



House Ways and Means Healthcare Subcommittee FY 2026 Budget Request

Sara Goldsby
Agency Director

January 29, 2025

Agency Attendees

- Sara Goldsby, Director
- Sara Ramirez, Finance & Operations Manager
- Angela Outing, Administrative Manager
- Dare Bailey, General Counsel / Legislative Liaison

Agency Information

- The Department of Alcohol and Other Drug Abuse Services (DAODAS) manages federal and state resources that ensure a continuum of Prevention, Intervention, Treatment, and Recovery programs and services are available and accessible to South Carolinians.
- Compared with other states – both regionally and nationally – South Carolina is more dependent on short-term federal funding to support public substance use services. Our state spends less per capita on substance use disorders.
- Recurring state investments will elevate South Carolina closer to the U.S. average and South Atlantic Region average of financing for addiction services.



**Priorities for South Carolina's
Publicly Funded Addiction Services**

2024-2028



**Accessibility of Appropriate Levels
of Outpatient and Inpatient Care**



Community-Based Prevention

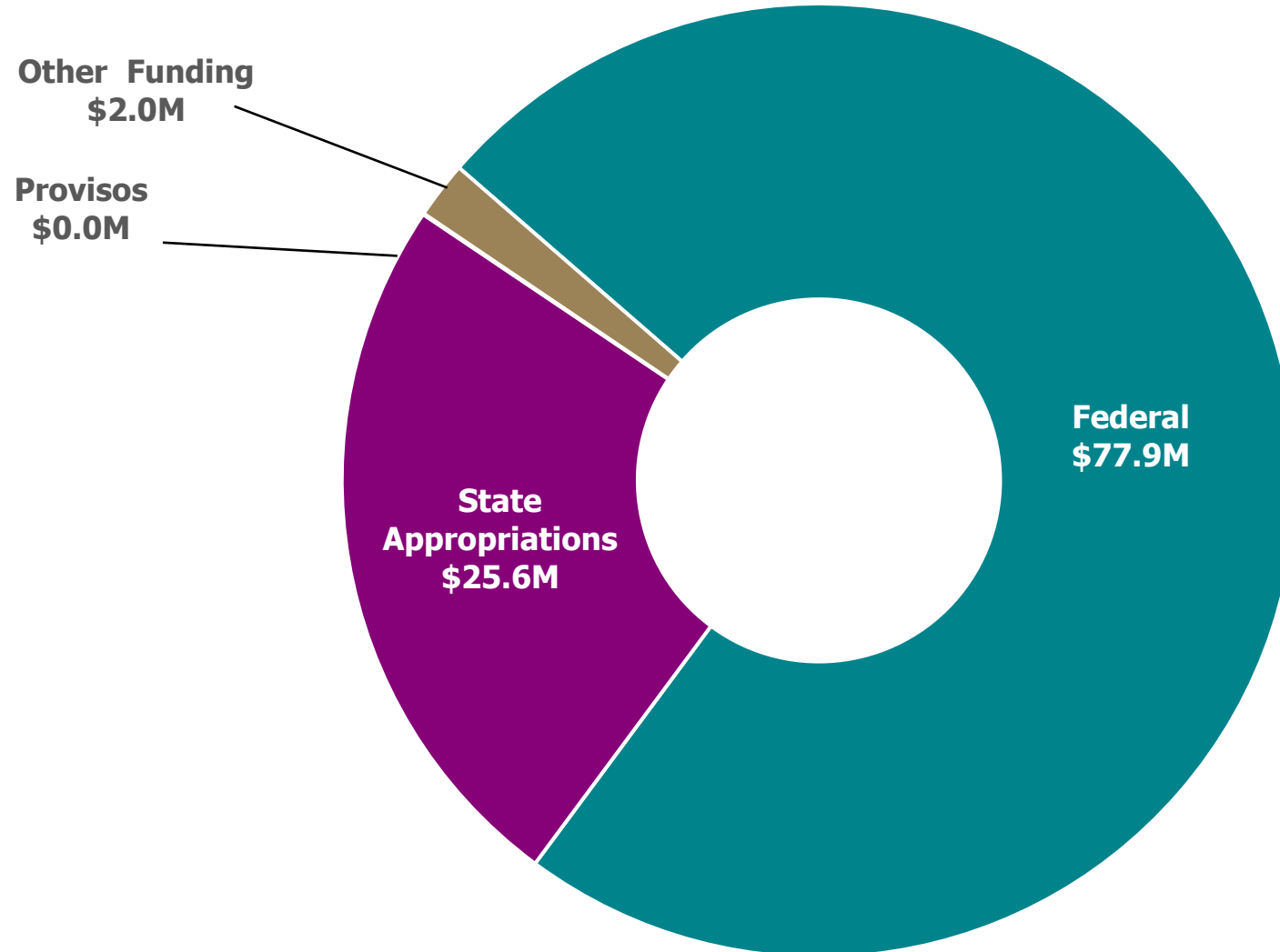


**Targeted Outreach and
Evidence-Based Intervention**

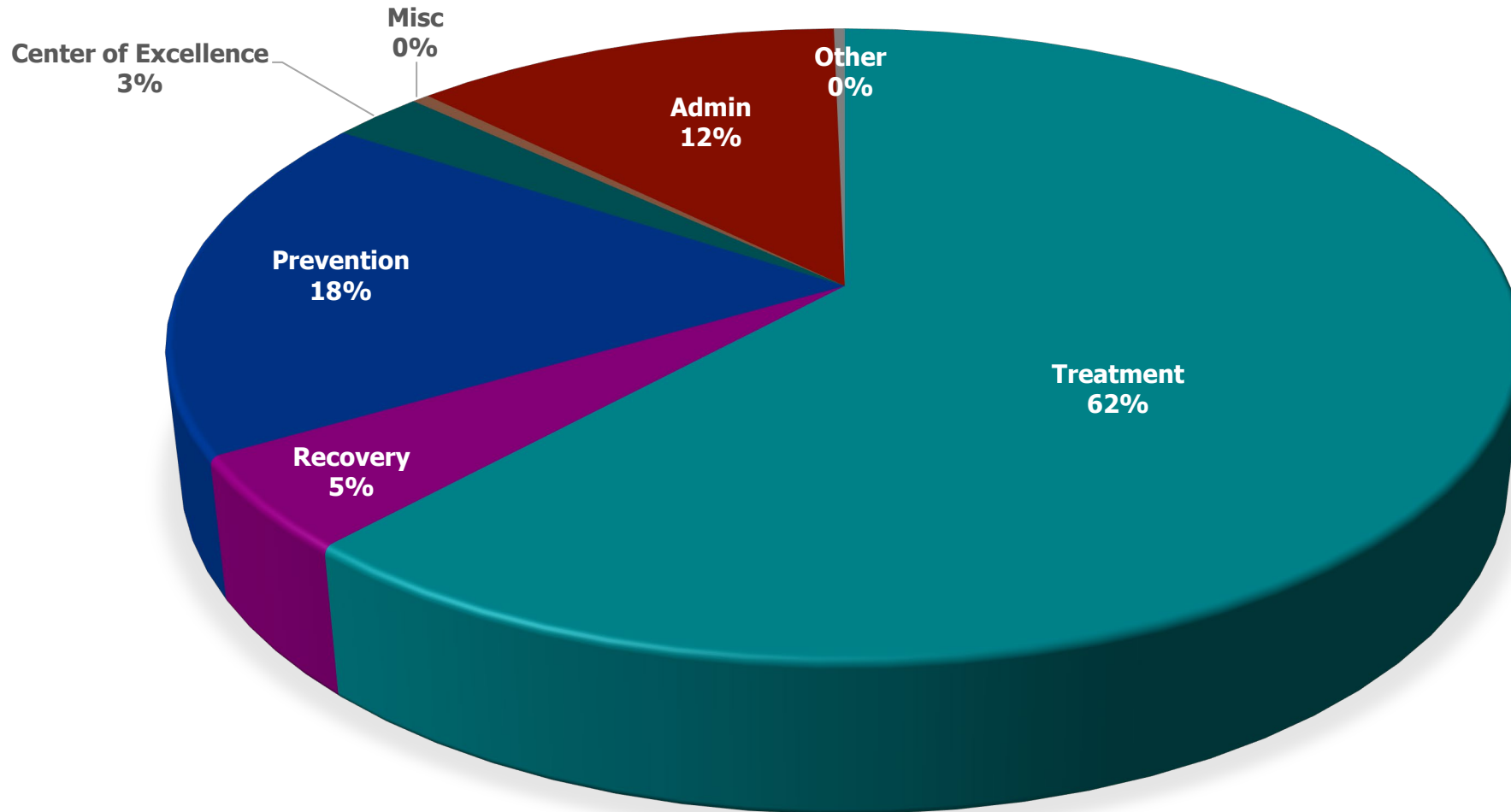


Recovery Support Programs

FY 2025 Sources of Funds



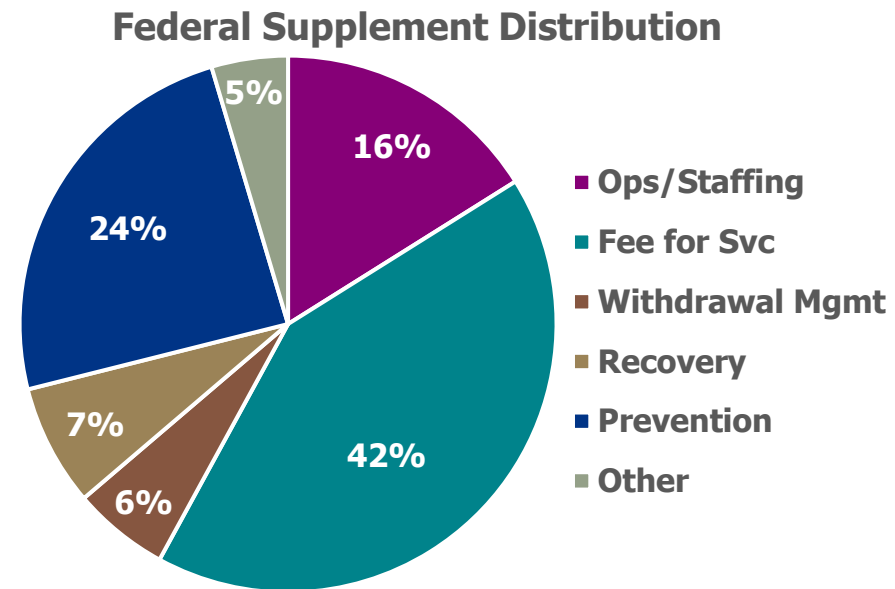
FY 2025 Budget Distribution



FY25 Budget	
Treatment	\$67.9M
Recovery	\$5.2M
Prevention	\$19.6M
COE	\$2.9M
Misc	\$0.5M
Admin	\$13.4M
Other	\$0.3M
Total	\$109.9M

