">Helpline Center</a>   | X                     | X                        |                     |
| Healthcare Systems  | X                     | X                        | X                   |
| <ul style="list-style-type: none"> <li>• <a href="#">Avera Health</a></li> <li>• <a href="#">Monument Health</a></li> <li>• <a href="#">Sanford Health</a></li> </ul> |                       |                          |                     |
| Internet providers<br>Midco, CenturyLink, T-Mobile, Bluepeak, GoldenWest, etc.  | X                     |                          |                     |
| <a href="#">Leukemia and Lymphoma Society</a>   |                       |                          | X                   |
| <a href="#">South Dakota Area Health Education Centers</a>  |                       | X                        |                     |
| <a href="#">South Dakota Association of Healthcare Organizations</a>  | X                     | X                        | X                   |

|   |   |   |   |
|---|---|---|---|
| <a href="#">South Dakota Council of Community Behavioral Health</a>   |   | X |   |
| <a href="#">South Dakota Foundation for Medical Care (SDFMC)</a>  | X | X | X |
| <a href="#">South Dakota Health Link</a>  |   | X | X |
| <a href="#">South Dakota School Counselor Association</a>   |   | X |   |
| <a href="#">South Dakota State University Extension</a>   | X | X | X |
| <a href="#">South Dakota Urban Indian Health</a>  | X | X | X |
| <a href="#">South Dakota Voices for Peace</a>   | X |   |   |
| <a href="#">St. Francis Mission</a>   | X | X | X |
| <a href="#">Substance Abuse and Addiction Treatment Centers</a>   |   | X | X |
| <a href="#">Tribal colleges and universities:</a>   | X | X |   |
| <ul style="list-style-type: none"> <li>• <a href="#">Ogalala Lakota College</a></li> <li>• <a href="#">Sinte Gleska University</a></li> <li>• <a href="#">Sisseton Wahpeton College</a></li> <li>• <a href="#">Sitting Bull College</a></li> </ul>  |   |   |   |
| <a href="#">United Way:</a>   | X |   |   |
| <ul style="list-style-type: none"> <li>• <a href="#">Sioux Empire United Way</a></li> <li>• <a href="#">United Way of Black Hills</a></li> <li>• <a href="#">United Way of Greater Yankton</a></li> <li>• <a href="#">United Way of Northeastern South Dakota</a></li> <li>• <a href="#">Watertown Area United Way</a></li> </ul> |   |   |   |
| <a href="#">Wellmark Blue Cross Blue Shield of South Dakota</a>   | X | X | X |

| <b>Health Profession Associations</b>  | <b>Access to Care</b> | <b>Behavioral Health</b> | <b>Care Quality</b> |
|--|-----------------------|--------------------------|---------------------|
| <a href="#">American College of Healthcare Executives – South Dakota Chapter</a>           | X                     | X                        | X                   |
| <a href="#">National Association of Social Workers – South Dakota Chapter</a>              | X                     | X                        | X                   |
| <a href="#">Northern Plains Association of Healthcare Materials Management</a>             |                       |                          |                     |
| <a href="#">Nurse Practitioner Association of South Dakota</a>                             | X                     | X                        | X                   |
| <a href="#">Siouxland Chapter of the Clinical Laboratory Management Association (CLMA)</a> |                       | X                        | X                   |
| Social Services in Long Term Care  |                       |                          |                     |
| <a href="#">South Dakota Academy of Family Physicians (SDAFP)</a>                          |                       | X                        | X                   |
| <a href="#">South Dakota Academy of Physician Assistants</a>                               |                       |                          |                     |
| <a href="#">South Dakota Association for Healthcare Quality (SDAHQ)</a>                    |                       |                          | X                   |

| <b>Health Profession Associations</b>   | <b>Access to Care</b> | <b>Behavioral Health</b> | <b>Care Quality</b> |
|---|-----------------------|--------------------------|---------------------|
| South Dakota Association of Healthcare Marketing and Public Relations (SDAHMPR)                   | X                     |                          | X                   |
| <a href="#"><u>South Dakota Association of Nurse Anesthetists</u></a>                             |                       |                          | X                   |
| <a href="#"><u>South Dakota Engineering Society</u></a>   |                       |                          | X                   |
| <a href="#"><u>South Dakota Health Information Management Association (SDHIMA)</u></a>            | X                     |                          |                     |
| <a href="#"><u>South Dakota Healthcare Financial Management Association (SDHFMA)</u></a>          | X                     |                          |                     |
| <a href="#"><u>South Dakota Healthcare Information and Management Systems Society (HIMSS)</u></a> | X                     |                          |                     |
| <a href="#"><u>South Dakota Nurses Association (SDNA)</u></a>                                     | X                     | X                        | X                   |
| <a href="#"><u>South Dakota Occupational Therapy Association</u></a>                              | X                     |                          | X                   |
| <a href="#"><u>South Dakota Organization of Nurse Leaders</u></a>                                 | X                     | X                        | X                   |
| <a href="#"><u>South Dakota Pharmacists Association</u></a>                                       | X                     | X                        | X                   |
| <a href="#"><u>South Dakota Physical Therapy Association</u></a>                                  |                       | X                        | X                   |
| South Dakota Public Health Association  | X                     | X                        | X                   |
| <a href="#"><u>South Dakota Society for Human Resources Management State Council</u></a>          | X                     |                          | X                   |
| <a href="#"><u>South Dakota State Medical Association (SDSMA)</u></a>                             |                       |                          | X                   |

