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**VERSIONS OF THIS BILL**

[12/11/2024](https://www.scstatehouse.gov/sess126_2025-2026/prever/2_20241211.docx)

A bill

TO AMEND THE SOUTH CAROLINA CODE OF LAWS BY ADDING chapter 12 to title 44 SO AS TO ESTABLISH THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES, TO PROVIDE FOR ITS POWERS, DUTIES, AND AUTHORITY, TO PROVIDE THAT THE DEPARTMENT IS COMPRISED OF THE OFFICE OF INTELLECTUAL DISABILITIES, THE OFFICE OF MENTAL HEALTH, AND THE OFFICE OF SUBSTANCE ABUSE SERVICES; BY AMENDING SECTION 1‑30‑10, RELATING TO DEPARTMENTS OF STATE GOVERNMENT, SO AS TO ADD THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES, AND TO REMOVE THE DEPARTMENT OF ALCOHOL AND OTHER DRUG ABUSE SERVICES, THE DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS, AND THE DEPARTMENT OF MENTAL HEALTH; BY AMENDING SECTION 8‑17‑370, RELATING TO EXEMPTIONS FROM THE STATE EMPLOYEE GRIEVANCE PROCEDURE SO AS TO PROVIDE THAT DIRECTOR OF THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES, ALL EMPLOYEES WHO REPORT DIRECTLY TO THE DIRECTOR, AND THE DIRECTOR FOR EACH OF THE EXECUTIVE OFFICE’S COMPONENT OFFICES ARE NOT SUBJECT TO THE STATE EMPLOYEE GRIEVANCE PROCEDURE; BY AMENDING SECTION 44‑20‑30, RELATING TO DEFINITIONS FOR THE INTELLECTUAL DISABILITY, RELATED DISABILITIES, HEAD INJURIES, AND SPINAL CORD INJURIES ACT, SO AS TO CONFORM THE DEFINITIONS TO THE CREATION OF THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES, AND TO REDESIGNATE THE DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS AS THE OFFICE OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES AS A COMPONENT OF THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES; BY AMENDING SECTION 44‑20‑210, RELATING TO CREATION OF the SOUTH CAROLINA COMMISSION ON DISABILITIES AND SPECIAL NEEDS, MEMBERSHIp, TERMS OF OFFICE, REMOVAL, and VACANCIES, SO AS TO ELIMINATE THE COMMISSION AND CONFORM TO THE CREATION OF THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES; BY AMENDING SECTION 44‑20‑220, RELATING TO DUTIES OF COMMISSION, SO AS TO TRANSFER THE DUTIES OF THE COMMISSION TO THE HEAD OF THE OFFICE OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES AND THE DIRECTOR OF THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES; BY AMENDING SECTION 44‑20‑230, RELATING TO POWERS AND DUTIES OF the DIRECTOR, SO AS TO CONFORM TO THE CREATION OF THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES; BY AMENDING SECTION 44‑20‑240, RELATING TO the CREATION OF the DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS, SO AS TO ESTABLISH THE SCOPE OF AUTHORITY FOR THE OFFICE OF INTELLECTUAL AND DEVELOPMENTAL DISABILITIES; BY AMENDING SECTION 44‑20‑255, RELATING TO OWNERSHIP OF PROPERTY CONFIRMED IN the DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS, SO AS TO TRANSFER OWNERSHIP TO THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES; BY AMENDING SECTION 44‑49‑10, RELATING TO the establishment of the DEPARTMENT OF ALCOHOL AND OTHER DRUG ABUSE SERVICES, SO AS TO ELIMINATE THE DEPARTMENT AND CONFORM TO THE CREATION OF THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES AND THE OFFICE OF SUBSTANCE ABUSE SERVICES; BY AMENDING SECTION 44‑49‑20, RELATING TO the DIRECTOR OF the DEPARTMENT, SO AS TO PROVIDE FOR THE OFFICE OF SUBSTANCE ABUSE SERVICES; BY AMENDING SECTION 44‑9‑10, RELATING TO the CREATION OF DEPARTMENT OF MENTAL HEALTH, SO AS TO CONFORM TO THE CREATION OF THE DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES AND CREATE THE OFFICE OF MENTAL HEALTH, PROVIDE FOR THE HEAD OF THE OFFICE, AND PROVIDE QUALIFICATIONS FOR THE HEAD OF THE OFFICE; BY AMENDING SECTION 44‑9‑20, RELATING TO TRANSFER OF POWERS, DUTIES, RECORDS, AND FILES FROM FORMER MENTAL HEALTH COMMISSION, SO AS TO FURTHER TRANSFER THOSE POWERS, DUTIES, RECORDS, AND FILES TO THE OFFICE OF MENTAL HEALTH; BY AMENDING SECTION 44‑9‑30, RELATING TO the CREATION OF SOUTH the CAROLINA MENTAL HEALTH COMMISSION, SO AS TO PROVIDE FOR THE POWERS OF THE DIRECTOR OF THE OFFICE; BY AMENDING SECTION 1‑3‑420, RELATING TO PROCLAMATION OF EMERGENCY BY GOVERNOR, SO AS TO ESTABLISH A PROCESS THROUGH WHICH EMERGENCY PROCLAMATIONS MAY BE LIFTED; BY AMENDING SECTION 25‑1‑440, RELATING TO ADDITIONAL POWERS AND DUTIES OF the GOVERNOR DURING a DECLARED EMERGENCY, SO AS TO PROVIDE FOR A PROCESS THROUGH WHICH DECLARATIONS OF EMERGENCY MAY BE LIFTED; BY AMENDING SECTION 40‑43‑86, RELATING TO FACILITY REQUIREMENTS FOR PHARMACIES, SO AS TO PROVIDE FOR THE CIRCUMSTANCES in which A PHARMACIST MAY REFUSE TO FILL OR REFILL A PRESCRIPTION; BY AMENDING SECTION 44‑1‑100, RELATING TO ASSISTANCE FROM PEACE AND HEALTH OFFICERS IN A STATE OF EMERGENCY, SO AS TO GIVE SHERIFFS AND POLICE OFFICERS THE DISCRETION AS TO WHETHER TO AID AND ASSIST THE DIRECTOR OF THE DEPARTMENT OF PUBLIC HEALTH IN CARRYING OUT HIS ORDERS DURING A STATE OF PUBLIC HEALTH EMERGENCY; BY AMENDING SECTION 44‑4‑130, RELATING TO DEFINITIONS CONCERNING EMERGENCY HEALTH POWERS, SO AS TO ADD NECESSARY DEFINITIONS AND AMEND CERTAIN DEFINITIONS TO REFLECT CHANGES IN AGENCY NAMES; BY AMENDING SECTION 44‑4‑510, RELATING TO PHYSICAL EXAMINATIONS OR TESTS, SO AS TO PROVIDE THAT THE DEPARTMENT MAY ISOLATE OR QUARANTINE, PURSUANT TO THE SECTIONS OF THIS ACT AND ITS EXISTING POWERS UNDER SECTION 44‑1‑140, ANY SYMPTOMATIC PERSON OR PERSON WHO HAS BEEN EXPOSED TO THE CONTAGIOUS DISEASE FOR WHICH THE PUBLIC HEALTH EMERGENCY HAS BEEN DECLARED WHOSE REFUSAL OF PHYSICAL EXAMINATION OR TESTING RESULTS IN UNCERTAINTY REGARDING WHETHER HE IS INFECTED WITH THE CONTAGIOUS DISEASE; BY AMENDING SECTION 44‑4‑520, RELATING TO VACCINATIONS AND TREATMENT, SO AS TO PROVIDE THAT THE DEPARTMENT OF PUBLIC HEALTH MAY VACCINATE OR TREAT PEOPLE TO PREVENT THE SPREAD OF CONTAGIOUS DISEASES, TO REQUIRE INFORMED CONSENT UNDER CERTAIN CIRCUMSTANCES, AND TO DEFINE INFORMED CONSENT; BY AMENDING SECTION 44‑4‑530, RELATING TO ISOLATION AND QUARANTINE OF INDIVIDUALS OR GROUPS, SO AS TO provide that, DURING A PUBLIC HEALTH EMERGENCY, THE DEPARTMENT OF PUBLIC HEALTH MAY ISOLATE OR QUARANTINE AN INDIVIDUAL OR GROUPS OF INDIVIDUALS WHO HAVE BEEN DIAGNOSED WITH OR EXPOSED TO THE CONTAGIOUS DISEASE FOR WHICH THE PUBLIC HEALTH EMERGENCY WAS DECLARED; BY AMENDING SECTION 44‑4‑540, RELATING TO ISOLATION AND QUARANTINE PROCEDURES, SO AS TO REQUIRE A HARD DEADLINE FOR A PETITION FOR AN ORDER AUTHORIZING THE ISOLATION OR QUARANTINE OF AN INDIVIDUAL OR GROUP OF INDIVIDUALS; BY AMENDING SECTION 44‑4‑570, RELATING TO EMERGENCY POWERS REGARDING LICENSING OF HEALTH PERSONNEL, SO AS TO REMOVE the REQUIREMENT THAT STATE HEALTH CARE PROVIDERS MAY BE COMPELLED TO ASSIST IN THE PERFORMANCE OF VACCINATION, TREATMENT, EXAMINATION OR TESTING AS A CONDITION OF LICENSURE; AND BY REPEALING SECTION 44‑9‑40 RELATING TO STATE DIRECTOR OF MENTAL HEALTH, APPOINTMENT AND REMOVAL, POWERS AND DUTIES, and QUALIFICATIONS.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Title 44 of the S.C. Code is amended by adding:

CHAPTER 12

Department of Behavioral Health and Developmental Disabilities

 Section 44‑12‑10. For the purposes of this chapter:

 (1) “Director” means the head of the Department of Behavioral Health and Developmental Disabilities.

 (2) “Department” means the Department of Behavioral Health and Developmental Disabilities.

 (3) “Office” means any one or more of the component offices that comprise the Department of Behavioral Health and Developmental Disabilities.

 Section 44‑12‑20. There is created within the executive branch of the State government an agency to be known as the Department of Behavioral Health and Developmental Disabilities. The department shall be organized as provided in this chapter and shall have the duties, functions, and powers provided for in this chapter and other applicable provisions of law.

 Section 44‑12‑30. The department shall be headed by a director who shall be appointed by the Governor with the advice and consent of the Senate. The executive director may be removed from office as provided in Section 1‑3‑240(B).

 Section 44‑12‑40. In performing his duties as authorized by this chapter, the director:

 (1) shall develop and execute a cohesive and comprehensive plan for services provided by the offices housed within the department. The plan should ensure a maximum level of coordination among the component offices and should be continually updated to recognize operational efficiencies and maximize resource utilization. The plan should address how to ensure that services and support for South Carolinians with disabilities are, to the greatest extent possible, provided in the community instead of in an institutional setting in accordance with the requirements of the Americans with Disabilities Act and the U.S. Supreme Court’s decision in Olmstead v. L.C., 527 U.S. 581. The Secretary of Health and Policy shall appoint a Director of Community Living Integration who will be responsible for providing oversight in the assessment of the current state of community integration in South Carolina and in the creation of the community integration goals and objectives to be included in the State Health Plan. The Director of Community Living will report to the Secretary of Health and Policy and shall select an Americans with Disabilities Coordinator. The director shall establish and appoint members to a health planning advisory committee to provide advice in the development of the plan. Members of the advisory committee should include health care providers, representatives from the disabled community, disability advocacy agencies, consumers, payers, and public health professionals. When developing the community integration goals and objectives, the committee must seek input from people with disabilities of different types and varying levels of severity, family members of people with disabilities, and people currently providing services to the disabled community. The committee must identify objectives for the successful implementation of the community integration program. Members of the advisory committee are allowed the usual mileage and subsistence as provided for members of boards, committees, and commissions;