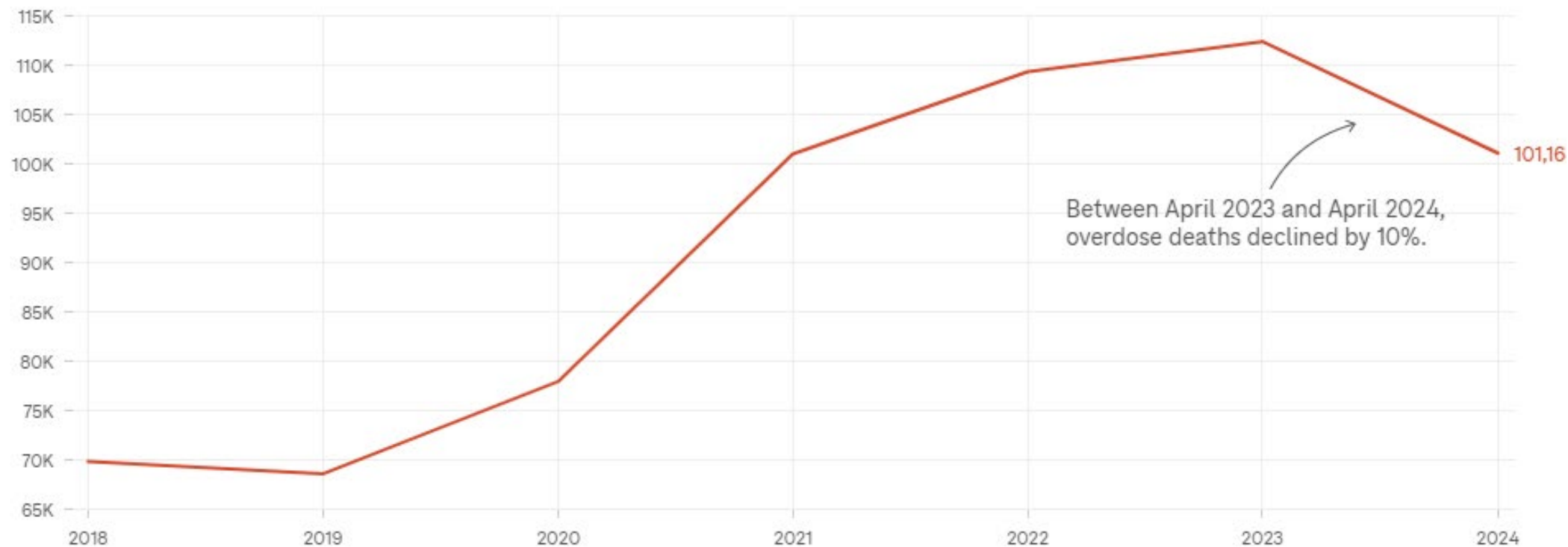
Federal Supplements: Fiscal Cliff

- **Federal grant supplements added over \$42M to DAODAS' budget between FY 2021 and FY 2025.**
- Ensured that public service provider organizations and programs maintained operations and retained staff.
 - Allowed stabilization of workforce in a competing field.
- Supported enhanced fee-for-service rate payment that matched DHHS' increase.
- Essential to ensuring public access to addiction services.
- Funds will be entirely depleted by the end of FY 2025, and service provider organizations will face budget cuts, resulting in reduced service access.



