

ANNUAL REPORT



2024

VISION

We envision communities throughout South Dakota where everyone reaches their highest potential for health.

MISSION

Advancing healthy communities through a unified voice across the health care continuum.

WEBSITES



sdaho.org
enterprises.sdaho.org
trustees.sdaho.org
pac.sdaho.org
sdworkforce.com

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SDAHO TEAM

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YEAR IN REVIEW

ADVOCACY

SECURED

4%

INCREASE FOR MEDICAID PROVIDERS AND

98%

METHODOLOGY FOR COMMUNITY-BASED PROVIDERS

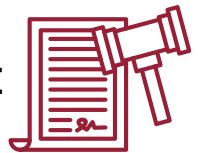
State Issues

- Passed important healthcare bills: 340B anti-discrimination, ground components of air ambulances, and defining palliative care
- Participated in Nursing Home Sustainability Legislative task force

Federal Issues

- Advocated to enact the Safety from Violence for Healthcare Employees (SAVE) Act

JOINED LEADING AGES LAWSUIT TO OVERTURN CMS STAFFING MANDATE



AWARDED
\$50K

HQIC/Compass Quality Improvement program **exceeds** CMS goals



Established **HRSA workforce grant** infrastructure

EMS Grant to improve interfacility transfer process

MBQIP Reporting Improvement Award



QUALITY

COMMUNICATION AND EDUCATION



101,500 Social Media reach

Nursing Home Administrators earned **760.30** continuing education hours and Social Workers earned **767.70** continuing education hours through SDAHO.

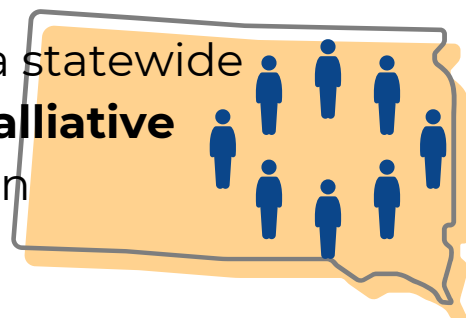
LAUNCHED TRAINING PROGRAMS FOR GOVERNANCE ORIENTATION AND WORKPLACE VIOLENCE PREVENTION



Provided education for **700 members** at 4 in-person events and over **5,400 members** registered for **106** SDAHO-hosted virtual sessions.

HIRED A DEDICATED VICE PRESIDENT OF POST-ACUTE CARE

Established a statewide **Hospice & Palliative Care Coalition**



MEMBER SERVICES

BOARD CHAIR'S REPORT



Jason Merkley

BOARD OF TRUSTEES 2023-2024

- Jason Merkley, Chairperson
- Paulette Davidson, Vice Chairperson
- Nick Fosness, Secretary-Treasurer
- Paul Hanson, Past Chairperson
- John Ayoub, Delegate to AHA
- Justin Hinker, Delegate to LeadingAge
September - July
- Mark Schulte
- Natalie Gauer
- Scott Larson
- Erica Peterson
- Dr. Mike Wilde
- Tammy Miller
- Mick Gibbs
- Tim Rave (ex-officio)
- Scott Hargens, Alternate to AHA (non-voting board member)
October - December
- Erick Larson, Alternate to AHA (non-voting board member)
February - September
- Thomas Worsley, Alternate to LeadingAge (non-voting board member)

Looking back at the previous year, we have had yet another year of achievements, challenges and progress in many areas of health care.

Our membership plays a vital role in shaping the direction of healthcare in South Dakota. In 2024, we have seen a growing commitment from our members to collaborate on workforce development, training programs, and the adoption of technology that enhances patient care. We've witnessed increased participation in our in-person events, educational webinars and advocacy efforts, all of which are driving positive change in our facilities and communities. As an association, it is essential that we continue to provide resources that support both seasoned professionals and the next generation of healthcare leaders, ensuring that our state's health care delivery facilities are prepared to meet future challenges head-on.

A key focus for our association in 2024 and for years to come is strengthening healthcare workforce development to ensure that South Dakota has a robust and well-equipped healthcare workforce to meet the needs of our communities. This includes expanding training opportunities, increasing access to continuing education and addressing workforce shortages. By investing in the professional growth of healthcare workers and attracting new talent to the state, we can better support the delivery of high-quality care.

Additionally, another area the association has increased its focus on is workplace violence. Too many healthcare professionals face physical and verbal abuse while providing essential services. Ensuring the safety and well-being of our healthcare workers is fundamental to the sustainability of our healthcare system and the quality of care that patients receive.

Looking forward, the need for collective action is more critical than ever. The ongoing changes in healthcare policy at the state and federal levels require that we stay informed and engaged. In 2025, our association will continue to advocate for policies that support the sustainability of rural health care, improve access to services, and ensure that South Dakota remains a leader in healthcare innovation. As we move into the future, our strength lies in our shared commitment to collaboration, education, and the pursuit of excellence in healthcare. Together, we will continue to build a model that the nation looks to as the leading industry example.

PRESIDENT'S REPORT

Our entire team at SDAHO has done exceptional work over the past year and I'd like to take a moment to lift up the accomplishments of the association.