 (2) shall develop the budget for the department, including the component offices, to reflect the priorities of its comprehensive service plan;

 (3) shall review and approve or disapprove all regulations promulgated by the component offices prior to their submission to the General Assembly;

 (4) shall, subject to applicable federal law, require data sharing to the fullest extent possible among the component offices and other state agencies;

 (5) shall, to the extent practicable, consolidate administrative services among the component offices that include, but are not limited to:

 (a) financial and accounting support, such as accounts payable and receivable processing, procurement processing, journal entry processing, and financial reporting assistance;

 (b) human resources administrative support, such as transaction processing and reporting, payroll processing, and human resources training;

 (c) budget support, such as budget transaction processing and budget reporting assistance; and

 (d) information technology;

 (6) shall, with regard to information technology, ensure that the department and the component offices comply with all plans, policies, and directives of the Department of Administration;

 (7) may employ such persons as he determines are necessary to carry out the department’s duties, functions, and powers; and

 (8) may enter into contracts with public agencies, institutions of higher education, and private organizations or individuals that the executive director determines would be beneficial to carrying out the department’s duties, functions, and powers.

 Section 44‑12‑50. (A) The Department of Behavioral Health and Developmental Disabilities shall consist of the following component offices:

 (1) the Office of Intellectual and Developmental Disabilities;

 (2) the Office of Mental Health; and

 (3) the Office of Substance Abuse Services

 (B)(1) Each component office shall be headed by an office director who shall be appointed by the department’s director. Office directors shall serve at the pleasure of the departmental director.

 (2) The director may, to the extent authorized through the annual appropriations act or relevant permanent law, organize the administration of the department, including the assignment of personnel to the offices and among its component departments, as is necessary to carry out the department’s duties.

 Section 44‑12‑60. The component offices shall carry out their duties, functions, and powers as provided in their respective enabling statutes and as otherwise provided by laws subject to the management decisions, policy development, and standards established of and by the director as provided in this chapter.

SECTION 2. Section 1‑30‑10(A) of the S.C. Code is amended to read:

 (A) There are hereby created, within the executive branch of the state government, the following departments:

 1. Department of Administration

 2. Department of Agriculture

 3. Department of Alcohol and Other Drug Abuse ServicesDepartment of Behavioral Health and Developmental Disabilities

 4. Department of Commerce

 5. Department of Corrections

 6. Department of Disabilities and Special Needs

 7.6. Department of Education

 8.7 Department of Public Health

 9.8 Department of Health and Human Services

 10.9 Department of Insurance

 11.10 Department of Juvenile Justice

 12.11. Department of Labor, Licensing and Regulation

 13. Department of Mental Health

 14.12. Department of Motor Vehicles

 15.13. Department of Natural Resources

 16.14. Department of Parks, Recreation and Tourism

 17.15. Department of Probation, Parole and Pardon Services

 18.16. Department of Public Safety

 19.17. Department of Revenue

 20.18. Department of Social Services

 21.19 Department of Transportation

 22.20. Department of Employment and Workforce

 23.21. Department on Aging

 24.22. Department of Veterans' Affairs.

 25.23. Department of Environmental Services

SECTION 3. Section 8‑17‑370 of the S.C. Code is amended by adding:

 (21) The Director of the Department of Behavioral Health and Developmental Disabilities, all employees who report directly to the director, and the director for each of the executive office’s component offices.

SECTION 4. Section 44‑20‑30 of the S.C. Code is amended to read:

 Section 44‑20‑30. As used in this chapter:

 (1) “Applicant” means a person who is believed to have intellectual disability, one or more related disabilities, one or more head injuries, one or more spinal cord injuries, or an infant at high risk of a developmental disability who has applied for services of from the South Carolina Department of Disabilities and Special Needsoffice.

 (2) “Client” is a person who is determined by the Department of Disabilities and Special Needsoffice to have intellectual disability, a related disability, head injury, or spinal cord injury and is receiving services or is an infant at risk of having a developmental disability and is receiving services.

