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TESTIMONY: H.3225, HOUSE SOCIAL SERVICES, MENTAL HEALTH, AND CHILDREN'S AFFAIRS

SUBCOMMITTEE February 15, 2021

The League of Women Voters of South Carolina applauds this effort to address the serious problem of poor perinatal health care outcomes in our state, including serious maternal disability and death. We are aware that reliable research demonstrates that these outcomes are especially concentrated among African Americans and that implicit bias is a significant contributor to this tragic record.

We would very much like to see an effective response to this important problem and therefore have several concerns. The League has considerable experience with mandates intended to address racial and other disparities, for example the voter registration opportunities that social service agencies and DMV are required to provide under the National Voter Registration Act of 1993 (NVRA). We know from experience that even the threat of litigation is not sufficient to get a robust response from some state agencies and that, when pressed, considerable ingenuity can be devoted to devising perfunctory responses to a statutory mandate.

We therefore question whether the training required by this bill will be generally effective without accompanying accountability measures. We recommend that DHEC be charged with reporting annually on both specific training measures and outcomes associated with the providers specified in this bill.

Finally, we cannot leave this subject without reference to the larger problem of implicit bias and health care outcomes in South Carolina. Implicit bias is a problem among health care providers, but it is also a problem at the State House. Although economic excuses are usually offered, implicit bias very certainly underlies some of the opposition to Medicaid Expansion in South Carolina. The Kaiser Family Foundation (KFF) has made a review of the effects of Medicaid expansion at 10 years after passage of the Affordable Care Act (ACA).¹ They note substantial improvements in health care access and health outcomes in states that accepted expansion. But beyond this, they observe that the economic benefits are very substantial. They cite "numerous economic outcomes including state budget savings, revenue gains, and overall economic growth. Multiple studies suggest that expansion can result in state savings by offsetting state costs in other areas." So, economic arguments against expansion simply do not hold up to objective consideration. Why then do we deny this badly needed help to the people of South Carolina? Perhaps some implicit bias training at the State House would help address this significant contributor to poor perinatal outcomes in South Carolina.

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¹ Kaiser Family Foundation. "The Effects of Medicaid Expansion under the ACA: Updated Findings from a Literature Review." 17 Mar 2020. https://www.kff.org/medicaid/report/the-effects-of-medicaid-expansion-under-the-aca-updated-findings-from-a-literature-review/.