Public Policy and Advocacy

In 2024, the primary elections saw a dramatic shift in the legislative makeup. We saw many experienced incumbent legislators defeated by first-time candidates. As we look forward to the 2025 South Dakota Legislative Session, we will see how this impacts healthcare over the next two years.

We had an exceptional legislative session 2024 seeing a 4% increase in Medicaid rates for all providers and no policy legislation with negative impacts to healthcare.

With Medicaid expansion completing one full year of implementation, we learned a few things. Enrollment continues to trend where our initial study indicated it would be. The interesting trend that we continue to watch is utilization. Enrollee utilization continues to remain consistently around 50%. Many of us anticipated a higher utilization rate due to enrollment from individuals at time care delivery. Medicaid expansion has had a positive financial impact on our members as we have seen increased compensation for services that would have previously resulted in bad debt.

As we look forward to a new makeup of Congress in 2025, we are optimistic for continued positive movement to addressing challenges pertaining to the 340B drug pricing program. There are currently a few pieces of legislation nearing the introduction phase and we are hopeful they will be adopted and bring stability to this program.

Quality Integration

This past year, we saw the end of the Healthcare Quality Improvement Contractor (HQIC) grant. We are waiting CMS to release and award the next phase, Scope 13. At this point, it is unclear our role in the next phase.

The HRSA Network Development grant focusing on frontline workforce is nearing the beginning of year two out of the 4-year award. Year one focused heavily on building the network up and year two will start focus on implementing processes at the local level to start building the work.

Education

Our education team continues to not only grow the offerings provided in volume but also in quality. Our virtual education program is exceptionally strong as evidenced by the attendance we see month after month. In this dynamic health care environment, education is a vital part of ensuring members are on the forefront of the most current topics.

Our Nurse Leadership Program continues to have strong attendance since its inception in 2020. Yet again, the program was filled this year. This program is unique because we leverage content experts within our membership to provide education to participants on topics specifically applicable to leadership roles within the health care setting.

Business Development

SDAHO Enterprises, our for-profit division, continues to see strong growth. We continue to see strong revenues in the EBP program, allowing us to supplement dues with this revenue. Opportunities for member benefit continue to be evaluated based on the needs of our members for added value.



Tim Rave

The 2024 SDAHO Annual Convention was held in Rapid City for the first time since 2017 and brought the strongest attendance we've seen at a Rapid City convention in many years. In addition to strong attendance, there was also increased financial support from additional sponsors and exhibitors. Feedback received was exceptional in all aspects from attendees, speakers, exhibitors and sponsors. We will resume our prior rotation of having a Rapid City Annual Convention every third year, with the next one being held there in 2027.

I would like to take a moment to recognize and thank the following: first, I would like to thank our Board of Trustees. Serving on our board requires a great deal of volunteer time and effort and I want to recognize the commitment they have to serving. Next, I would like to thank the staff at the association who work tirelessly to support our members and provide value. Lastly, and most importantly, I want to thank all the caregivers in this state for the care they provide to patients and residents.

COUNCIL ON PUBLIC POLICY

COUNCIL MEMBERS 2023-2024

- Jason Merkley, Chairperson
- Cate Davis
- Corey Brown
- Craig Kantos
- Curt Hohman
- Doug Ekeren
- Erica Peterson
- Jason Green
- Jeremy Schultes
- John Ayoub
- Kent Peterson
- Kim Malsam-Rysdon
- Mark Schmidt
- Mark Schulte
- Mike Diedrich
- Nick Fosness
- Paul Hanson
- Paulette Davidson
- Scott Larson
- Association Support: Tim Rave

The Council on Public Policy provides leadership and coordination of the development of the association's policy positions and advises the Board of Trustees regarding policy and advocacy priorities for the entire membership.

In 2024, the 99th South Dakota Legislative Session brought several wins for healthcare. At the beginning of the session, Governor Kristi Noem proposed a 4% increase for Medicaid providers, including nursing homes, assisted living, behavioral health, and in-home services. Lawmakers approved the proposed 4% (\$62.6 million total funds) going to healthcare providers, which included \$25.9 million coming from general funds. In addition to the 4%, the legislature approved moving to 98% of methodology for community-based providers, which meant an additional \$13.3 million total funds, including:

- \$3M Assisted Living
- \$2.9M Behavioral Health
- \$1.9M Nursing Homes
- \$700K In-home Services

Lawmakers passed two bills to assist long term care facilities with infrastructure and technology needs. SB 80 will provide general funds to improve technology equipment in long-term care. The amended version provided \$2 million from the state's general fund with the intent to fund innovative ideas to improve operational efficiencies and help with workforce challenges. SB 209 provided \$5 million from the American Rescue Plan Act in grant funding for assisted living centers and nursing facilities to purchase and install technology and infrastructure for telemedicine.

In addition, we were pleased with the passage of several bills that positively impacted our member hospitals. HB 1147, address discriminatory acts against entities participating in a 340B program, will help to protect 340B hospitals and contract pharmacies from discriminatory acts from Pharmacy Benefit Managers. HB 1097, will authorize transportation activities by air ambulance operators, which will take some of the pressure off our EMS operators and help get patients to the right level of care in a timely fashion. SB 147, provides for the distribution of informational materials regarding palliative care, which is the first step in providing palliative care education and funding the care team in the future.