 (3) “Commission” means the South Carolina Commission on Disabilities and Special Needs, the policy‑making and governing body of the Department of Disabilities and Special Needs.

 (4)(3) “County disabilities and special needs boards” means the local public body administering, planning, coordinating, or providing services within a county or combination of counties for persons with intellectual disability, related disabilities, head injuries, or spinal cord injuries and recognized by the department.

 (5)(4) “Day programs” are programs provided to persons with intellectual disability, related disabilities, head injuries, or spinal cord injuries outside of their residences affording development, training, employment, or recreational opportunities as prescribed by the Department of Disabilities and Special Needsoffice.

 (6)(5) “Department” “Office” means the South Carolina Department of Disabilities and Special NeedsOffice of Intellectual and Developmental Disabilities, a component of the Department of Behavioral Health and Developmental Disabilities.

 (7)(6) “Director” means the head of the South Carolina Director of the Department of Disabilities and Special NeedsOffice of Intellectual and Developmental Disabilities, the chief executive director appointed by the commissionDirector of the Department of Behavioral Health and Developmental Disabilities.

 (8)(7) “Disabilities and special needs services” are activities designed to achieve the results specified in an individual client's plan.

 (9)(8) “High risk infant” means a child less than thirty‑six months of age whose genetic, medical, or environmental history is predictive of a substantially greater risk for a developmental disability than that for the general population.

 (10)(9) “Least restrictive environment” means the surrounding circumstances that provide as little intrusion and disruption from the normal pattern of living as possible.

 (11)(10) “Improvements” means the construction, reconstruction of buildings, and other permanent improvements for regional centers and other programs provided by the department directly or through contract with county boards of disabilities and special needs, including equipment and the cost of acquiring and improving lands for equipment.

 (12)(11) “Intellectual disability” means significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period.

 (13)(12) “Obligations” means the obligations in the form of notes or bonds or contractual agreements issued or entered into by the commission pursuant to the authorization of this chapter and of Act 1377 of 1968 to provide funds with which to repay the proceeds of capital improvement bonds allocated by the State Fiscal Accountability Authority.

 (14)(13) “Regional residential center” is a twenty‑four hourtwenty‑four‑hour residential facility serving a multicounty area and designated by the department.

 (15)(14) “Related disability” is a severe, chronic condition found to be closely related to intellectual disability or to require treatment similar to that required for persons with intellectual disability and must meet the following conditions:

 (a) It it is attributable to cerebral palsy, epilepsy, autism, or any other condition other than mental illness found to be closely related to intellectual disability because this condition results in impairment of general intellectual functioning or adaptive behavior similar to that of persons with intellectual disability and requires treatment or services similar to those required for these persons.;

 (b) It it is manifested before twenty‑two years of age.;

 (c) It it is likely to continue indefinitely.; and

 (d) It it results in substantial functional limitations in three or more of the following areas of major life activity: self‑care, understanding and use of language, learning, mobility, self‑direction, and capacity for independent living.

 (16)(15) “Residential programs” are services providing dwelling places to clients for an extended period of time with assistance for activities of daily living ranging from constant to intermittent supervision as required by the individual client's needs.

 (17)(16) “Revenues” or “its revenues” means revenue derived from paying clients at regional residential centers and community residences but does not include Medicaid, Medicare, or other federal funds received with the stipulation that they be used to provide services to clients.

 (18)(17) “State capital improvement bonds” means bonds issued pursuant to Act 1377 of 1968.

 (19) “Department” shall mean the State Department of Administration as constituted pursuant to Chapter 11, Title 1.

