

**Testimony**  
**In Opposition of House Joint Resolution 5001**  
**Senate State Affairs Committee**  
**Senator Mehlhaff, Chair**  
**February 25, 2025**

Chairman Mehlhaff, Vice Chairman Perry, and honorable members of the Senate State Affairs Committee:

My name is Shelly Ten Napel, CEO of Community HealthCare Association of the Dakotas (CHAD). I appreciate the opportunity to provide testimony to the committee in opposition of House Joint Resolution 5001 on behalf of CHAD and our South Dakota member Federally Qualified Health Centers (FQHCs). Medicaid expansion provides access to health care for 30,000 hard working South Dakotans and ensures that they have the care they need to live healthy, productive lives.

CHAD is a non-profit membership organization that serves as the Primary Care Association for South Dakota and North Dakota, supporting health centers across both states in their efforts to provide high-quality primary and preventive health care to all individuals, regardless of their income or insurance status. South Dakota's health centers provide comprehensive primary care, including medical, dental, and behavioral health, to over 126,000 individuals across 48 locations in 33 communities. The health centers we represent have locations in both urban and rural communities.

As you may know, FQHCs are a vital part of our state's health care infrastructure, providing primary care services to underserved communities, including rural areas. Without Medicaid expansion, many South Dakotans remain uninsured or underinsured, exacerbating health disparities, putting strain on our health care providers, and even raising the cost of care for those of us with private health insurance. For FQHCs, this could mean having to shutter doors in communities that need health care services the most.

Medicaid expansion not only increases access to care, but it improves health outcomes, including reducing preventable hospitalizations, treating illnesses, injuries, and chronic conditions earlier, and ensures mental health care is within reach. All these things help keep people healthy and able to work – saving money and building strong communities. This program is working in South Dakota for South Dakotans and its positive impacts spread far beyond those simply enrolled in Medicaid expansion.

If the federal matching assistance percentage (FMAP) for Medicaid expansion were to drop below 90% and South Dakota were to lose access to expanded Medicaid, it would hurt us all. Untreated medical ailments would make it difficult for people to work and care for their families. Health centers would continue to see all individuals regardless of ability to pay, but with more uninsured patients it will become harder to sustain care across all the communities we currently serve.

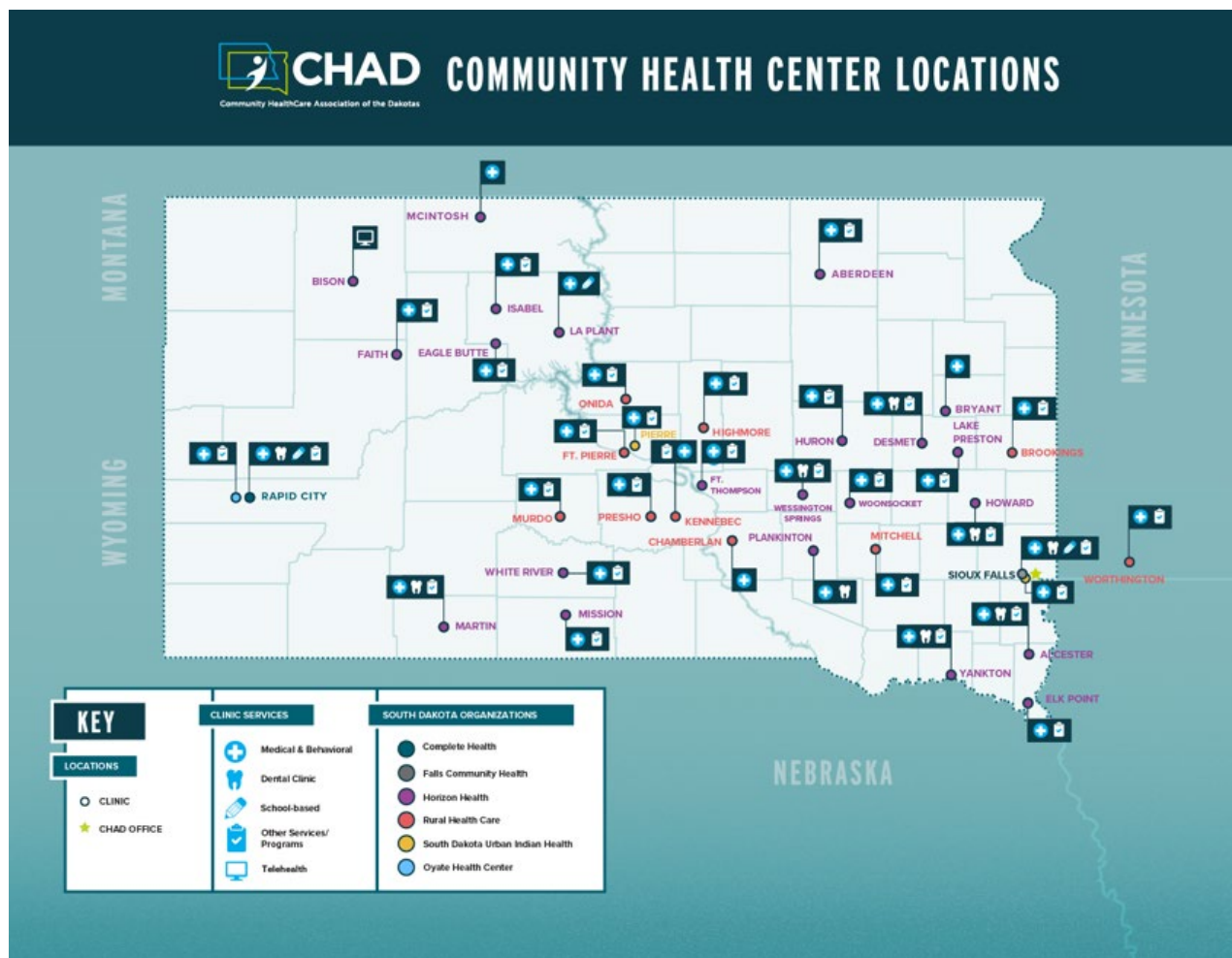
The consequences of losing Medicaid expansion are well known. That is why the citizens of South Dakota opted to support Medicaid expansion at the ballot box. What is not well known are the important contextual details surrounding any federal change in the FMAP. Would a change in the FMAP come with increased flexibilities or other federal investments that would keep the program affordable? This context would be valuable information to help voters make an informed and sound decision. None of us know whether a new policy framework will emerge from Washington or what that framework would include. We believe that forcing South Dakotans to vote on a hypothetical from Washington is premature because it asks them to vote without important policy details and context.

Please vote no on HJR 5001. South Dakotans passed Medicaid expansion and since it has been in effect, it has benefitted us all.

Thank you.



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