## Community Health Needs Assessment (CHNA)

Communities in South Dakota actively assess health needs and develop corresponding action plans. The Community Health Needs Assessment (CHNA) process is a valuable tool for ongoing monitoring and tracking of health improvement. This CHNA crosswalk will be updated with each three-year cycle to compare community focus areas with SHIP priorities.

| Organization                                       | Health System | Year      | Access to Care | Behavioral Health | Nutrition, Physical Activity & Weight | Potentially Disabling Conditions /Chronic Disease | Health Literacy & Education | SDOH |
|--|---------------|-----------|----------------|-------------------|---------------------------------------|---|-----------------------------|------|
| <a href="#">De Smet Memorial Hospital</a>          | Avera         | 2025      | x              | x                 | x                                     | x   |                             | x    |
| <a href="#">Dell Rapids Area Hospital</a>          | Avera         | 2025      | x              | x                 |                                       |   |                             |      |
| <a href="#">Douglas Co Memorial Hospital</a>       | Avera         | 2022      | x              | x                 |                                       |   |                             |      |
| <a href="#">Eureka Community Health Services</a>   | Avera         | 2025      |                | x                 |                                       |   | x                           |      |
| <a href="#">Flandreau Hospital</a>                 | Avera         | 2025      | x              |                   |                                       |   |                             |      |
| <a href="#">Gregory Hospital</a>                   | Avera         | 2025      |                | x                 | x                                     |   |                             |      |
| <a href="#">Hand Co Memorial Hospital</a>          | Avera         | 2025      |                | x                 | x                                     | x   | x                           |      |
| <a href="#">Landmann-Jungman Memorial Hospital</a> | Avera         | 2025      | x              | x                 | x                                     | x   | x                           | x    |
| <a href="#">Marshall County Healthcare</a>         | Avera         | 2025-2027 | x              |                   |                                       |   |                             |      |
| <a href="#">Milbank Area Hospital</a>              | Avera         | 2025      |                |                   | x                                     | x   | x                           | x    |
| <a href="#">Missouri River Health Center</a>       | Avera         | 2025      | x              | x                 |                                       |   |                             |      |
| <a href="#">Platte Health Center</a>               | Avera         | 2025      | x              | x                 |                                       | x   | x                           | x    |
| <a href="#">Queen of Peace Hospital</a>            | Avera         | 2025      | x              | x                 |                                       |   |                             |      |



| Organization  | Health System | Year      | Access to Care | Behavioral Health | Nutrition, Physical Activity & Weight | Potentially Disabling Conditions /Chronic Disease | Health Literacy & Education | SDOH             |
|---|---------------|-----------|----------------|-------------------|---------------------------------------|---|-----------------------------|------------------|
| <a href="#"><u>Sacred Heart Hospital</u></a>              | Avera         | 2025      |                | x                 |                                       | x   |                             |                  |
| <a href="#"><u>St Luke's Hospital</u></a>                 | Avera         | 2025      | x              | x                 |                                       |   |                             |                  |
| <a href="#"><u>St Mary's Hospital</u></a>                 | Avera         | 2025      |                | x                 | x                                     |   |                             |                  |
| <a href="#"><u>St. Benedict Health Center</u></a>         | Avera         | 2025      |                | x                 | x                                     |   |                             |                  |
| <a href="#"><u>Wagner Community Memorial Hospital</u></a> | Avera         | 2025      |                | x                 |                                       |   |                             |                  |
| <a href="#"><u>Weskota Memorial Hospital</u></a>          | Avera         | 2025      | x              | x                 | x                                     |   | x                           | x                |
| <a href="#"><u>Aberdeen Medical Center</u></a>            | Sanford       | 2025-2027 | x              |                   |                                       |   |                             | x-Transportation |
| <a href="#"><u>Canton-Inwood Medical Center</u></a>       | Sanford       | 2025-2027 |                | x                 |                                       |   |                             | x- Housing       |
| <a href="#"><u>Chamberlain Medical Center</u></a>         | Sanford       | 2025-2027 |                | x                 |                                       | x   |                             |                  |
| <a href="#"><u>Clear Lake Medical Center</u></a>          | Sanford       | 2025-2027 | x              |                   |                                       |   |                             | x-Transportation |
| <a href="#"><u>Community Memorial Hospital Inc.</u></a>   | Sanford       | 2022-2024 | x              |                   | x                                     |   |                             |                  |
| <a href="#"><u>Vermillion Medical Center</u></a>          | Sanford       | 2025-2027 | x              |                   | x                                     |   | x                           |                  |
| <a href="#"><u>Webster Medical Center</u></a>             | Sanford       | 2025-2027 | x              |                   | x                                     |   |                             |                  |