SECTION 5. Section 44‑20‑210 of the S.C. Code is amended to read:

 Section 44‑20‑210. There is created the South Carolina Commission on Disabilities and Special Needs Office of Intellectual and Developmental Disabilities, a component of the Department of Behavioral Health and Developmental Disabilities. The commission consists of seven members. One member must be a resident of each congressional district appointed by the Governor upon the advice and consent of the Senate. They shall serve for four years and until their successors are appointed and qualify. Members of the commission are subject to removal by the Governor pursuant to the provisions of Section 1‑3‑240. A vacancy may be filled by the Governor for the unexpired portion of the term.office shall be headed by a director appointed by Director of the Department of Behavioral Health and Developmental Disabilities pursuant to Section 44‑12‑50(B)(1).

SECTION 6. Section 44‑20‑220 of the S.C. Code is amended to read:

 Section 44‑20‑220. The commission Director of the Department of Behavioral Health and Developmental Disabilities, in consultation with the director, shall determine the policy and promulgate regulations governing the operation of the department and the employment of professional staff and personnel. The members of the commission shall receive subsistence, mileage, and per diem as may be provided by law for members of state boards, committees, and commissions. The commission shall appoint and in its discretion remove a South Carolina Director of Disabilities and Special Needs who is the chief executive officer of the department. Subject to the approval of the Director of the Department of Behavioral Health and Developmental Disabilities, the director The commission may appoint advisory committees it considers necessary to assist in the effective conduct of its the office’s responsibilities. The commission director may educate the public and state and local officials as to the need for the funding, development, and coordination of services for persons with intellectual disability, related disabilities, head injuries, and spinal cord injuries and promote the best interest of persons with intellectual disability, related disabilities, head injuries, and spinal cord injuries. The commission is authorized to promulgate regulations to carry out the provisions of this chapter and other laws related to intellectual disability, related disabilities, head injuries, or spinal cord injuries. In promulgating these regulations, the commission must consult with the advisory committee of the division for which the regulations shall apply.

SECTION 7. Section 44‑20‑230 of the S.C. Code is amended to read:

 Section 44‑20‑230. Subject to the supervision, direction, and control of the Department of Behavioral Health and Developmental Disabilitiescommission, the director shall administer the policies and regulations established by the commissiondepartment’s director. The director may appoint and in his discretionand, in his discretion, remove all other officers and employees of the department office subject to the approval of the commissiondepartment’s director.

SECTION 8. Section 44‑20‑240 of the S.C. Code is amended to read:

 Section 44‑20‑240. There is created the South Carolina Department of Disabilities and Special Needs whichThe office has authority over all of the state's services and programs for the treatment and training of persons with intellectual disability, related disabilities, head injuries, and spinal cord injuries. This authority does not include services delivered by other agencies of the State as prescribed by statute. The department must be comprised of an Intellectual Disability Division, an Autism Division, and a Head and Spinal Cord Injuries Division. The department may be divided into additional divisions as may be determined by the director and approved and named by the commissiondepartment’s director. Responsibility for all autistic services is transferred from the Department of Mental Health to the Department of Disabilities and Special Needs.

SECTION 9. Section 44‑20‑255 of the S.C. Code is amended to read:

 Section 44‑20‑255. (A) Upon execution of the deed as provided in subsection (B) of this section, ownership of the tract of real property in Richland County described in Section 1 of Act 1645 of 1972 is confirmed in the Department of Behavioral Health and Developmental Disabilities, as the successor agency to the South Carolina Department of Disabilities and Special Needs as the successor agency to the South Carolina Department of Mental Retardation.

 (B) The State Department of Administration shall cause to be executed and recorded an appropriate deed conveying the tract to the Department of Behavioral Health and Developmental DisabilitiesSouth Carolina Department of Disabilities and Special Needs.

 (C) Proceeds of a subsequent sale of the tract that is the subject of this section may be retained by the South Carolina Department of Disabilities and Special Needs.Department of Behavioral Health and Developmental Disabilities.

SECTION 10. Section 44‑49‑10 of the S.C. Code is amended to read:

 Section 44‑49‑10. (A) There is established the Department of Alcohol and Other Drug Abuse Office of Substance Use Services. The department office shall be vested with all the functions, powers, and duties, of the Department of Alcohol and Other Drug Abuse Services, the successor to the South Carolina Commission on Alcoholism and the South Carolina Commission on Alcohol and Drug Abuse and shall have full authority for formulating, coordinating and administering the state plans for controlling narcotics and controlled substances and alcohol abuse, subject to the approval of the Director of the Department of Behavioral Health and Developmental Disabilities.