COUNCIL ON REIMBURSEMENT

The SDAHO Council on Reimbursement is made up of healthcare finance and reimbursement leaders from across the state, including all three health systems and independents. The Council serves as the focal point for policy development of health care finance and reimbursement issues affecting members by monitoring changes in federal and state reimbursement systems.

Brief Recap

The Council met 3 times in 2024 and discussed the following topics:

- SDAHO 2024 Legislative Updates
- Department of Social Services Legislative Updates
- Medicaid Expansion Updates
- Change Healthcare Financial Impact and Updates
- Governor Noem's 2024 Budget Address
- Federal Reimbursement Rules
- SDAHO Data and Reimbursement Services
- South Dakota Transitions of Care Survey

Goals achieved:

- SDAHO successfully lobbied for increased Medicaid rates during the 2024 legislative session, including a 4% increase for all Medicaid providers, or almost sixty-five million dollars, and movement to 98% of methodology for community-based providers, which was an additional thirteen million dollars.
- Added nearly two hundred million additional ongoing dollars for the Medicaid Expansion budget in the Department of Social Services.
- Increased the Medicaid Personal Needs Allowance from sixty dollars to one-hundred dollars, a recommendation from the 2023 Study on Sustainable Models in Long-Term Care.

- Continued the South Dakota Transitions of Care Survey with hospital members to capture issues with individuals who are ready to be transferred to another level of care, but are not able to due to complex case issues, lack of long-term care beds, etc.
- Submitted response letters to the Centers for Medicare and Medicaid Services proposed rules, including the Outpatient Prospective Payment System for Federal Fiscal Year 2024, Skilled Nursing Facility Rule, and an RFI on the SUSTAIN 340B legislation.
- Provided education to congressional staffers on the impacts of the proposed changes in South Dakota.

Next Steps

Some of the topics the Council will meet to discuss in the next year include 2025 legislative updates, Medicaid Expansion implementation, Federal Fiscal Year 2026 Medicare Reimbursement Rules, Medicare Advantage plans, the South Dakota Transitions of Care Survey and more. The Council will also be involved in planning any new policies or educational pieces regarding Medicaid, Medicare, 340B, etc.

COUNCIL MEMBERS 2023-2024

- Teresa Mallet, Chairperson
- Anne Christiansen
- Austin Willuweit
- Carmen Weber
- Erick Larson
- Jamie Schaefer
- Jay Hodges
- Jesse Naze
- Kory Holt
- Marcia Olson
- Michael Miller
- Paul Miller
- Rita Blasius
- Scott Eisenbeisz
- Stacia Moeller
- Torey Sundall
- Brian Bertsch
- Association Support: Jacob Parsons



COUNCIL ON POST-ACUTE CARE

COUNCIL MEMBERS 2023-2024

- Isaac Gerdes, Chairperson
- Nathan Gelhaus, Co-Chairperson
- Lynne Kaufmann
- Mike Tilles
- Jill Cragoe
- Julie Sampson
- Nikki VonEye
- Dana Bachmeier
- Justin Hinker
- Tom Syverson
- Deb Paauw
- Tony Erickson
- Robin Stockland
- Lynn Landeen
- Tara Mitchell
- Dillon Hinker
- Lindsey Hauger
- Heather Moechnig
- Thomas Worsley
- Association Support: Tammy Hatting

Post-Acute Council Priorities:

- Workforce Recruitment and Retention. The workforce shortage is taking its toll on the post-acute care industry. The threat of the CMS staffing mandate for nursing homes, if enforced, will have a ripple effect across all areas of the continuum of care and will result in closures across the state.
- Medicaid Reimbursement and Increasing Medicaid Payor Mix. We are grateful for the increase in rates by the 2024 legislature but unfortunately, inflation is rising faster than the reimbursement rate and not all costs are allowable under Medicaid, creating a shortfall.

- Daily census and referrals. Daily census and referrals contribute to the overall health of the post-acute care industry, and both are affected by the workforce crisis. When nursing homes limit admissions due to staffing it puts more pressure on home health, hospice and assisted living providers. Hospitals struggle with referrals to post-acute care and family caregivers are left looking for support for their loved one.
- Regulatory Compliance and Resident Safety. Providers continue to sift through layers of regulations, reporting and administrative burden with an increasing threat of civil monetary penalties and/or fines. Many of the pandemic-era regulations have not been removed so providers continue to struggle with masking, testing, and reporting.
- The 2024 Post-Acute Care, Partners in Care Conference was held in person in Mitchell with 142 people in attendance.
- Continuing education continues to be a priority for all post-acute care providers. From January-September 2024, over 760 contact hours were offered to nursing home administrators.
- SDAHO focused heavily on our advocacy campaign to push back against CMS's mandatory staffing ratio proposed rule, which did become a final rule in April 2024. Our advocacy work included the development of resources for the legislators and website, testimony in front of the joint appropriations committee, hill visits in DC and several news articles and interviews.
- In May 2024, the SDAHO board approved our investment in an FTE to take our post-acute program to the next level by hiring a VP of Post-Acute Care, which was established upon the hiring of Justin Hinker in July 2024.