| Organization  | Health System     | Year      | Access to Care | Behavioral Health | Nutrition, Physical Activity & Weight | Potentially Disabling Conditions /Chronic Disease | Health Literacy & Education | SDOH  |
|---|-------------------|-----------|----------------|-------------------|---------------------------------------|---|-----------------------------|-------|
| <a href="#">City of Sioux Falls</a>                             | Multiple Partners | 2025      | x              | x                 | x                                     | x   |                             | x     |
| <a href="#">LifeScope Sioux Falls</a>                           |                   | 2025      | x              | x                 |                                       |   | x                           |       |
| <a href="#">Monument Health</a>                                 | Monument          | 2025      | x              | x                 | x                                     | x   |                             |       |
| <a href="#">Pioneer Memorial Hospital &amp; Health Services</a> | Sanford           | 2022-2024 | x              |                   | x                                     |   |                             |       |
| <a href="#">Prairie Lakes Healthcare System</a>                 |                   | 2025      | x              | x                 | x                                     |   | x                           | x     |
| <a href="#">United Way of the Black Hills</a>                   | Multiple Partners | 2019      |                | x                 |                                       |   |                             | x     |
| <a href="#">USD Medical Center</a>                              | Sanford           | 2025-2027 | x              | x                 | x                                     | x   |                             |       |
| <a href="#">Winner Regional Health</a>                          | Sanford           | 2022-2024 | x              |                   |                                       |   |                             |       |
| N=34 Assessments  |                   |           | 23             | 24                | 16                                    | 10  | 9                           | 11    |
| Percent of assessments with shared focus areas                  |                   |           | 67.6%          | 70.6%             | 47%                                   | 29.4%   | 26.5%                       | 32.4% |
| Increase/Decrease since 2022                                    |                   |           | +3             | -                 | +3                                    | +5  | +3                          | +5    |

## Appendix A: Priority Area Strategies

The State Health Improvement Coalition (SHIC) compiled a list of potential priority strategies to include in the initial version of the SHIP. Work group members reviewed the list and identified priority strategies to include in the annual revision. The full list is provided below for reference.

### Access to Care Strategies

#### Goal 1:

- Establish a Health Care Coverage Coalition to address awareness and enrollment.
- Explore and implement health literacy interventions.
- Integrate patient navigators and community health workers in low-coverage counties.
- Enhance and integrate cross-agency Medicaid enrollment. Engage all employers in promoting health care coverage enrollment resources.

#### Goal 2:

- Enhance digital device access, including public use devices, and education programs.
- Assess remote patient monitoring utilization and effectiveness.
- Make low-cost or free devices available for distribution.
- Continue to expand the digital network infrastructure.
- Gather data regarding the use and availability of virtual care delivery services.

#### Goal 3:

- Assess utilization of state-based assistance programs.
- Support and promote utilization of social determinants of health screening tools in health care facilities.
- Integrate financial support applications into state assistance programs.
- Invest in the poorest counties by supporting microfinance and microenterprise.
- Index the minimum wage to inflation annually.
- Optimize community service programs to meet basic needs: food pantries, community gardens, housing projects, childcare.
- Provide financial education for youth and adults.
- Expand and support community development programs.
- Support and promote job training and education opportunities: apprenticeships, school programs, scholarships.
- Facilitate digital device loaner programs to facilitate remote working opportunities.
- Explore and implement “Grow Your Own” workforce efforts.
- Expand free school lunch programs.
- Develop homeownership investment programs.

#### Goal 4:

- Plan and execute a CAHPS® American Indian Survey Implementation Project.
- Evaluate the culturally competent care training programs and identify needs.
- Promote implementation of Culturally and Linguistically Appropriate Standards, with a focus on high diversity index counties.
- Expand cultural competency training to the public health workforce.
- Support the development of Communities of Practice focused on cultural competence.
- Prioritize high-diversity index counties for establishing or expanding youth health career promotion programs: HOSA, Scrub camps, career fairs, etc.

- Incentivize the pursuit of health careers among the American Indian population.
- Support coordination between tribal colleges, state universities, and technical colleges to promote cultural competency training in all health care professional programs.
- Develop a Health Improvement Plan guidebook to support health improvement planning in tribal communities.
- Establish a SHIC subcommittee to focus on tribal health.
- Enhance collaborative efforts among tribal and non-tribal healthcare entities to promote tribal culture, healthcare preferences, and delivery of services.
- Make cultural competence an organizational and institutional policy.

