SECTION 33 - J020 - DEPARTMENT OF HEALTH AND HUMAN SERVICES

- **33.23 AMEND** (BabyNet IDEA Part C Compliance) Directs the department to report to the Governor and the Chairmen of the Senate Finance and House Ways and Means Committees by December 31, 2019, on the status of the department's efforts to bring the BabyNet program into compliance with federal requirements.
 - **SUBCOMMITTEE RECOMMENDATION:** AMEND proviso to change program name from "BabyNet" to "Individuals With Disabilities Education Act (IDEA) Part C." Update calendar year reference to "2021." Requested by Department of Health and Human Services
 - **33.23.** (DHHS: BabyNet <u>IDEA Part C</u> Compliance) With the funds available to the department, the Department of Health and Human Services shall report to the Governor, the Chairman of the Senate Finance Committee, and the Chairman of the House Ways and Means Committee no later than December 31, <u>2019 2021</u> on the status of the department's efforts to bring the <u>BabyNet Individuals With Disabilities Education Act (IDEA) Part C</u> program into compliance with federal requirements. This report must specifically address areas in which the <u>BabyNet IDEA Part C</u> program has received low performance scores and include any relevant correspondence from the U.S. Department of Education. The report must explain the department's plan for bringing <u>BabyNet the program</u> into compliance, including specific steps and the associated timeline.
- **33.emd ADD** (Meals in Emergency Operations) **SUBCOMMITTEE RECOMMENDATION:** ADD new proviso to allow the department to provide the cost of meals to state employees who are required to work during emergencies, emergency situation exercises, and when the Governor declares a state of emergency. Requested by Department of Health and Human Services
 - 33.emd. (DHHS: Meals in Emergency Operations) The cost of meals may be provided to state employees who are not permitted to leave their stations and are required to work during actual emergencies, emergency situation exercises, and when the Governor declares a state of emergency.

SECTION 34 - J040 - DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

- 34.8 AMEND (Emergency Medical Services) Provides for the allocation of Emergency Medical Services funds to counties, EMS Regional Councils and the state EMS office. Prohibits funds appropriated for EMS from being transferred to other programs within the department's budget. Authorizes unexpended funds to be carried forward and specifies how the funds must be used. SUBCOMMITTEE RECOMMENDATION: AMEND proviso to delete the 50% restriction on the amount of carry forward funds that may be spent for administrative and operational support. Direct that after January 1, 50% of unclaimed funds used for aid to counties from the prior fiscal year be transferred to the SC EMS Association. Requested by Department of Health and Environmental Control.
 - **34.8.** (DHEC: Emergency Medical Services) Funds appropriated herein for Emergency Medical Services, shall be allocated for the purpose of improving and upgrading the EMS system throughout the state. The monies allocated to the Counties are for the purpose of improving or upgrading the local EMS system through the licensed ambulance services, the monies allocated to the EMS Regional Councils are for the administration of training programs and technical assistance to local EMS organizations and county systems. All additional funds are to be

allocated as follows: to the counties at the ratio of eighty-one percent of the additional funds appropriated herein, to the EMS Regions at a ratio of twelve percent of the additional funds appropriated herein and to the state EMS Office at the ratio of seven percent of the additional funds appropriated herein. The Department of Health and Environmental Control shall develop criteria and guidelines and administer the system to make allocations to each region and county within the state, based on demonstrated need and local match. Funds appropriated to Emergency Medical Services shall not be transferred to other programs within the department's budget. Unexpended funds appropriated to the program may be carried forward to succeeding fiscal years, and fifty percent may be expended for administrative and operational support and for temporary and contract employees to assist with duties related to improving and upgrading the EMS system throughout the state, including training of EMS personnel and administration of grants to local EMS providers. After January 1st of the current fiscal year, the remaining fifty percent of unexpended unclaimed funds carried forward utilized for aid to counties from the prior fiscal year shall be transferred to the South Carolina EMS Association to promote and encourage education of emergency medical technicians and directors of emergency medical services; to collect, analyze, and distribute information about emergency medical services; to promote the improvement of patient care; to cooperate with other organizations; and to effect more efficient administration of emergency medical services in the State of South Carolina. In addition, when instructed by the Executive Budget Office or the General Assembly to reduce funds by a certain percentage, the department may not reduce the funds appropriated for EMS Regional Councils or Aid to Counties greater than such stipulated percentage.