Goals Achieved:

- Successful 2024 legislative session. We were pleased to see the passage of a definition for palliative care, approval for a PACE study by DHS, grant dollars allocated to innovation and technology for long term care and a 4% rate increase for all Medicaid providers. Community-based providers were moved to 98% of their methodology, which includes nursing homes, assisted living, and in-home services. This was a total of 13.3 million dollars more for healthcare providers.
- SDAHO actively participated in the legislative summer study to focus on the sustainability of the long term care industry. SDAHO participated in all 5 workgroups including innovation, infrastructure, workforce, regulatory and home and community-based services. Many of our workgroup recommendations were approved by the legislature.

Trends and Ongoing Needs:

The number one threat to the post-acute care industry today is the workforce crisis and CMS staffing mandate. SDAHO will continue our advocacy efforts and advance the issues for access to affordable aging services.

COUNCIL ON ASSISTED LIVING

The council on assisted living was established to provide leadership on SDAHO's advocacy and policy efforts pertaining to assisted living services. The Council advises the Board of Trustees regarding the integration of assisted living services into the health care continuum and on policy positions affecting assisted living providers. The assisted living council serves as the focal point for issues affecting assisted living services and home and community-based services, including: legislative, regulatory and reimbursement issues; recommends advocacy activities related to the Medicare, Medicaid and other payment programs; identifies educational needs; considers issues of discharge planning and care coordination, and coordinates with other organizations and health care providers in activities and forums to establish linkages across the continuum.

We added a new member to our original 7-member council in 2024 and met four times throughout the year. The council established the following priorities for assisted living facilities:

- Medicaid reimbursement and more transparency with the tier system
- Workforce shortage & cost of contract labor
- Higher acuity residents especially memory care
- Increasing number of residents on Medicaid
- Rising costs of doing business due to inflation

The changing demographics in assisted living and increase in acuity has put more pressure on the industry highlighting the need for additional advocacy, education, and clinical quality resources for our state-licensed senior living facilities. Medicaid reimbursement is not keeping up with the cost of inflation and the workforce shortage is putting more pressure on facilities to fill the gap with expensive travel staff. We were very pleased with the 2024 legislature and passage of significant increases in the rate tier system as well as the increase in personal allowance for Medicaid residents from \$60 to \$100/month. In addition to rate increases, the legislature also passed SB 209 and SB 80 to allocate grant funds for innovation and technology. Assisted living providers who accept Medicaid were eligible to apply for this funding.

It has been a pleasure to serve as the chair for SDAHO's Assisted Living Council and we look forward to advancing policy and efforts to enhance long-term care in South Dakota.

COUNCIL MEMBERS 2023-2024

- Nathan Gellhaus, Chairperson
- Heather Moechnig, Co-Chairperson
- Stephanie Lange
- Rhona Snyder
- Austie Olson
- Dawn Patten
- Gayle Wookey
- Josh Hofmeyer
- Association Support: Tammy Hatting

COUNCIL ON EDUCATION

COUNCIL MEMBERS 2023-2024

- John Ayoub, Chairperson
- Amy Skoglund
- Anita Dunham
- Dawn Ingalls
- Diana Vanderwoude
- Gwen Maag
- Lori Meier
- Mollie Sanchez
- Scott Eisenbeisz
- Shanon Waldner
- Sheila Sutton
- Stardust Redbow
- Association Support: Michella Sybesma

2024 MEMBER ENGAGEMENT

- Over **5,475** webinar registrations from January through September 2024.
- Event attendance: **160** individuals at the Post-Acute Partners in Care Conference; **78** at the Rural Health Leaders Conference; **473** at the Annual Convention; and **29** in the Nurse Leadership program.
- Continuing education provided from January to September 2024 included **760.30** hours for Nursing Home Administrators and **767.70** hours for Social Workers.

The Council on Education provides recommendations, identifies relevant topics and speakers, and offers feedback on matters related to healthcare education. Established to ensure member input on critical topics and educational needs, the council plays a vital role in shaping the educational programming for our members.

Council Update:

In 2024, the council convened quarterly to assess member participation in educational events, identify relevant topics and speakers, and recommend professional development programs. Each meeting included updates on virtual education attendance, continuing education hours offered, member survey feedback on topics, and overall outcomes from SDAHO conferences. Throughout the year, the council focused on enhancing member engagement and communication, providing insights on educational offerings, sharing thoughts on conference structure, and generating ideas for future topics and speakers.

Goals achieved:

- Hosted 106 SDAHO webinars covering topics such as regulatory issues, clinical practice, workforce development, and leadership.
- Organized three in-person conferences: the Post-Acute Partners in Care Conference, the Rural Health Leaders Conference, and the 98th Annual Convention.
- Launched a 10-month Nurse Leadership program, featuring sessions on crucial conversations, ethics, human resources, leadership, and finance.
- Offered professional development and continuing education through the National Association of Medical Staff Services.

- Responded to member feedback by providing series on topics such as Basics of Credentialing, Mastering Communication, Healthcare Finance, Critical Access Hospital COP, LTC Survey Preparation, and Leadership Basics for both new and seasoned leaders.
- Produced a four-part video series, "Stepping into Governance," presented by Margaret Sumption, focused on governance orientation.
- Developed workforce violence prevention training, including in-person sessions, webinars, micro-learning videos, and resources funded through the FLEX grant.
- Collaborated with SDAHO's education council, affiliate membership groups, the SD Healthcare Financial Management Association (HFMA), and the SD Healthcare Executive Group (SDHEG) to create specific educational webinars and in-person sessions.
- Offered ACHE credits at the Rural Health Leaders Conference and SDAHO's Annual Convention.