#### Goal 5:

- Initiate a health equity dashboard implementation project.
- Develop a data source crosswalk for health priority areas.
- Identify methods to improve SHIP data collection and performance management.
- Establish data sharing agreements to ensure collaborative data collection.

### Behavioral Health Strategies

#### Goal 1:

- Integrate behavioral and mental health with primary care services.
- Implement standardized screening tools and assessment for suicidal thoughts and behaviors in primary care.
- Expand access to mental health and substance abuse treatment.
- Expand use of telehealth services for crises and treatment.
- Promote the 988 Suicide and Crisis Lifeline statewide.
- Support and promote Telemedicine in Motion for mental health treatment.
- Increase funding to provide universal access to Naloxone (Narcan).
- Integrate suicide prevention peer support specialists.
- Support culturally responsive care in treatment settings.
- Integrate traditional healing practices and western medical services.
- Provide same-day access to behavioral and mental health professionals for those who have been identified as an immediate risk.
- Convene patient advisory/focus groups and hold listening sessions for direct input on improvements in culturally competent care.

#### Goal 2:

- Support school-based suicide awareness education programs.
- Support and promote behavioral and mental health literacy campaigns.
- Normalize conversations about behavioral health and mental health issues with family, friends, or other trusted individuals.
- Administer and sustain anti-stigma campaign(s).
- Provide free mental health vouchers to reduce the cost of treatment.
- Collect state-level data on stigma.
- Encourage and support community mental health centers to use a standardized assessment to measure stigma impact.

#### Goal 3:

- Determine the current racial diversity of the SD health professional workforce.

- Support and promote cultural competency training.
- Promote the pursuit of health careers in the American Indian population.
- Support the development of Communities of Practice to improve cultural competence.
- Implement cultural competence training in the curriculum for all healthcare professions.
- Support coordination and collaboration between tribal colleges and state universities/colleges to fill positions.
- Support medical career camps and fairs in all communities.
- Support and sustain collaborative partnerships between tribal, private, and public health systems.

## Care Quality Strategies

### Goal 1:

- Support and promote early detection disease programs and awareness campaigns.
- Closely monitor screening data to better focus improvement activities.
- Identify high-risk patients for enhanced care coordination.
- Enhance care coordination interventions to increase screening compliance.
- Integrate case managers, community health workers, and other patient care professionals.

### Goal 2:

- Utilize mass media campaigns to promote healthy behaviors to all South Dakotans.
- Promote community-based health and wellness facilities, programs, and initiatives.
- Identify geographic areas with highest risk behaviors.
- Incentive programs for healthy foods purchased through state programs.
- Establish a wellness facility voucher program to support exercise and activity.
- Develop and sustain green spaces.
- Support healthy food options in underserved areas.
- Advocate for grocery store tax incentives.
- Support point of purchase/decision prompts for alcohol and tobacco products.
- Support and promote healthy sexual behavior education in schools and youth programs.
- Provide and support voucher programs for prenatal care.
- Incentivize regular checkups and annual wellness care through health plans.
- Identify opportunities to improve maternity care practices supporting breastfeeding.
- Ensure breastfeeding-friendly policies are implemented statewide.