- **34.50 DELETE** (Ocean Water Quality Outfall Initiative) Directs the department make funds available as state matching funds for Horry County Ocean Water Quality Outfall Initiatives. Authorizes these funds to be retained, carried forward, and used for the same purpose. Requires interest to be retained and used as state match funds for either local or federal funding.
 - **SUBCOMMITTEE RECOMMENDATION:** DELETE proviso. Requested by Department of Health and Environmental Control.
 - **34.50.** (DHEC: Ocean Water Quality Outfall Initiative) In the current fiscal year, funds appropriated and authorized to the Department of Health and Environmental Control in the department's Beach Renourishment Fund shall be made available as state matching funds for Horry County Ocean Water Quality Outfall Initiatives. The department is authorized to retain and carry forward these funds into the current fiscal year to be used for the same purpose. Any interest generated by the account must be credited and deposited into this account, to be used as state matching funds for either local or federal funding, and utilized for Ocean Water Quality Outfall Initiatives in Horry County.
- 34.53 AMEND (HIV/AIDS Treatment and Prevention) Authorizes funds for HIV and AIDS prevention and treatment be used to develop partnerships to provide services to all patients, regardless of their ability to pay. Specifies partnership development with the Joseph H. Neal Health Collaborative and CAN Community Health, Inc. and include a plan for prevention and treatment of Hepatitis C. Directs the department to ensure that the funds are spent solely for testing and treatment services. Allows funds to be used to enhance services provided through federal funds allocation or the state's AIDS Drug Assistance Program rebate funds. Directs Ryan White Part B Grants funds be included in the funds allowed to enhance services.

SUBCOMMITTEE RECOMMENDATION: AMEND proviso to delete reference to "CAN Community Health, Inc." and direct the department to spend \$500,000 with the Joseph H. Neal Health Collaborative.

- **34.53.** (DHEC: HIV/AIDS Treatment and Prevention) From the funds appropriated to the Department of Health and Environmental Control in the current fiscal year for HIV and AIDS prevention and treatment, the department shall develop partnerships a partnership with the Joseph H. Neal Health Collaborative and CAN Community Health, Inc. expend \$500,000 to provide comprehensive medical, dental, psychological, and educational services to all patients, regardless of their financial situation, insurance status, or ability to pay. In addition, CAN Community Health, Inc. the Joseph H. Neal Health Collaborative shall develop a deploy its plan for the treatment and prevention of Hepatitis C. The department shall ensure the funds are expended solely for testing, treatment, and follow-up services of HIV/AIDS and Hepatitis C, and providing primary care and dental care. Funds may be used to enhance the services provided through a combination of Ryan White Part B Grant funds and other federal funds or the state's AIDS Drug Assistance Program rebate funds.
- **34.rfe ADD** (Reimbursement of Expenditures) **SUBCOMMITTEE RECOMMENDATION:** ADD new proviso to authorize DHEC to collect, expend, retain, and carry forward all funds received in the current fiscal year as reimbursement of expenditures incurred in the current or prior fiscal year. Requested by Department of Health and Environmental Control.
 - <u>34.rfe.</u> (DHEC: Reimbursement of Expenditures) The Department of Health and Environmental Control is authorized to collect, expend, retain, and carry forward for general operating purposes all funds received in the current fiscal year as reimbursement of expenditures incurred in the current or prior fiscal year.
- **34.orsa ADD** (Organizations Receiving State Appropriations) **SUBCOMMITTEE RECOMMENDATION:** ADD new proviso to authorize DHEC to reduce funds appropriated for the allocation/contribution of specific amounts of state aid to organizations, programs, special items, or activities by a stipulated percentage except when instructed by EBO or the General Assembly to reduce funds within the department by a certain percentage. Fiscal Impact: RFAO states this proviso will have an undetermined expenditure impact in FY 2021-22. Any impact will depend upon actual appropriations and any potential reduction as instructed by EBO or the General Assembly. Requested by Department of Health and Environmental Control.

34.orsa. (DHEC: Organizations Receiving State Appropriations) Notwithstanding any other provisions of this act, the funds appropriated to the Department of Health and Environmental Control for the allocation/contribution of specific amounts of state aid to organizations, programs, special items or activities shall be distributed as appropriated except when instructed by the Executive Budget Office or the General Assembly to reduce funds within the department by a certain percentage, the department may reduce these items up to the stipulated percentage.