Next steps:

SDAHO is committed to continually enhancing educational and professional development opportunities that are essential to our members. For 2025, our top priorities for educational programming will include advocacy initiatives, workforce solutions, workplace violence prevention, regulatory updates, and leadership training. We will continue to actively engage with our members to address other emerging and relevant topics throughout the year.

COUNCIL ON QUALITY INTEGRATION

The Council on Clinical and Quality Integration provides leadership on SDAHO's clinical, patient safety and quality of care efforts affecting the healthcare continuum. The Council provides leadership on issues pertaining to the evolving relationships between providers, hospitals, clinics, and health systems. The members are selected from recommendations provided by the SDAHO Districts, health systems, independent hospitals, and are subsequently appointed by the Board of Trustees Chairperson and approved by the Board of Trustees. Members of the Council typically include quality leaders, clinical providers, and front-line staff interested in clinical and quality issues.

Council Update

Five new members joined the Council this past year providing a well-rounded mixture of quality professionals and leadership. The Council met in April and September of 2024. Over the past year, the Council discussed and focused energy on the following topics:

- Analyzed 30-day readmissions and length of stay measures
- Explored high reliability organizations
- Discussed challenges with workforce violence
- Evaluated the role of artificial intelligence in today's healthcare
- Learned effective strategies with reducing C-diff cases from Faulkton Area Medical Center
- Examined the challenges with maternal health in rural America

Next Steps

The Council will remain diligent by monitoring the latest news, trends in the quality space at the state and national levels. The Council is committed to supporting quality work across the state and will continue to provide feedback and advisory to SDAHO Board of Trustees, SDAHO and other SDAHO Councils throughout this next year.

COUNCIL MEMBERS 2023-2024

- Mike Wilde, MD, Chairperson
- Brenda Behlings
- Kelli Aarstad
- Angela Dahlke
- Stacey Erickson
- Melissa Gale
- Julie Girard
- Sara Zoelle, MD
- Laurie Fieber
- Kelly Baloun
- Katie Biggins
- Jill Tice
- Sarah Wulff
- Brittany Barron
- Jenn Dietterle
- Amber Oines
- Julie Hennebold
- Association Support: Becky Heisinger

AHA REGIONAL POLICY BOARD UPDATE



The American Hospital Association (AHA) gathers membership input on major policy issues through its governing councils, committees and Regional Policy Boards (RPB). The AHA has nine (9) Regional Policy Boards. South Dakota AHA members are part of Regional Policy Board 6 (RPB 6), along with AHA members from North Dakota, Minnesota, Nebraska, Iowa, Kansas, and Missouri.

This meeting brings together representatives of hospitals and health systems that may be competitors to discuss issues and initiatives to benefit the nation's hospitals and the communities they serve.

There were a wide range of topics discussed this past year ranging from emergency preparedness, real-time disease detection, data exchange for health equity and the intersection of Diversity, Equity, and Inclusion (DEI) with health equity. Additionally, AHA has an increased emphasis on enhancing the public's trust and confidence in hospitals and health systems by focusing on workforce shortages and key patient safety measures.

As we press on to the new year, it seems there are more and more topics are on the horizon; some exciting and some that seem a bit daunting. With a wide variety of crucial topics, including political, legislative, and regulatory matters, workplace violence, physician shortages, telemedicine, cybersecurity, health plan accountability, drug shortages, access to maternity care, and patient safety measures, it's clear our work is cut out for us.

As we step into the new year, let us embrace the opportunities ahead with renewed dedication and compassion. In healthcare, each day brings a chance to make a difference, to heal, to listen, and to serve with unwavering commitment. With every challenge, we grow stronger, more resilient, and more united in our mission to care for others. May this year be filled with hope, innovation, and a deepened sense of purpose as we continue to touch lives and inspire positive change in the world of health care.

Delegate to AHA, John Ayoub

LEADINGAGE UPDATE



LeadingAge is an association of 5,000+ not-for-profit organizations representing the entire field of aging services in 38 states and is a part of the Global Aging Network which spans 30 countries across the globe. SDAHO is the South Dakota affiliate for LeadingAge, and I am honored to serve as the South Dakota Delegate to LeadingAge. Delegates represent their state and participate in the development of advocacy goals and strategies for LeadingAge. LeadingAge fights to remove barriers to care and improve funding for the industry. Together with LeadingAge, we help policymakers decipher complex issues in aging on Capitol Hill and at the state and local level to build a stronger future for aging services providers and the people we serve. There has never been a more important time to be a part of LeadingAge and I am happy to have the opportunity, as of July 2024, to take on the role of State Executive for LeadingAge.