## Appendix B: Priority Area Assets

### Access to Care Assets

| Access to Care Asset                               | URL   |
|--|---|
| 2023 State Health Assessment                       | <a href="https://doh.sd.gov/media/ismiygrl/sha-final.pdf">https://doh.sd.gov/media/ismiygrl/sha-final.pdf</a>   |
| 211 Helpline                                       | <a href="https://www.helplinecenter.org/2-1-1">https://www.helplinecenter.org/2-1-1</a>   |
| American Heart Association Center for Telehealth   | <a href="https://www.heart.org/en/professional/telehealth">https://www.heart.org/en/professional/telehealth</a>   |
| American Indian Elementary and Secondary Schools   |   |
| American Indian Health Data Book                   | <a href="https://doh.sd.gov/media/4k0f512d/american-indian-health-data-book_es-2024.pdf">https://doh.sd.gov/media/4k0f512d/american-indian-health-data-book_es-2024.pdf</a> |
| AmeriCorps GED Program at Sitting Bull College     | <a href="https://sittingbull.edu/about/community/ameriCorps">https://sittingbull.edu/about/community/ameriCorps</a>   |
| Association of American Indian Physicians          | <a href="https://www.aaip.org">https://www.aaip.org</a>   |
| Community Assistance Programs                      | <a href="https://dss.sd.gov/economicassistance/communityassistance.aspx">https://dss.sd.gov/economicassistance/communityassistance.aspx</a>                                 |
| Community Development Block Grant Program          | <a href="https://sdgoed.com/public-records/cdbg-program">https://sdgoed.com/public-records/cdbg-program</a>   |
| Community Health Needs Assessments                 |   |
| Community Health Worker Collaborative of SD        | <a href="https://chwsd.org">https://chwsd.org</a>   |
| Connect SD Broadband - Ended                       | <a href="https://sdgoed.com/public-records/connectsd">https://sdgoed.com/public-records/connectsd</a>   |
| Dakota Build Scholarship Fund                      | <a href="https://www.builddakotascholarships.com">https://www.builddakotascholarships.com</a>   |
| Dakota Corps Scholarships                          | <a href="https://sdbor.edu/cost-aid/scholarships">https://sdbor.edu/cost-aid/scholarships</a>   |
| Dakota Dreams                                      | <a href="https://ourdakotadreams.com">https://ourdakotadreams.com</a>   |
| Dakota Institute                                   | <a href="https://www.dakotainstitute.org">https://www.dakotainstitute.org</a>   |
| Dakota Seeds                                       | <a href="https://sdgoed.com/partners/financing-incentives/dakota-seeds">https://sdgoed.com/partners/financing-incentives/dakota-seeds</a>                                   |
| Expanding CTE for high schools                     |   |
| Feeding South Dakota                               | <a href="https://www.feedingsouthdakota.org">https://www.feedingsouthdakota.org</a>   |
| Freedom Scholarship                                | <a href="https://www.freedomshipsd.com">https://www.freedomshipsd.com</a>   |
| Get Covered SD                                     | <a href="https://communityhealthcare.net/get-covered-sd">https://communityhealthcare.net/get-covered-sd</a>   |
| Governor's Office of Economic Development Programs | <a href="https://sdgoed.com">https://sdgoed.com</a>   |
| GROW South Dakota                                  | <a href="https://www.growsd.org">https://www.growsd.org</a>   |

| Access to Care Asset  | URL   |
|---|---|
| Growing Together South Dakota Mini-Grant  | <a href="https://extension.sdstate.edu/growing-together-south-dakota">https://extension.sdstate.edu/growing-together-south-dakota</a>   |
| Health Care Revolution Conference   | <a href="https://www.healthcarerevolution.com">https://www.healthcarerevolution.com</a>   |
| Health Improvement Coalition  | <a href="https://doh.sd.gov/about/health-disparities-cultural-awareness">https://doh.sd.gov/about/health-disparities-cultural-awareness</a>   |
| Healthcare Marketplace  | <a href="https://www.healthcare.gov">https://www.healthcare.gov</a>   |
| HHS Think Cultural Health CLAS  | <a href="https://thinkculturalhealth.hhs.gov/clas">https://thinkculturalhealth.hhs.gov/clas</a>   |
| HOSA Future Health Professionals  | <a href="https://sdhosa.org">https://sdhosa.org</a>   |
| Infrastructure Improvement  | <a href="https://sdgoed.com/partners/financing-incentives/local-infrastructure-improvement">https://sdgoed.com/partners/financing-incentives/local-infrastructure-improvement</a>                         |
| Inter-Lakes Community Action Partnership  | <a href="https://www.interlakescap.com">https://www.interlakescap.com</a>   |
| MicroLOAN SD  | <a href="https://sdgoed.com/public-records/microloan">https://sdgoed.com/public-records/microloan</a>   |
| Multi-cultural centers  |   |
| Mural Net- internet access in Native nations                                      | <a href="https://www.muralnet.org">https://www.muralnet.org</a>   |
| National Indian Health Board  | <a href="https://www.nihb.org">https://www.nihb.org</a>   |
| Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences | <a href="https://prapare.org">https://prapare.org</a>   |
| Red Cloud Indian School   | <a href="https://www.redcloudschool.org">https://www.redcloudschool.org</a>   |
| Reinvestment Payment Program  | <a href="https://sdgoed.com/public-records/reinvestment-payment-program">https://sdgoed.com/public-records/reinvestment-payment-program</a>   |
| Rural Office of Community Services  | <a href="https://www.rocsinc.org">https://www.rocsinc.org</a>   |
| Scholarship Programs  | <a href="https://sdbor.edu/cost-aid/scholarships">https://sdbor.edu/cost-aid/scholarships</a>   |
| Scrub Camps   | <a href="https://doh.sd.gov/programs/scrubs-camp">https://doh.sd.gov/programs/scrubs-camp</a>   |
| SD Career Link  | <a href="https://dss.sd.gov/economicassistance/SDCareerLink.aspx">https://dss.sd.gov/economicassistance/SDCareerLink.aspx</a>   |
| SDAHO HRSA Frontline Workforce  | <a href="https://sdaho.org/2023/06/08/sdaho-awarded-hrsa-rural-workforce-network-grant">https://sdaho.org/2023/06/08/sdaho-awarded-hrsa-rural-workforce-network-grant</a>                                 |
| SDSU American Indians into Nursing Scholarship                                    | <a href="https://www.sdstate.edu/nursing/nursing-student-services/american-indians-nursing-scholarship">https://www.sdstate.edu/nursing/nursing-student-services/american-indians-nursing-scholarship</a> |
| SDSU Extension Family Resource Management   | <a href="https://extension.sdstate.edu/wellness/family-finances">https://extension.sdstate.edu/wellness/family-finances</a>   |
| Sicangu Co  | <a href="https://www.sicangu.co">https://www.sicangu.co</a>   |
| South Dakota WIC Program  | <a href="https://doh.sd.gov/programs/wic">https://doh.sd.gov/programs/wic</a>   |