U.S. overdose deaths fell for the first time since 2020

Deaths for the 12 months ending in April of each year

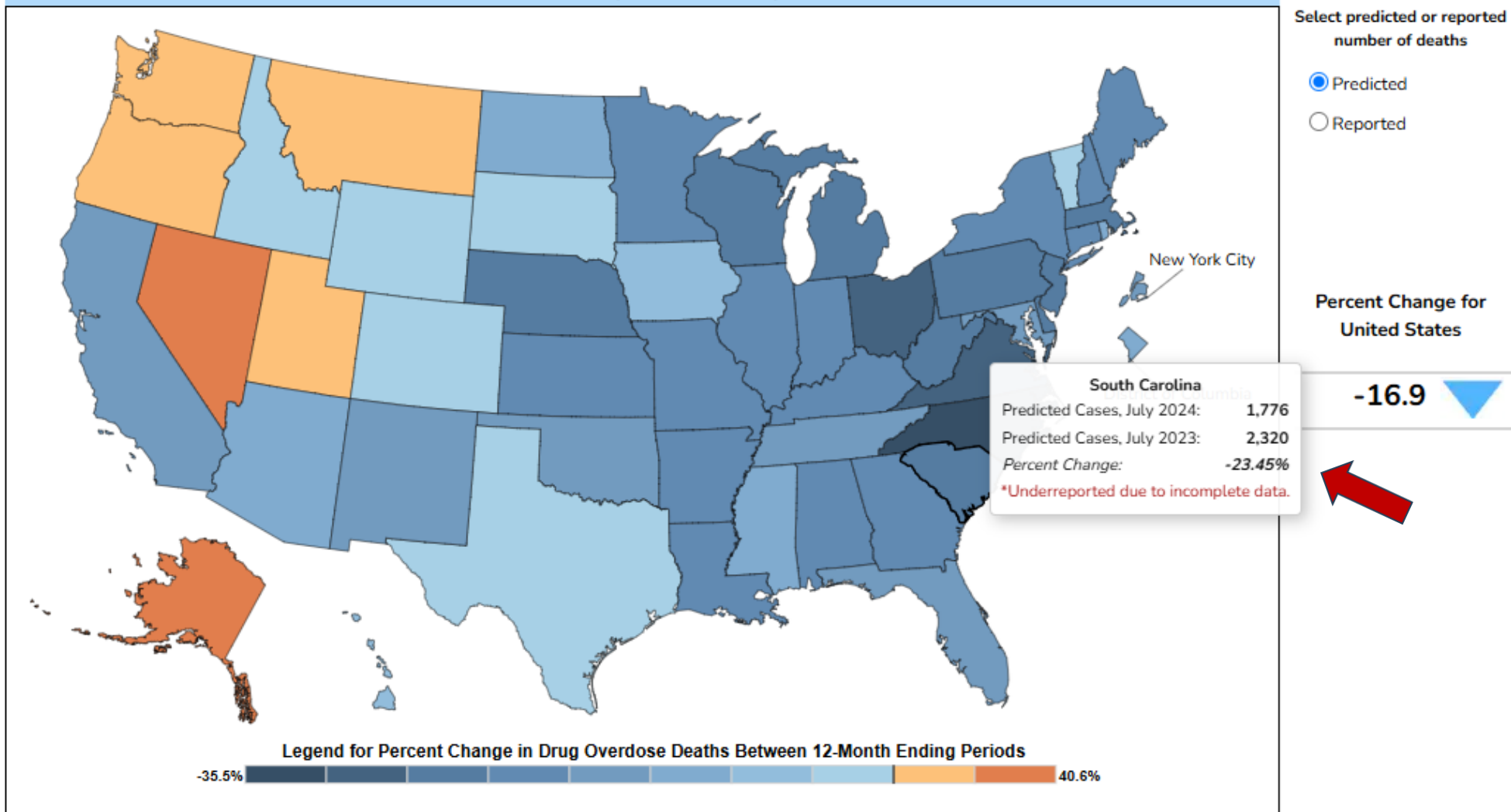


Notes

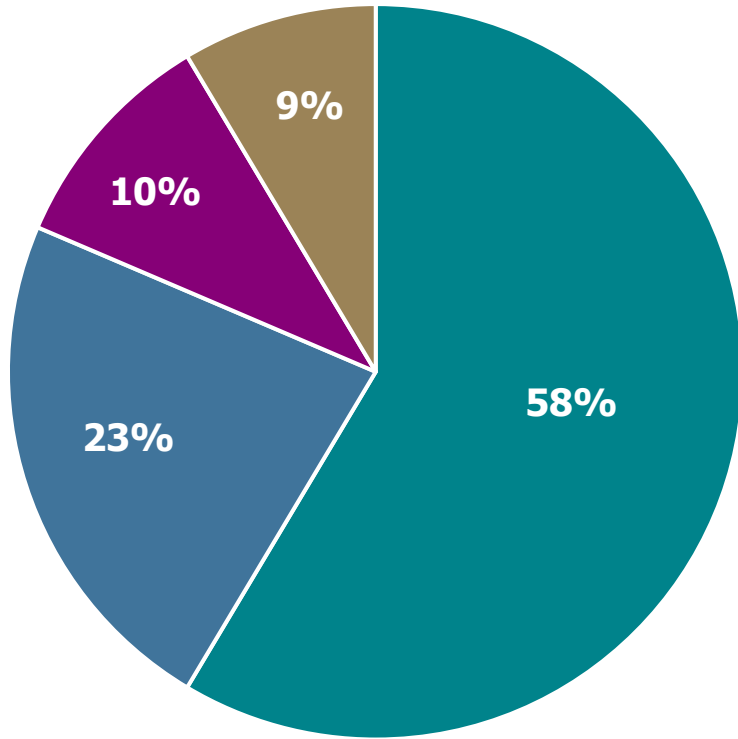
Numbers are predicted provisional overdose deaths in the 12 months ending in April of the given year. Deaths are classified by the reporting jurisdiction where the death occurred.