For 2024, the primary focus of our daily advocacy work included:

- Activity to stop the final staffing rule mandate. LeadingAge joined a federal lawsuit in June 2024 against the Department of Health and Human Services (HHS) and the Centers for Medicare and Medicaid Services (CMS).
- Growing the workforce pipeline to ensuring that a qualified, committed workforce is available to work in aging services.
- Achieving the right balance between regulation and autonomy in nursing homes and enabling them to be funded, staffed, and structured to provide person-centered, high-quality post-acute and long-term services and supports (LTSS) to residents.
- Supporting aging services providers so they can thrive in Medicare and alternative payment models to deliver timely, innovative, and integrated care.
- Creating a well-developed, high-quality continuum of home and community-based services (HCBS) that complements informal caregiving for older individuals.
- Realizing the full integration of hospice and palliative care services into the continuum of care with appropriate reimbursement and reasonable regulation.
- Full adoption of telehealth waivers and protection for healthcare workers against violence.

Significant advocacy efforts were achieved in 2024 to ensure that the field of aging services remains strong well into the future. Several action alerts were issued in 2024 to extend telehealth flexibilities, protect affordable senior housing funding, support the Healthcare Workforce Resilience Act, overturn the federal staffing mandate, invest in the long-term care workforce, protect access to Medicaid HCBS and urge congress to support legislation that advances CNA training.

2024 continued to be a year of managing expenses, responding to changing CMS federal regulations and finding solutions to the workforce crisis. We look forward to 2025 and the opportunity to use our collective voice to raise awareness on the issues important to aging services.

Delegate to LeadingAge, Justin Hinker

mark your calendar

SDAHO EVENTS 2025

- All District Meeting Feb 12
- Post-Acute Partners in Care April 8-9
- Healthcare Leadership Training April 23-24
- MBQIP Quality Workshop April 30
- Workplace Safety Workshop May 13
- Rural Health Leaders Conference June 25-26
- Annual Convention Sept 24-26



BOARD 2023-2024

- Jason Merkley
- Paulette Davidson
- Tim Rave

SDAHO HRET is the non-profit 501(c)(3) arm of the Association. SDAHO HRET team continues to build on the foundation established in the previous year and enhanced the work to include new partnerships, expertise, and resources. These enhancements have enabled the SDAHO HRET to create change leading to improved quality of care across the state. SDAHO HRET is driven by the passion and desire of its vision statement to be the “Leading Experts in Quality”.

Highlights

Below are some of the highlights from the past year:

- SDAHO HRET continues to be a visible, engaged, and knowledgeable resource for our member hospitals. SDAHO HRET team continually provides resources and tools to ease the burdens and challenges faced by quality professionals across the state. SDAHO HRET team provides technical assistance through 1:1 virtual connection, email communications, and face to face meetings.
- Awarded a state EMS Regional Services Designation Grant to improve the interfacility transfer process in collaboration with Dell Rapids Ambulance and Sioux Falls Patient Care EMS

- Managed the following contracts/grants:
 - SD Flex/MBQIP program
 - HQIC /Compass
 - Overdose Data to Action (OD2A), ED Tool Kit
 - Administration for Strategic Preparedness & Response (ASPR)
 - HRSA Network Development Grant
 - HRSA Network Planning Grant
 - EMS Regional Services Designation Grant
- Enhanced partnerships with external stakeholders
- Hosted an MBQIP Workshop for SD Critical Access Hospitals quality professionals to expand their knowledge on the new 2025 MBQIP measures, surveyor readiness, psychological safety, and network with other professionals
- Secured funding to coordinate a Workplace Violence Education series for CAHs
- Facilitated a discussion at the SDAHO Annual Convention on opioids and substance abuse disorders
- Successfully closed the CMS HQIC/Compass quality improvement contract and exceeded all CMS goals

- Received recognition from Health Resources and Services Administration (HRSA) for improved MBQIP quality reporting in collaboration with South Dakota Department of Health
- Launched a Quality Professional and Director of Nursing Email Forums
- Hosted the Council on Clinical and Quality Integration, provided quality updates at the Board of Trustee and the SDAHO District meetings throughout the year.

Moving into 2025, SDAHO HRET will focus on continuous improvement and adding value to our member hospitals. SDAHO HRET is committed to meeting hospitals where they are on their quality journey by providing support, expertise, and resources. SDAHO HRET looks forward to another successful year.

SDAHO ENTERPRISES

SDAHO Enterprises Partner Solutions aims to bring greater value to SDAHO membership by offering partnership programs that take advantage of the association's collective membership strength. The wholly owned subsidiary's focus is to drive value through connecting healthcare organizations in South Dakota with a wide array of highly respected companies that provide service offerings that are competitively priced and delivered with exceptional customer service. Companies are vetted through a thorough process to ensure the priorities align with members and address needs including workforce challenges, technology needs and financial opportunities.

This year, the first three recipients of the SDAHO Enterprises Nursing and Allied Health Scholarship were awarded. This program is focused on supporting and nurturing the next generation of healthcare professionals in South Dakota.

This summer, the 5th annual Sunrise Classic Golf Tournament was a success, bringing together members, partners and sponsors for a day of friendly competition, networking and a little bit of rain. The event not only fostered stronger relationships but also provided an opportunity to celebrate shared successes and explore new avenues for collaboration. The positive feedback and strong participation underscore the value of these gatherings in reinforcing our partnerships and building lasting connections.