| Access to Care Asset                                     | URL   |
|--|---|
| SD Career Link   | <a href="https://dss.sd.gov/economicassistance/SDCareerLink.aspx">https://dss.sd.gov/economicassistance/SDCareerLink.aspx</a>   |
| South Dakota Chamber of Commerce                         | <a href="https://sdchamber.biz">https://sdchamber.biz</a>   |
| South Dakota Community Foundation                        | <a href="https://www.sdcommunityfoundation.org">https://www.sdcommunityfoundation.org</a>   |
| South Dakota Division of Rehabilitation Services         | <a href="https://www.dhs.sd.gov/en/rehabilitation-services">https://www.dhs.sd.gov/en/rehabilitation-services</a>   |
| South Dakota EMS: Telemedicine in Motion                 | <a href="https://doh.sd.gov/health-care-professionals/ems-trauma-program/ems-telemedicine">https://doh.sd.gov/health-care-professionals/ems-trauma-program/ems-telemedicine</a> |
| South Dakota Health Link: Health Information Exchange    | <a href="https://sdhealthlink.org">https://sdhealthlink.org</a>   |
| South Dakota Medicaid Coverage Groups                    | <a href="https://dss.sd.gov/economicassistance/medical_programs.aspx">https://dss.sd.gov/economicassistance/medical_programs.aspx</a>   |
| South Dakota Opportunity Scholarship                     | <a href="https://sdos.sdbor.edu">https://sdos.sdbor.edu</a>   |
| South Dakota State Library                               | <a href="https://library.sd.gov/LIB/DIR/index.aspx">https://library.sd.gov/LIB/DIR/index.aspx</a>   |
| South Dakota Workforce Development Council               | <a href="https://dlr.sd.gov/workforce_services/wdc/default.aspx">https://dlr.sd.gov/workforce_services/wdc/default.aspx</a>   |
| South Dakota's Citizen Portal                            | <a href="https://www.sd.gov/cs">https://www.sd.gov/cs</a>   |
| St. Joseph Indian Elementary School                      | <a href="https://www.stjo.org">https://www.stjo.org</a>   |
| Strong Families South Dakota                             | <a href="https://strongfamilies.sd.gov">https://strongfamilies.sd.gov</a>   |
| Supplemental Nutrition Assistance Program (SNAP)         | <a href="https://dss.sd.gov/economicassistance/snap.aspx">https://dss.sd.gov/economicassistance/snap.aspx</a>   |
| Tribal Broadband Connectivity Program                    | <a href="https://www.ntia.gov/page/tribal-broadband-connectivity-program">https://www.ntia.gov/page/tribal-broadband-connectivity-program</a>                                   |
| Tyto Care  | <a href="https://www.tytocare.com">https://www.tytocare.com</a>   |
| University of North Dakota Indians into Medicine Program | <a href="https://med.und.edu/education-training/indians-into-medicine/index.html">https://med.und.edu/education-training/indians-into-medicine/index.html</a>                   |
| Western SD Community Action                              | <a href="https://www.wsdca.org">https://www.wsdca.org</a>   |
| Workforce and Education Center                           |   |
| Workforce Development                                    | <a href="https://sdgoed.com/partners/financing-incentives/workforce-development">https://sdgoed.com/partners/financing-incentives/workforce-development</a>                     |