SECTION 38 - L040 - DEPARTMENT OF SOCIAL SERVICES

38.1 AMEND (Fee Retention) Requires DSS to recoup all refunds and identified program overpayments in accordance with established collection policy. Requires \$800,000 of Child Support Enforcement Program (Title IV D) funds collected to be remitted to the State Treasurer and credited to the general fund and authorizes the department to retain all funds collected above \$800,000 and use the funds for Self-Sufficiency and Family Preservation and Support initiatives. **SUBCOMMITTEE RECOMMENDATION:** AMEND proviso to delete the directive that \$800,000 of refunds and overpayments collected be sent to the State Treasurer and credited to

the General Fund. Authorize the department to retain all refunds and overpayments recouped and allow the funds to be used toward FTI and PII data security and child support operations. Fiscal Impact: This provision will decrease General Fund revenues by \$800,000 and increase agency other funds by a like amount. Requested by Department of Social Services.

- **38.1.** (DSS: Fee Retention) The Department of Social Services shall recoup all refunds and identified program overpayments and all such overpayments shall be recouped in accordance with established collection policy. Funds of \$800,000 collected under the Child Support Enforcement Program (Title IV-D) which are state funds shall be remitted to the State Treasurer and credited to the General Fund of the State. All state funds above \$800,000 shall be retained by the department <u>and may be used</u> to fund Self-Sufficiency and Family Preservation and Support initiatives, to make improvements to the security for FTI and PII data, and for child support operations.
- 38.17 DELETE (Child Support Enforcement System) Requires the department to prepare a detailed report on the status of the Child Support Enforcement System. Requires the report include actions being undertaken to become compliant with federal requirements and the cost required to meet minimum federal guidelines; total funds spent on the system to date; the amount of fines assessed for noncompliance; and expenditures required to satisfy actions taken by the state judicial system or other entities that may have altered the amount required for meeting minimum federal guidelines. Require the report be submitted to the General Assembly by August 31st. SUBCOMMITTEE RECOMMENDATION: DELETE proviso. Requested by Department of Social Services.
 - 38.17. (DSS: Child Support Enforcement System) From the funds appropriated in Part IA, Section 38 (II.F.), the Department of Social Services shall prepare a detailed report on the status of the Child Support Enforcement System. The report shall include, but not be limited to, actions currently being undertaken to become compliant with federal government requirements; the cost required to meet minimum federal guidelines; total funds spent so far on the system; the amount of fines assessed by the federal government associated with noncompliance; how much has been spent to satisfy actions taken by the state judicial system; and how much has been spent related to actions taken by any other entity which may have altered the amount required for meeting minimum federal guidelines. The report shall be submitted to the General Assembly by August thirty-first of the current fiscal year.
- **38.30 DELETE** (Comprehensive Child Welfare Information System) Directs DSS to use a portion of their recurring funds to issue a RFP by 9/30/18 for a vendor to implement a comprehensive case management data and analysis system.

SUBCOMMITTEE RECOMMENDATION: DELETE proviso. Requested by Department of Social Services.

38.30. (DSS: Comprehensive Child Welfare Information System) A portion of the recurring funds appropriated to the department shall be used to issue a request for proposal, no later than September 30, 2018, for a vendor to implement a comprehensive case management data and analysis system.

