



South Carolina
Department of Disabilities
and Special Needs

South Carolina Department of Disabilities and Special Needs (DDSN)

House Ways and Means Committee
Healthcare Subcommittee
FY 2025-2026 Budget Request

Constance Holloway
State Director

January 29, 2025

DDSN Agency Attendees

Constance Holloway

State Director

Courtney Crosby

Chief of Staff

Mary Long

Interim Chief Financial Officer

Bruce Busbee

Budget Director

Who is eligible?

South Carolinians who are determined to have one of the following:

- Intellectual Disability (“ID”)
- Related Disability (i.e., a disability related to an Intellectual Disability) (“RD”)
- High-Risk Infant
- Autism Spectrum Disorder (“ASD”)
- Head Injury¹
- Spinal Cord Injury¹
- Similar Disability (i.e., a disability similar to a head [traumatic brain] or spinal cord injury)¹

¹ Head Injury, Spinal Cord Injury and Similar Disability (“HASCI”)

38,923 South Carolinians were DDSN-eligible as of Sept 30, 2024

How are people supported?

DDSN-eligible people are supported via:

- At-home through Medicaid HCBS¹ Waivers (8416);
- With Residential Services through Medicaid HCBS Waivers (3,790)²;
- With State-funded Residential Services (226)
- In provider-operated Medicaid-funded ICFs/IID³ (446);
- In DDSN-operated Regional Centers which are Medicaid-funded ICFs/IID (535);
- With Medicaid-funded Targeted Case Management (1,367)
- With State-funded Case Management (478)
- At-home with State-funded Community Services (141);
- With State-funded Individual and Family Support (4,031); and
- At-home with Early Intervention Services for children ages 3-6 (4,398)

¹HCBS = Home and Community Based Services

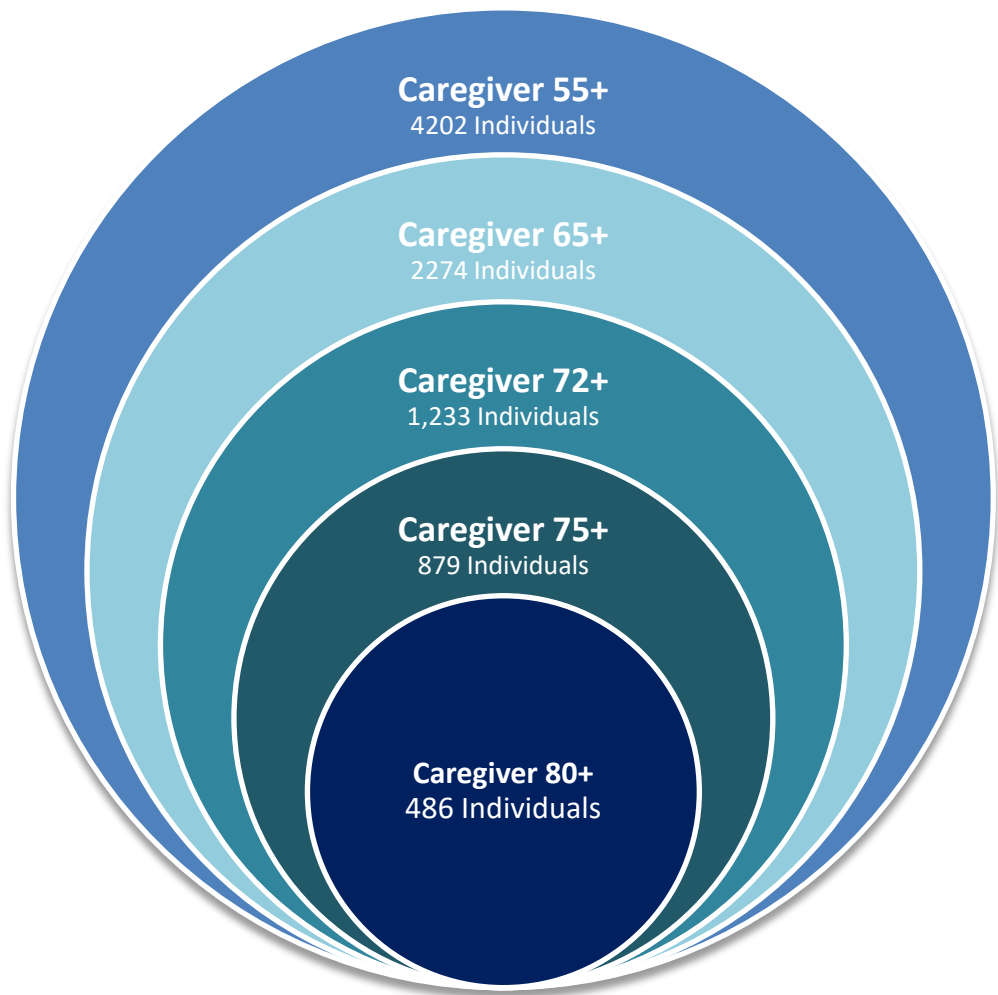
²State-funding is provided when lapses in Medicaid coverage occur.

³ICFs/IID = Intermediate Care Facilities for Individuals with Intellectual Disabilities

Approximately 23,000 DDSN-eligible people receive at least one (1) service each month

Overview of Natural Supports

DDSN-eligible people being supported by aging caregivers, Sept 2024.



Need for Residential Services - Policy

Only those who are DDSN-eligible and determined by DDSN to be experiencing circumstances that jeopardize their health and safety are determined to need Residential Services.