## Behavioral Health Assets

| Behavioral Health Asset                                    | URL   |
|--|---|
| The Link   | <a href="https://www.linksf.org">https://www.linksf.org</a>   |
| 988 Suicide and Crisis Lifeline                            | <a href="https://988lifeline.org">https://988lifeline.org</a>   |
| American Indian Health Data Book                           | <a href="https://doh.sd.gov/media/4k0f512d/american-indian-health-data-book_es-2024.pdf">https://doh.sd.gov/media/4k0f512d/american-indian-health-data-book_es-2024.pdf</a>                               |
| Association of American Indian Physicians                  | <a href="https://www.aaip.org">https://www.aaip.org</a>   |
| Avera Farm and Rural Stress Hotline                        | <a href="https://www.avera.org/services/behavioral-mental-health/farm-stress-hotline">https://www.avera.org/services/behavioral-mental-health/farm-stress-hotline</a>                                     |
| Avoid Opioid SD  | <a href="https://www.avoidopioidsd.com">https://www.avoidopioidsd.com</a>   |
| Be the 1 SD  | <a href="https://sdsuicideprevention.org/be-the-1-sd">https://sdsuicideprevention.org/be-the-1-sd</a>   |
| Boys and Girls Club  | <a href="https://www.bgca.org">https://www.bgca.org</a>   |
| Bright Spots   | <a href="https://sdsuicideprevention.org/bright-spots">https://sdsuicideprevention.org/bright-spots</a>   |
| Bright Start   | <a href="https://doh.sd.gov/topics/maternal-child-health/pregnancy-early-childhood/bright-start">https://doh.sd.gov/topics/maternal-child-health/pregnancy-early-childhood/bright-start</a>               |
| Community Health Worker Collaborative of SD                | <a href="https://chwsd.org">https://chwsd.org</a>   |
| Emily's Hope   | <a href="https://emilyshope.charity">https://emilyshope.charity</a>   |
| HHS Think Cultural Health CLAS                             | <a href="https://thinkculturalhealth.hhs.gov/clas">https://thinkculturalhealth.hhs.gov/clas</a>   |
| HOSA Future Health Professionals                           | <a href="https://sdhosa.org">https://sdhosa.org</a>   |
| Lost & Found 'Peer2Peer' Mentorship Program                | <a href="https://resilienttoday.org/programs/student-programs/peer2peer-mentorship">https://resilienttoday.org/programs/student-programs/peer2peer-mentorship</a>   |
| Mental Health Awareness and Suicide Prevention Training    | <a href="https://www.sdsuicideprevention.org/action/training">https://www.sdsuicideprevention.org/action/training</a>   |
| Mental Health First Aid                                    | <a href="https://www.mentalhealthfirstaid.org">https://www.mentalhealthfirstaid.org</a>   |
| Multi-cultural centers                                     |   |
| National Indian Health Board                               | <a href="https://www.nihb.org">https://www.nihb.org</a>   |
| OnTrackSD  | <a href="http://www.ontracksd.org">http://www.ontracksd.org</a>   |
| Peer Support Specialists                                   |   |
| Question, Persuade, Refer (QPR) Suicide Prevention Program | <a href="https://qprinstitute.com">https://qprinstitute.com</a>   |
| SD DOH Health Equity and Cultural Competency               | <a href="https://doh.sd.gov/topics/health-equity-cultural-competency">https://doh.sd.gov/topics/health-equity-cultural-competency</a>   |
| SDSU American Indians Into Nursing Scholarship             | <a href="https://www.sdstate.edu/nursing/nursing-student-services/american-indians-nursing-scholarship">https://www.sdstate.edu/nursing/nursing-student-services/american-indians-nursing-scholarship</a> |

| Behavioral Health Asset                                   | URL   |
|---|---|
| Sioux52 Mentoring Initiative                              | <a href="http://www.sioux52.org">http://www.sioux52.org</a>   |
| South Dakota Behavioral Health: “Notes to Self” Outreach  | <a href="https://sdbehavioralhealth.gov/request-materials">https://sdbehavioralhealth.gov/request-materials</a>   |
| South Dakota EMS: Telemedicine in Motion                  | <a href="https://doh.sd.gov/health-care-professionals/ems-trauma-program/ems-telemedicine">https://doh.sd.gov/health-care-professionals/ems-trauma-program/ems-telemedicine</a> |
| South Dakota Health Link: Health Information Exchange     | <a href="https://sdhealthlink.org">https://sdhealthlink.org</a>   |
| South Dakota Suicide Prevention                           | <a href="https://sdsuicideprevention.org">https://sdsuicideprevention.org</a>   |
| Strong Families South Dakota                              | <a href="https://strongfamilies.sd.gov">https://strongfamilies.sd.gov</a>   |
| Substance Abuse and Mental Health Services Administration | <a href="https://www.samhsa.gov">https://www.samhsa.gov</a>   |
| University of North Dakota Indians into Medicine Program  | <a href="https://med.und.edu/education-training/indians-into-medicine/index.html">https://med.und.edu/education-training/indians-into-medicine/index.html</a>                   |
| Veterans Crisis Line                                      | <a href="https://www.veteranscrisisline.net">https://www.veteranscrisisline.net</a>   |
| Zero Suicide Institute                                    | <a href="https://zerosuicide.edc.org">https://zerosuicide.edc.org</a>   |
| Urgent Care Clinics                                       |   |