SECTION 40 - L060 - DEPARTMENT ON AGING

- **40.1 AMEND** (State Matching Funds Carry Forward) Authorizes Distribution to Subdivisions required state matching funds to be carried forward.
 - **SUBCOMMITTEE RECOMMENDATION:** AMEND proviso to change "Distribution to Subdivisions" to "Aging Assistance." Requested by Department on Aging.
 - **40.1.** (AGING: State Matching Funds Carry Forward) Any unexpended balance on June thirtieth of the prior fiscal year of the required state matching funds appropriated in Part IA, Section 40, Distribution to Subdivisions Aging Assistance, shall be carried forward into the current fiscal year to be used as required state match for federal funds awarded to subdivisions on or before September thirtieth of the current fiscal year.
- **40.2 AMEND** (State Match Funding Formula) Directs that Distribution to Subdivision funds be first allocated for the required state match for the Older Americans Act funds and that the balance be distributed to the planning and service areas.
 - **SUBCOMMITTEE RECOMMENDATION:** AMEND proviso to change "Distribution to Subdivisions" to "Aging Assistance." Requested by Department on Aging.
 - **40.2.** (AGING: State Match Funding Formula) Of the state funds appropriated under "Distribution to Subdivisions," "Aging Assistance," the first allocation by the Department on Aging shall be for the provision of required State matching funds according to the Department on Aging formula for distributing Older Americans Act funds. The balance of this item shall be distributed to the planning and service areas of the State. In the event state appropriations are reduced, reductions to the planning and service areas shall be based on amounts distributed in accordance with the previous requirements.
- AMEND (Home and Community Based Services) Directs that Home and Community-Based Services state funds be used for services that most directly meet the goal of allowing seniors to live safely and independently at home. Defines allowable services; provide a methodology for allocating these funds to the Area Agencies on Aging; allow the AAAs to spend up to 10% for administrative services and the department to retain 1/4 of 1% to monitor and oversee the program; allows the department to retain up to 3% to be allocated for cases of a recognized emergency and/or natural disaster recognized by the Governor and directs that if the funds are not allocated they are to be treated as carry forward funds and reallocated to the AAA's; requires each AAA to submit a budget to the Department on Aging's for approval that indicates the services to be provided; authorizes these funds to be carried forward and used for the same purpose; and prohibits the funds from being transferred and used for any other purpose.
 - **SUBCOMMITTEE RECOMMENDATION:** AMEND proviso to delete references to "formerly Home Care Level I" and "formerly Home Care Level II." Change "Interstate" to "Intrastate." Requested by Department on Aging.
 - **40.5.** (AGING: Home and Community-Based Services) State funds appropriated for Home and Community-Based Services shall be used to fund those services that most directly meet the goal of allowing seniors to live safely and independently at home. Allowable services as defined in the Department on Aging's State Plan include: group dining, home delivered meals, transportation to group dining sites, transportation for essential trips, personal care (formerly Home Care Level I), homemaker (formerly Home Care Level II), Home Chore, Home Modification, Legal Assistance, and Assessments. Area Agencies on Aging (AAAs) may expend

no more than ten percent for administrative services and one-quarter of one percent shall be retained by the Department on Aging to provide monitoring and oversight of the program. However, up to three percent of the annual state appropriation for Home and Community-Based Services may be retained at the Department on Aging to be allocated by the department to the affected regions in cases of an emergency and/or natural disaster recognized by the Governor. If these funds are not utilized in the fiscal year allocated, they are to be treated as carry forward funds and reallocated to the AAAs. The Interstate Intrastate Funding Formula shall be used as a guideline for the allocation of state funds appropriated for Home and Community-Based Services. The Department on Aging shall develop and implement a structured methodology to allocate the state Home and Community-Based Services funding. The methodology shall include flexibility to reallocate funds amongst the AAAs, and be composed of, at a minimum, the following factors: a minimum base amount, the fiscal year's federally allocated funds, federal and state carry forwards funds, and an appropriate weighted proportion that will achieve the mission of the Department on Aging to provide as many services as possible to the citizens of South Carolina. Each AAA shall submit a budget for approval by the Department on Aging indicating the services to be provided. Any unexpended Home and Community-Base Services funds in this program shall be carried forward by the Department on Aging and used for the same purposes. Funds may not be transferred from the Home and Community-Based special line item for any other purpose.

SECTION 41 - L800 - DEPARTMENT OF CHILDREN'S ADVOCACY

41.2 AMEND (Guardian Ad Litem Program) Requires the Guardian ad Litem Program and funds be administered separately from other programs within the Department of Children's Advocacy and that program funds be used exclusively for the program. Directs the Department of Revenue reduce the rate of interest paid on eligible refunds by 2 percentage points and to deposit these funds into the S.C. Guardian ad Litem Trust Fund. Authorizes program funds to be carried forward

SUBCOMMITTEE RECOMMENDATION: AMEND proviso to delete the requirement that the Guardian ad Litem Program and funds be administered separately from other programs within the Department of Children's Advocacy and that program funds be used exclusively for the program. Requested by Department of Children's Advocacy.