Source: CDC

Figure 1b. Percent Change in Predicted 12 Month-ending Count of Drug Overdose Deaths, by Jurisdiction: July 2023 to July 2024



FY 2026 Budget Request



■ Treatment ■ Recovery ■ Prevention ■ Other

Category	Purpose	Amount
Treatment	Formula Grants & Direct Treatment Services	\$9,070,000 (Recurring)
	Residential Treatment and Withdrawal Management Access	\$3,845,000 (Recurring)
Recovery	Recovery Community Organizations	\$2,000,000 (Recurring)
Prevention	Prevention Services Expansion	\$1,275,000 (Recurring)
Other	Problem Gambling	\$100,000
Total		\$16,290,000

1. Formula Grants & Direct Treatment Services \$9,070,000 Recurring

Formula Grants
\$5,400,000

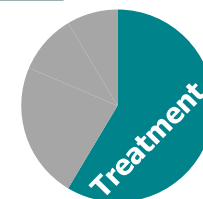
- County alcohol and drug authorities
- Clinical service provider retention and organization operability
- Ensures public access

Fee-for-Service
\$3,470,000

- Fee-for-service payment for clinical & medical addiction care
- Aligns with DHHS' increased Medicaid reimbursement rates
- Ensures safety-net care

Transportation
\$200,000

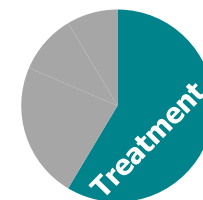
- Reimbursement for transportation costs
- Critical in rural areas



2. Residential Treatment & Withdrawal Management Access \$3,845,000 Recurring

**Residential
Treatment &
Withdrawal
Management
\$3,845,000**

- Fully staffing safety-net inpatient units
- Ensures existing inpatient and withdrawal management services operate at full capacity
- 40 withdrawal management, 63 residential, and 16 transitional beds
- Guarantees bed accessibility for patients regardless of ability to pay



3. Sustaining Recovery Community Organizations & Peer Outreach \$2,000,000 Recurring

**Recovery
Community
Organizations
\$2,000,000**

- Competitive 3-year subgrants
- Building sustainability of Recovery Community Organizations through longer-term funding
- Ensuring peer services and community outreach with hospitals, law enforcement, and schools

**embrace
recovery** SC.com

Recovery

4. Prevention Services Enhancement \$1,275,000 Recurring

**Prevention
Specialists
\$465,000**

- Supports each county currently without dedicated full-time Prevention Specialists
- Nine additional Prevention Specialists total
- Ensures county-specific coalition building & community-based prevention strategies

Dillon, Marion, Marlboro (Currently 1.5 FTEs)

Abbeville, Edgefield, Greenwood, McCormick (Currently 2.5 FTEs)

Chesterfield, Kershaw, Lee (Currently 2 FTEs)

Allendale, Hampton, Jasper (Currently 1.5 FTEs)

Florence, Williamsburg (Currently 1.5 FTEs)

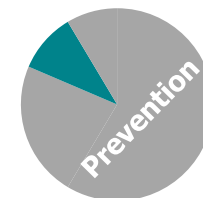
Bamberg, Calhoun, Orangeburg (Currently 2 FTEs)

Newberry, Saluda (Currently 1.25 FTEs)

Anderson, Oconee (Currently 1.75 FTEs)

**Formula Grants
\$810,000**

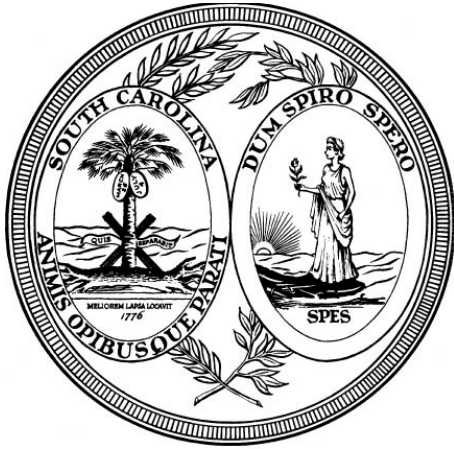
- Enhancing formula-based grants to ALL counties for primary prevention service materials such as school-based curriculums, educational material for community events, infographic/data visualization, and workforce development
- Each county currently receives \$1,833 in State funds for primary prevention services.



Unclaimed Prize Money for Compulsive Gambling

**Problem
Gambling
Services
\$100,000**

- The South Carolina Education Lottery Act directs that a portion of unclaimed prize money – to be determined through the annual appropriations process – be appropriated to DAODAS for the prevention and treatment of compulsive gambling and educational programs related to gambling disorders.



South Carolina

DAODAS

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