Looking to next year, SDAHO Enterprises will be focusing on driving growth across both financial and relational dimensions. From a financial perspective, Enterprises is always looking for opportunities to increase revenue, optimize operational efficiency and expand market presence to benefit members. Even more important than the financial perspective, SDAHO Enterprises has and will continue to prioritize strengthening relationships with members and partners. Enterprises recognizes the long-term success is built on trust and collaboration. By fostering deeper connections and enhancing our business network, the organization is laying a strong foundation for sustainable growth in the years ahead. This dual focus reflects our commitment to providing value in every avenue.

Should any members have questions or would like to request further information regarding SDAHO Enterprises Partnerships, please contact Kallee Rydland, SDAHO Enterprises Director at kallee.rydland@sdaho.org.



BOARD 2023-2024

- Scott Hargens
- Erick Larson
- Thomas Worsley
- Torrey Sundall
- Tony Timanus
- Tim Rave

ADVISORY GROUP 2023-2024

- Mark Schulte
- Natalie Gauer
- Isaac Gerdes
- Teresa Mallet
- Melissa Wagner

ENDORSED BUSINESS PARTNERS



STRATEGIC PARTNERS



SOUTH DAKOTA RURAL WORKFORCE NETWORK



Background

As the nation recovers from the COVID-19 pandemic, South Dakota faces significant workforce challenges, particularly in healthcare. With a staggering 51 unemployed workers for every 100 available jobs, the state has been profoundly affected by a shortage of healthcare professionals. Many workers have exited the field, placing additional strain on those who remain. To address this urgent need, on July 1, 2023, SDAHO Healthcare Research Education and Trust was awarded a four-year Health Resources and Services Administration Rural Health Network Development Program grant to establish the South Dakota Rural Workforce Network (SDRWN). Our mission is to enhance access to healthcare services in rural areas by creating a comprehensive pipeline of essential healthcare workers.

Goals and Target Audience

The SDRWN aims to recruit and train healthcare essential workers, defined as entry-level positions that support healthcare professionals. These roles include phlebotomists, medical assistants, nursing assistants, and more. We target diverse groups, including high school students, second-career adults, and rural ethnic and racial minorities, ensuring that our workforce reflects the communities we serve.

NETWORK PARTNERS

- Mobridge Regional Hospital
- Fall River Health Services
- Huron Regional Medical Center
- Sunset Manor
- University of South Dakota
- Lutheran Social Services
- Mitchell Technical Institute

Accomplishments

Over the past year, SDRWN has achieved significant milestones:

- **Establishment of Network:** Formed a diverse network of stakeholders, including the University of South Dakota, Mitchell Technical College, Lutheran Social Services, and four health care facilities in the state: Mobridge Regional Hospital, Fall River Health Services, Huron Regional Medical Center, and Sunset Manor.
- **Governance Framework:** Developed a Governance Board and Program Charter to guide our initiatives.
- **Strategic Planning:** Hired a consultant to complete an environmental scan and gap analysis, culminating in a comprehensive strategic plan.
- **Community Engagement:** Launched the Workforce Weekly newsletter and conducted educational presentations at conferences, including the Rural Leaders Conference, to raise awareness.
- **Partnership Development:** Joined key boards and task forces to expand our reach, including the HOSA Executive Board and the SD Statewide Childcare Taskforce.

Projected Outcomes

Our initiatives are set to deliver several impactful outcomes:

- **Economic Stability:** Strengthening local economies by addressing staffing shortages.
- **Reduced Burnout:** Mitigating staff fatigue through improved workforce distribution.
- **Skilled Workforce:** Cultivating a more capable healthcare workforce that meets patient needs.
- **Quality Care:** Enhancing patient safety, satisfaction, and overall healthcare quality.

Action Items in Progress

We are actively collaborating with our network partners to ensure effective implementation:

1. University of South Dakota: Developing a healthcare career pathways course to attract targeted audiences.
2. Mitchell Technical College: Standardizing educational programs and increasing scholarship awareness for at-risk students.
3. Lutheran Social Services: Offering vocational English language courses to assist immigrant and refugee populations.

Upcoming Initiatives

Following carryover approval, we are moving forward with an awareness campaign and website updates to further engage our target audiences and broaden SDRWN's visibility across South Dakota.

Conclusion

The SDRWN is committed to addressing the healthcare workforce crisis in South Dakota. Our accomplishments in the past year have laid a solid foundation for achieving our long-term goals. We look forward to continuing our efforts in building a robust pipeline of healthcare essential workers, ensuring that rural communities have access to high-quality healthcare services. For further information or to get involved, please contact our Workforce Development Coordinator at Lindsay.stroman@sdaho.org. Thank you for your support as we work towards a healthier South Dakota.

DISTINGUISHED SERVICE AWARD WINNERS

The distinguished service awards were created to recognize individuals for their exemplary service to health care and accomplishments in advancing the goals and purposes of the association.