41.2. (DCA: Guardian Ad Litem Program) Both the program and the funds appropriated to the Department of Children's Advocacy, Guardian ad Litem Program must be administered separately from other programs within the Department of Children's Advocacy and must be expended for the exclusive use of the Guardian ad Litem Program.

For the current fiscal year, the Department of Revenue is directed to reduce the rate of interest paid on eligible refunds by two percentage points. The revenue resulting from this reduction must be used exclusively for operations of the Guardian ad Litem program and be deposited in the State Treasury in a separate and distinct fund known as the "South Carolina Guardian ad Litem Trust Fund." Unexpended revenues in this fund carry forward to succeeding fiscal years, and earnings in this fund must be credited to it. The Guardian ad Litem program may carry forward the other funds authorized herein for its operations from the prior fiscal year into the current fiscal year.

SECTION 103 - E500 - REVENUE AND FISCAL AFFAIRS OFFICE

AMEND (SC Health & Human Services Data Warehouse) Establishes the South Carolina Health and Human Services Data Warehouse within the Revenue and Fiscal Affairs Office to ensure that health and human services agencies operations may be enhanced by coordination and integration of client information; defines client data; provides guidelines for operation of the data warehouse; and specifies agencies which are required to report client information.

SUBCOMMITTEE RECOMMENDATION: AMEND proviso to include "other electronic health record system" in DHEC's exemption from using the integrated client management system and the analytic query tools. Requested by Department of Health and Environmental Control.

- 103.3. (RFAO: SC Health & Human Services Data Warehouse) There is hereby established within the Revenue and Fiscal Affairs Office, the South Carolina Health and Human Services Data Warehouse. The purpose of the Warehouse is to ensure that the operation of health and human services agencies may be enhanced by coordination and integration of client information. Client data is defined as person-level data that is created, received, and/or maintained by state agencies and other entities required to report client information to the Revenue and Fiscal Affairs Office under this provision. To integrate client information, client data from health and human services state agencies will be linked to improve client outcome measures, enabling state agencies to analyze coordination and continuity of care issues. The addition of these data will enhance existing agency systems by providing client data from other state agency programs to assist in the provision of client services. Certain client information shall be delivered to the Revenue and Fiscal Affairs Office in order to assist in the development and maintenance of this Warehouse. The following agencies shall report client information:
 - Departments of:
 - (1) Health and Human Services;
 - (2) Health and Environmental Control;
 - (3) Mental Health;
 - (4) Alcohol and Other Drug Abuse Services;
 - (5) Disabilities and Special Needs;
 - (6) Social Services;
 - (7) Vocational Rehabilitation:
 - (8) Education:
 - (9) Juvenile Justice;
 - (10) Corrections;
 - (11) Probation, Parole and Pardon Services;
 - Department of Children's Advocacy:
 - (1) Children's Foster Care Review Board;
 - (2) Continuum of Care;
 - Department on Aging;
 - South Carolina School for the Deaf and the Blind;
 - Commission for the Blind; and
 - Other entities as deemed necessary by the Revenue and Fiscal Affairs Office.

These agencies and departments shall collect and provide client data in formats and schedules to be specified by the Revenue and Fiscal Affairs Office (Office). The Office shall establish a Memorandum of Agreement with each agency, department or division. These Memorandums of Agreement shall specify, but are not limited to, the confidentiality of client information, the conditions for the release of data that may identify agencies, departments, divisions, programs and services, or clients, any restrictions on the release of data so as to be compliant with state and

federal statutes and regulations on confidentiality of data, conditions under which the data may be used for research purposes, and any security measures to be taken to insure the confidentiality of client information.

To ensure accountability and the coordinated, efficient delivery of health and human services, the Office shall implement, in consultation with state health and human services agencies and other entities as deemed necessary by the Office, an integrated data system that includes client data from all participating agencies.

In order to provide for inclusion of other entities into the South Carolina Health and Human Services Data Warehouse and other research and analytic-oriented applications that will assist the state in the efficient and effective provision of services, the Office shall have the authority to enter into agreements or transactions with any federal, state or municipal agency or other public institution or with any private individual, partnership, firm, corporation, association or other entity to provide statistical, research and information dissemination services including, but not limited to, program and outcomes evaluation, program monitoring/surveillance, projects to determine the feasibility of data collection and/or analyses, information dissemination and research. The confidentiality of data collected under these initiatives shall comply with applicable state and federal laws governing the privacy of data. The Office shall have the power to promulgate regulations, policies and procedures, in consultation with the participating agencies, for the development, protection and operation of the Data Warehouse, other research and analytic-oriented applications, and their underlying processes.