## Care Quality Assets

| Care Quality Asset                                 | URL   |
|--|---|
| All Women Count!                                   | <a href="https://doh.sd.gov/topics/cancer/breast-and-cervical-cancer-control-all-women-count">https://doh.sd.gov/topics/cancer/breast-and-cervical-cancer-control-all-women-count</a>         |
| American Heart Association (AHA): Answers by Heart | <a href="https://www.heart.org/en/health-topics/consumer-healthcare/answers-by-heart-fact-sheets">https://www.heart.org/en/health-topics/consumer-healthcare/answers-by-heart-fact-sheets</a> |
| AHA: Community Heart Hub                           |   |
| AHA: Get with the Guidelines                       | <a href="https://www.heart.org/en/professional/quality-improvement/get-with-the-guidelines">https://www.heart.org/en/professional/quality-improvement/get-with-the-guidelines</a>             |
| AHA: Healthy for Good                              | <a href="https://www.heart.org/en/healthy-living">https://www.heart.org/en/healthy-living</a>   |
| AHA: Life's Essential 8                            | <a href="https://www.heart.org/en/healthy-living/healthy-lifestyle/lifes-essential-8">https://www.heart.org/en/healthy-living/healthy-lifestyle/lifes-essential-8</a>                         |
| AHA: Outpace CVD                                   | <a href="https://www.heart.org/en/professional/quality-improvement/outpatient">https://www.heart.org/en/professional/quality-improvement/outpatient</a>                                       |
| American Indian Health Data Book                   | <a href="https://doh.sd.gov/media/4k0f512d/american-indian-health-data-book_es-2024.pdf">https://doh.sd.gov/media/4k0f512d/american-indian-health-data-book_es-2024.pdf</a>                   |
| Baby-Friendly USA Facility Designation             | <a href="https://www.babyfriendlyusa.org">https://www.babyfriendlyusa.org</a>   |
| Bright Start                                       | <a href="https://doh.sd.gov/topics/maternal-child-health/pregnancy-early-childhood/bright-start">https://doh.sd.gov/topics/maternal-child-health/pregnancy-early-childhood/bright-start</a>   |
| Community Health Offices                           | <a href="https://doh.sd.gov/topics/maternal-child-health/community-health-offices">https://doh.sd.gov/topics/maternal-child-health/community-health-offices</a>                               |

| Care Quality Asset                                    | URL   |
|---|---|
| Community Health Worker Collaborative of SD           | <a href="https://chwsd.org">https://chwsd.org</a>   |
| Delta Dental Mobile Program                           | <a href="https://southdakota.deltadental.com/mission/mobile-dental-program">https://southdakota.deltadental.com/mission/mobile-dental-program</a>   |
| Get Screened SD                                       | <a href="https://www.getscreenedsd.org">https://www.getscreenedsd.org</a>   |
| Good & Healthy SD                                     | <a href="https://goodandhealthysd.org">https://goodandhealthysd.org</a>   |
| Healthy SD  | <a href="https://healthysd.gov">https://healthysd.gov</a>   |
| SD Oral Health Coalition                              | <a href="https://www.sddental.org/public-resources/oral-health-coalition">https://www.sddental.org/public-resources/oral-health-coalition</a>   |
| SD Parent Connection                                  | <a href="https://sdparent.org">https://sdparent.org</a>   |
| SD Quitline   | <a href="https://www.sdquitline.com">https://www.sdquitline.com</a>   |
| South Dakota WIC (Women Infants and Children) Program | <a href="https://doh.sd.gov/programs/wic">https://doh.sd.gov/programs/wic</a>   |
| South Dakota Breastfeeding Coalition                  | <a href="https://www.facebook.com/people/South-Dakota-Breastfeeding-Coalition/100064270046363">https://www.facebook.com/people/South-Dakota-Breastfeeding-Coalition/100064270046363</a>   |
| South Dakota Cancer Coalition                         | <a href="https://www.cancersd.com">https://www.cancersd.com</a>   |
| South Dakota Cancer Registry                          | <a href="https://www.getscreenedsd.org/sdcr">https://www.getscreenedsd.org/sdcr</a>   |
| South Dakota Cardiovascular Collaborative             | <a href="https://doh.sd.gov/topics/heart-health/heart-disease-and-stroke-prevention-program/heart-disease-and-stroke-state-plan-cardiovascular-collaborative">https://doh.sd.gov/topics/heart-health/heart-disease-and-stroke-prevention-program/heart-disease-and-stroke-state-plan-cardiovascular-collaborative</a> |
| South Dakota Dental Association                       | <a href="https://www.sddental.org">https://www.sddental.org</a>   |
| St Francis Mission Dental Clinic                      | <a href="https://sfmission.org/dental-clinic">https://sfmission.org/dental-clinic</a>   |
| Strong Families South Dakota                          | <a href="https://strongfamilies.sd.gov">https://strongfamilies.sd.gov</a>   |
| Susan G Komen   | <a href="https://www.komen.org">https://www.komen.org</a>   |
| Undo the Risk   | <a href="https://www.undotherisk.com">https://www.undotherisk.com</a>   |
| Wellmark Healthy Hometown                             | <a href="https://www.wellmark.com/about/community/community-health-improvement/southdakota">https://www.wellmark.com/about/community/community-health-improvement/southdakota</a>   |