Circumstances that jeopardize health and safety are defined as:

- Life-threatening situations that require immediate action
- Situations that present imminent risk of jeopardizing the person's health, safety, and welfare

Examples of jeopardizing circumstances include:

- Homelessness
- Victim of abuse/neglect by caregiver
- Self injurious or poses significant threat of injury to self or others
- Judicially admitted
- Death of caregiver
- Caregiver is 80+ years of age with diminished ability to provide care

Waitlist for Residential Services

286

Number of people determined to need residential services as of September 30, 2024.

10.6
months

Average length of wait before securing residential services

108

Number of people who have been waiting more than 12 months for residential services

24

Number of people being supported in institutional respite at one of DDSNs regional centers while awaiting long term placement

People Waiting for Residential Services

Of the 286 people determined to need Residential Services, the following applies:

Gender

- 70% Male
- 30% Female

Eligibility

- 33% - ASD
- 8% - HASCI
- 59% - ID/RD

Age in Years

- 5% - ≤ 18
- 43% - 19-29
- 47% - 30-59
- 5% - ≥ 60

Co-occurring Mental Health Diagnosis (Dual Diagnosis)

- 80% - With Dual Diagnosis
- 20% - Without Dual Diagnosis

Summary of FY 2025 – 2026 Budget Request

Priority	Description of Agency Need	State	Earmarked	Total	Type
1	State Funded Residential Services	\$ 9,275,380	\$-	\$ 9,275,380	Recurring
2	Non-Recurring Capital Funds to stand up additional Residential Services	\$ 17,500,000	\$-	\$ 17,500,000	Non-Recurring
3	South Carolina Genomic Medicine Initiative	\$500,000	\$-	\$500,000	Recurring
4	South Carolina Genomic Medicine Initiative	\$1,000,000	\$-	\$1,000,000	Non-Recurring
	TOTAL	\$ 28,275,380	\$ -	\$ 28,275,380	

Priority #1– State Funded Residential Services

\$9.3 million – Recurring General Funds

This decision package is designed to support forty-eight (48) South Carolinians for whom traditional Medicaid reimbursable supports are not appropriate or are not available. These people, including youth, present to DDSN in need of out-of-home services following hospitalization, incarceration, or psychiatric treatment and have needs that, due to severity, cannot be supported in currently available residential options. These services are necessary to ensure that people are safely and appropriately supported.

Method of Calculation: \$529 per day x 365 days per year x 48 individuals = \$9,275,380

Impact if not received: DDSN-eligible South Carolinians will be required to shelter in institutions or places through which appropriate supports cannot be delivered.

Priority #2– Capital Funds to Support New Residential Options

\$17.5 million – Non-Recurring General Funds

This decision package is designed to support the creation additional Residential Services options for one hundred (100) DDSN-eligible people awaiting Residential Services. This non-recurring funding will allow DDSN to support qualified providers to acquire and open settings which are appropriate. After acquisition and set up, recurring maintenance will be the provider's responsibility.

As noted in the April 2024 "*SC Public Health Delivery and Organization Review*" conducted by Boston Consultant Group, SC spends 65% less in state funding per capita for individuals with developmental disabilities as compared to the average of other southern states (pg. 41). Additionally, as noted in the same report (pg. 36), South Carolina has 54 pp fewer group home beds than the U.S. average.

As of August 30, 2024, the number of people awaiting Residential Services is **310**.

Method of Calculation: The current average cost per person to create a residential support option is \$175K.

$$\$175,000 \times 100 = \$17,500,000$$

Impact if not received: The number of DDSN-eligible South Carolinians experiencing circumstances that jeopardize their health and safety will continue to grow.

Priority #3 – South Carolina Genomic Medicine Initiative

\$500,000–Recurring General Funds

This decision package is designed to support the Greenwood Genetics Center (GGC) as they expand and sustain genomic testing and technologies to adults and medical conditions that are currently underfunded and often under-utilized. This initiative combines clinical care, a “multiomics” technological approach and big data/machine learning to create a powerful and unique resource serving patients, healthcare providers, and state agencies. This initiative is being pursued to significantly increase the diagnostic yield for individuals with intellectual disabilities and autism, with the goal of providing information necessary to provide personalized and precise medical treatment and management for patients with disabilities and autism. In addition, the data accumulated with this initiative provides precise genomic information that help develop and guide personalized public health policies.

- Partners include the private sector, such as Duke Endowment, a major university, and individual donors

Priority #4 – South Carolina Genomic Medicine Initiative

\$ 1 million – Non-Recurring General Funds

This decision package is designed to continue support to the Greenwood Genetics Center (GGC). This is a research and development investment to improve exiting specialized genetic service levels. The number of infants and children requiring more extensive and expensive services will be reduced if prompt curative treatment is received. The use of genomic technologies will optimize primary prevention and treatment options for individuals with intellectual disabilities and their families.

- The request of \$1,000,000 of new state funds for FY26. These funds will be used to continue support for ongoing research and development of specialized genetic service levels.
- Partners include the private sector, such as Duke Endowment, a major university, and individual donors
- It is the intention of the GGC to work with SCDHHS to pursue an administrative Medicaid match for this project to demonstrate the impact and value to the Centers for Medicare and Medicaid Services (CMS)

Provisos

The Department of Disabilities and Special Needs is not requesting any new provisos for FY 2026. At this time, we would like to keep the existing provisos as currently written.

Questions, Comments, and Follow-Up