The Office shall develop internet-accessible secure analytic query tools (such as analytic cubes) using integrated client data from the Warehouse. All agencies shall cooperate with the Office in the development of these analytic tools. It is the intent of this provision that the analytic tools developed under this provision shall be made available to members of the South Carolina General Assembly and their research staff members, state agencies, and researchers. To that end, the Office shall, in consultation with the participating agencies, promulgate regulations addressing access to and use and release of information generated through use of the query tools.

All state agencies participating in the Warehouse shall utilize it and its associated software applications in the day-to-day operation of their programs and for coordination, collaboration, program evaluation and outcomes analysis. The Department of Health and Environmental Control shall be exempt from usage of the integrated client management system and the analytic query tools in the day-to-day operation of their Client Automated Record and Encounter System or other electronic health record system and their South Carolina Community Assessment Network, but shall provide the Warehouse with client data from the system and network.

No state agency shall duplicate any of the responsibilities of this provision.

For purposes of this subsection, all state laws, regulations, or any rule of any state agency, department, board, or commission having the effect or force of law that prohibits or is inconsistent with any provision of this subsection is hereby declared inapplicable to this subsection.

SECTION 108 - F500 - PUBLIC EMPLOYEE BENEFIT AUTHORITY

AMEND (Health Plan Tobacco User Differential) Authorizes the board to differentiate between tobacco users and nonusers regarding rates charged to enrollees in its health plans by imposing a surcharge on enrollee rates based upon tobacco use. Directs that the surcharge for tobacco use may not exceed \$40 per month per subscriber or \$60 per month per subscriber and dependent(s). **SUBCOMMITTEE RECOMMENDATION:** AMEND proviso to include e-cigarette usage.

- **108.3.** (PEBA: Health Plan Tobacco User Differential) For health plans adopted under the authority of Section 1-11-710 of the 1976 Code by the Public Employee Benefit Authority during the current fiscal year, the board is authorized to differentiate between tobacco *or e-cigarette* users and nonusers regarding rates charged to enrollees in its health plans by imposing a surcharge on enrollee rates based upon tobacco *or e-cigarette* use. The surcharge for tobacco *or e-cigarette* use may not exceed \$40 per month per subscriber or \$60 per month per subscriber and dependent(s).
- **108.rwe ADD** (COVID-19 Return to Work Extension) **SUBCOMMITTEE RECOMMENDATION:** ADD new proviso to direct that for FY 2021-22, the earnings limitation does not apply to retired SCRS or PORS members who return to covered employment to participate in the state's public health preparedness and response to COVID-19.

108.rwe (PEBA: COVID-19 Return to Work Extension) For Fiscal Year 2021-22, the earnings limitation imposed pursuant to Section 9-1-1790 and Section 9-11-90 of the 1976 Code does not apply to retired members of the South Carolina Retirement System or the Police Officers Retirement System who return to covered employment to participate in the state's public health preparedness and response to the COVID-19 virus.

SECTION 117 - X900 - GENERAL PROVISIONS

- 117.118 **DELETE** (BabyNet) Directs EBO to conduct an inventory of all BabyNet related spending and submit it to the Governor and the Chairmen of the Senate Finance and House Ways and Means Committees by July 15, 2019. Directs affected agencies to provide such information upon request so that the first recommendation contained in the 2011 LAC audit report may be implemented. **SUBCOMMITTEE RECOMMENDATION:** DELETE proviso. Requested by Department of Health and Human Services.
 - 117.118. (GP: BabyNet) From funds available in the current fiscal year for budgetary analysis and oversight, the Executive Budget Office shall conduct an inventory of all BabyNet related spending, which shall be submitted to the Governor, the Chairman of the Senate Finance Committee, and the Chairman of the House Ways and Means Committee no later than July 15, 2019. All affected agencies shall support the Executive Budget Office in this effort by providing information upon request, so that the first recommendation of the Legislative Audit Council's 2011 report on BabyNet may be implemented.
- 117.119 AMEND (South Carolina Telemedicine Network) Directs the MUSC Hospital Authority and the Department of Health and Human Services to continue to develop the SC Statewide Telemedicine Network. Directs DHHS and PEBA to review federal additions to telehealth coverage established under specific federal legislation and for each to submit a report by October 1, 2019, to the Governor and the Chairmen of the Senate Finance and House Ways and Means Committees on how they intend to broaden their service-based coverage to align with the federal changes and to improve sustainability of telehealth services.