Healthcare Hero

Dr. Stephen Tamang, Monument Health Rapid City Hospital



Healthcare Professional

Dr. Travis Henderson, Mobridge Regional Hospital and Clinics



Healthcare Journalist

Alex Strauss, MED Magazine



Post-Acute Care Champion

Douglas Ekeren, Avera Sacred Heart Hospital



State Legislator

Sen. Bryan Breitling



State Official

Mary S. Carpenter, MD, State of South Dakota



Trustee of the Year

Larry Gabriel, Philip Health Services



Larry Veitz Lifetime Achievement

Tammy Miller, Madison Regional Health System



Healthcare Community Impact

Jeff Partridge
(pictured is Grace Partridge, Jeff's daughter)



Quality Champion

Stacey Erickson, Avera Health



Young Professional

KaSara Sutton, Sanford Aberdeen Medical Center

STATEMENT OF FINANCIAL POSITION

Assets	2021	2022	2023
Current Assets:			
• Cash and Cash Equivalents	\$1,230,435	\$3,606,738	\$3,568,835
• Accounts Receivable	\$967,449	\$544,371	\$424,253
• Grants Receivable	-	\$5,001	\$135,997
• Income Tax Receivable	-	-	\$90,000
• Prepaid Expenses	\$118,283	\$76,579	\$59,835
• Investments	\$7,239,592	\$6,271,279	\$6,868,575
Total Current Assets	\$9,555,759	\$10,503,968	\$11,147,495
Assets Limited as to Use Cash and Cash Equivalents	\$87,929	\$63,859	\$59,325
Property and Equipment	\$398,073	\$323,331	\$277,622
Finance Lease Right of Use Assets	-	\$33,469	\$55,112
Assets Held for State Hospital Association Executives Forum	\$176,324	\$185,081	\$113,121
Total Assets	\$10,218,085	\$11,109,708	\$11,652,675
Liabilities and Net Assets	2021	2022	2023
Current Liabilities:			
• Accounts Payable	\$128,170	\$98,814	\$61,176
• Capital Lease Obligation	\$15,333	\$10,014	\$8,960
• Accrued Expenses			
◦ Accrued Salaries, benefits and payroll taxes	\$32,470	\$77,797	\$39,580
◦ Property Taxes	\$12,028	\$12,028	\$12,028
◦ Income Taxes	\$195,000	\$130,000	-
• Deferred Revenue	\$727,684	\$1,317,852	\$595,383
Total Current Liabilities	\$1,110,685	\$1,646,505	\$717,127
Other Liabilities:			
• Due to the State Hospital Association Executive Forum	\$176,324	\$185,081	\$113,121
• Capital Lease Obligation	\$33,972	\$23,899	\$46,852
Total Liabilities	\$1,320,981	\$1,855,485	\$877,100
Net Assets			
• Without Donor Restrictions			
◦ Undesignated	\$8,809,175	\$9,190,364	\$10,716,250
◦ Board Designated	-	\$17,877	-
• With Donor Restrictions	\$87,929	\$45,982	\$59,325
Total Net Assets	\$8,897,104	\$9,254,223	\$10,775,575
Total Liabilities and Net Assets	\$10,218,085	\$11,109,708	\$11,652,675

STATEMENT OF ACTIVITIES

Revenues	2021	2022	2023
Membership dues	\$1,618,006	\$1,961,919	\$2,193,027
Convention income	-	\$84,615	\$154,465
Institutes and workshop income	\$115,113	\$105,388	\$48,756
Clinical education and support income	\$547,154	\$301,168	\$300,633
Grant income	\$167,437	\$92,308	\$226,392
Marketing income	\$1,972,737	\$2,901,923	\$1,629,738
Data revenue	\$38,750	\$38,436	\$55,293
Management services revenue	\$12,000	\$12,000	\$12,720
Miscellaneous income	\$34,002	\$8,096	\$9,153
Net assets released from restrictions	\$7,897	\$58,383	\$14,390
Total Revenue	4,513,096	\$5,564,236	\$4,644,597
Expenses	2021	2022	2023
Salaries and fringe benefits expense	\$1,581,813	\$1,863,800	\$2,071,620
Payroll tax expense	\$86,102	\$101,437	\$113,330
Outside services expense	\$838,328	\$375,782	\$384,676
Travel and training expense	\$127,798	\$200,519	\$207,097
Convention expense	\$22,592	\$197,825	\$170,552
Sponsored grant programs other expenses	\$84,651	\$45,465	\$128,932
Disbursement to sub-recipient - Hospital Preparedness Program	\$126,448	\$31,299	\$41,732
Institutes and workshop expense	\$101,606	\$131,081	\$115,299
General office expense	\$81,241	\$115,038	\$97,085
Depreciation and amortization expense	\$61,758	\$80,855	\$79,347
Insurance expense	\$18,464	\$17,546	\$18,375
Sponsorship expense	\$37,257	\$48,632	\$67,728
Contribution expense	\$250,000	\$603,600	\$10,000
Auto expense	\$1,505	\$9,861	\$10,151
Political action committee	\$1,250	\$46,336	\$6,017
Total Expense	\$3,445,219	\$3,894,487	\$3,547,885
Operating (Loss) Income	\$1,067,877	\$1,669,749	\$1,096,712
Other Income (Expense)			
• Investment income	\$467,750	\$(700,683)	\$671,297
• Income taxes	\$(261,464)	\$(570,000)	\$(260,000)
Other Income, NET	\$236,286	\$(1,270,683)	\$411,297
Revenues in excess of (Less than) Expenses	\$1,304,163	\$399,066	\$1,508,009



South Dakota

Association of Healthcare Organizations

South Dakota Association of Healthcare Organizations

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