SUBCOMMITTEE RECOMMENDATION: AMEND proviso to require MUSC to provide DHHS with all necessary information and material to seek federal medical assistance associated with the contract. Delete the requirement that DHHS and PEBA review federal additions to telehealth coverage in certain federal legislation and/or regulation. Delete the requirement that a report be submitted by October 1st on how they intend to broaden their service-based coverage

to align with the federal changes and to improve sustainability of telehealth services. Requested by Department of Health and Human Services.

- 117.119. (GP: South Carolina Telemedicine Network) From the funds appropriated to the Medical University of South Carolina for the MUSC Hospital Authority for Telemedicine and the funds appropriated and authorized for the Department of Health and Human Services, the agencies must continue the development of the South Carolina Statewide Telemedicine Network. The South Carolina Telehealth Alliance shall submit a proposal to the MUSC Hospital Authority and the Department of Health and Human Services to determine which hospitals, clinics, schools or other entities are best suited for Telemedicine partnerships.
- (A) The Department of Health and Human Services shall develop or continue a program to leverage the use of teaching hospitals to provide rural physician coverage by expanding the use of Telemedicine, to include new applications such as School Based Telehealth, and Tele-ICU. The department shall also amend its policy related to reimbursement for telemedicine to add Act 301 Behavioral Health Centers as a referring site for covered telemedicine services.
- (B) During the current fiscal year the Department of Health and Human Services shall contract with the MUSC Hospital Authority in the amount of \$5,000,000 to lead the development and operation of a statewide, open access South Carolina Telemedicine Network. At the request of the department, MUSC shall provide the department with all information and materials necessary to seek federal medical assistance for this contract. The MUSC Hospital Authority shall contract with each Regional Support Hub to ensure funding and support of strategic plans submitted by the Regional Support Hubs and approved by both the MUSC Hospital Authority and the Department of Health and Human Services. Institutions and other entities participating in the network must be afforded the opportunity to meaningfully participate in the development of any annual refining to the initiative's strategic plan. Working with the department, the MUSC Hospital Authority shall collaborate with Palmetto Care Connections to pursue this goal. No less than \$1,000,000 of these funds shall be allocated toward support of Palmetto Care Connections and other hospitals in South Carolina. The MUSC Hospital Authority must provide the department with quarterly reports regarding the funds allocation and progress of telemedicine transformation efforts and networks. These reports must include an itemization of the ultimate recipients of these funds, whether vendors, grantees, specific participating institutions, or the Medical University of South Carolina, and must distinguish between funds allocation to the university as a participating institution as opposed to those retained and used by the university in its capacity as the administering entity for the network.
- (C) The Department of Health and Human Services and the Public Employee Benefit Authority shall each review federal additions to telehealth coverage established under the Bipartisan Budget Act of 2018, the SUPPORT for Patients and Communities Act, and other recent federal legislation and/or regulation. No later than October 1, 2019, both of these agencies shall submit a report to the Governor, the Chairman of the Senate Finance Committee, and the Chairman of the House Ways and Means Committee on how they intend to broaden their service based coverage to align with these federal changes and to improve the sustainability of telehealth services.
- **117.125 AMEND** (Opioid Abuse Prevention and Treatment Plan) Directs DAODAS and DHHS to establish a coalition of state agencies, providers, and other related entities to coordinate opioid abuse prevention and treatment services throughout the state.

SUBCOMMITTEE RECOMMENDATION: AMEND proviso to delete the directive that DHHS, in consultation with DAODAS, identify at least one county that has a disproportionately high number and incidence of opioid-related overdoses and deaths and provide up to \$500,000 to develop a local continuum of substance and behavioral health service coordination within the

target county and across the region. Delete the requirement that the advisory board provide a report on the development and implementation of the plan. Requested by Department of Health and Human Services.

- 117.125. (GP: Opioid Abuse Prevention and Treatment Plan) From the funds appropriated and authorized to the Department of Alcohol and Other Drug Abuse Services and the Department of Health and Human Services in the current fiscal year, the agencies shall establish a coalition of state agencies, providers and other related entities to combat the opioid epidemic in a collaborative manner and ensure that appropriate services and treatments are made available statewide. This initiative should include efforts to coordinate funding for the provision of treatment with an assessment of current programs and funding levels, to enhance available prevention, treatment and recovery services; expand provider capacity; and enable workforce development for substance use disorder services. General Funds appropriated to any state agency for Opioid Abuse Prevention and Treatment may be carried forward and expended for the same purpose.
- (A) The Department of Alcohol and Other Drug Abuse Services, the State Law Enforcement Division, and the Department of Health and Human Services shall establish an advisory board with representation from both agencies, to provide both oversight and administrative direction to the coalition. The advisory board may also include representation from the Department of Health and Environmental Control, the Department of Mental Health, the Medical University of South Carolina, the University of South Carolina's School of Medicine, the Department of Labor Licensing and Regulation, the Department of Corrections, state and local law enforcement agencies, the judicial branch, the South Carolina Hospital Association, the South Carolina Medical Association, the South Carolina Primary Health Care Association, Behavioral Health Centers and other related entities. The advisory board must consider recommendations made in the 2018 report by the South Carolina House of Representatives Opioid Abuse Prevention Study Committee, as well as any recommendations made by the South Carolina Behavioral Health Coalition related to substance use disorders and create a plan to ensure implementation of appropriate recommendations.
- (B) The Department of Health and Human Services may leverage any and all available federal funds to implement enhanced treatment services and resources for this coalition.
- (C) In consultation with the Department of Alcohol and Other Drug Abuse Services and the Medical University of South Carolina Hospital Authority, the Department of Health and Human Services shall review and evaluate outcomes data from the program for MAT services for prescription opioid dependency and addiction established by Act 97 of 2017 and expanded by Act 264 of 2018. Based on the success rate and ability to continue expansion of this model, the department may provide funding not to exceed \$2,500,000 to continue and expand the program to additional providers that are necessary to ensure greater impact in geographical areas of critical need. All medications proven to be effective in treating opioid addiction shall be considered as viable options on a case by case basis to ensure the greatest level of success for individuals in the program.
- (D) In consultation with the Department of Alcohol and Other Drug Abuse Services, the Department of Health and Human Services shall identify at least one county with a disproportionately high number and incidence of opioid related overdoses and deaths to provide up to \$500,000 to develop a local continuum of substance and behavioral health service coordination within the target county and across the region.
- (E)(D) The Department of Alcohol and Other Drug Abuse Services and the Department of Health and Human Services shall assist the Department of Health and Environmental Control with any funding required to implement necessary programmatic enhancements to the Prescription Monitoring Program. The departments must consider changes to strengthen risk

assessments and patient support tools, as well as the potential integration of Electronic Health Record systems. To the extent possible, the program must be expanded to include the administration of naloxone and other opioid overdose antidotes.

(F)(E) In order to provide comprehensive treatment, from the point of incarceration, to individuals charged with criminal offenses who suffer from any substance use disorder that is treatable with medication, the Department of Alcohol and Other Drug Abuse Services must solicit potential cooperation from law enforcement, the state's solicitors, Magistrate Courts and Circuit Courts, to establish a diversion program in at least one judicial circuit. This program shall provide both behavioral and medical treatment, consultations with peer support specialists, and continued supervision of participants who are released, which may include electronic monitoring.

(G)(F) The Department of Alcohol and Other Drug Abuse Services and the Department of Health and Human Services shall also coordinate with at least one four-year college or university and one two-year technical college with on-campus dormitories to establish pilot programs for Collegiate Recovery Programs to target intervention and the retention of students. These programs must offer academic support in designated spaces that provide for group meetings, clinical support, technology access, and academic advising, to assist students in recovery.

(H) The advisory board shall provide a report on the success of the development of the plan and the implementation of recommendations to the Chairman of the Senate Finance Committee, the Chairman of the House Ways & Means Committee, and the Governor no later than January 31, 2020. The report may also include proposals for amending existing recommendations or the establishment of new policies to combat the opioid epidemic.

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