 (B) All functions, powers, and duties of the commissioner of the narcotics and controlled substances section of the State Planning and Grants Division (Division of Administration in the Office of the Governor) are herebythat were transferred to the Department of Alcohol and Other Drug Abuse Services are hereby transferred to the Office of Substance Use Services department, except those powers and duties related to the traffic of narcotics and controlled substances as defined in Section 44‑53‑130 which shall be vested in the State Law Enforcement Division.

 (C) All rules and regulations promulgated by the commissioner of narcotics and controlled substancespredecessor agencies shall remain in effect until changed by the department.

 (D) The department is authorized to establish a block grant mechanism to provide such monies as may be appropriated by the Legislature for this purpose to each of the agencies designated under Section 61‑12‑20(a). The distribution of these monies must be on a per capita basis according to the most recent United States Census. The agencies designated under Section 61‑12‑20(a) must expend any funds received through this mechanism in accordance with the county plans required under Section 61‑12‑20(b).

 (E) Subject to the approval of the Director of the Department of Behavioral Health and Developmental Disabilities, the The department is authorized to develop such rules and regulations not inconsistent with the provisions of this chapter as it may find to be reasonably appropriate for the government of the county plans called for in Section 61‑12‑20(b), and the financial and programmatic accountability of funds provided under this section and all other funds provided by the department to agencies designated under Section 61‑12‑20(a).

SECTION 11. Section 44‑49‑20 of the S.C. Code is amended to read:

 Section 44‑49‑20. The Department of Alcohol and Other Drug Abuse Servicesoffice shall be headed by a director appointed by the Governor, upon the advice and consent of the Senate. The director is subject to removal by the Governor pursuant to the provisions of Section 1‑3‑240Director of the Department of Behavioral Health and Developmental Disabilities pursuant to Section 44‑12‑50(B)(1).

SECTION 12. Section 44‑9‑10 of the S.C. Code is amended to read:

 Section 44‑9‑10. There is hereby created the State DepartmentOffice of Mental Health, a component of the Department of Behavioral Health and Developmental Disabilities. The office which shall have jurisdiction over all of the State's mental hospitals, clinics and centers, joint State and community sponsored mental health clinics and centers and facilities for the treatment and care of alcohol and drug addicts, including the authority to name each facility. The office shall be headed by a director appointed by the Director of the Department of Behavioral Health and Developmental Disabilities pursuant to Section 44‑12‑50(B)(1). The director must be a person of proven executive and administrative ability with appropriate education and substantial experience in the field of mental illness treatment.

SECTION 13. Section 44‑9‑20 of the S.C. Code is amended to read:

 Section 44‑9‑20. All the powers and duties vested in the South Carolina Mental Health Commission immediately prior to March 26, 1964 are hereby that were transferred to and vested in the Department of Mental Health are now transferred to and vested in the Office of Mental Health, a component of the Department of Behavioral Health and Developmental Disabilities. All records, files and other papers belonging to the South Carolina Mental Health CommissionDepartment of Mental Health shall be continued as part of the records and files of the Department Office of Mental Health.

SECTION 14. Section 44‑9‑30 of the S.C. Code is amended to read:

 Section 44‑9‑30. (A)(1) There is created the governing board for the State Department of Mental Health known as the South Carolina Mental Health Commission. The commission shall consist of seven members, one from each congressional district, appointed by the Governor, upon the advice and consent of the Senate.

 (2) The Governor shall consider consumer and family representation when appointing members.

 (B) The members serve for terms of five years and until their successors are appointed and qualify. The terms of no more than two members may expire in one year. The Governor may remove a member pursuant to the provisions of Section 1‑3‑240. A vacancy must be filled by the Governor for the unexpired portion of the term.

 (C) The commissionSubject to the approval of the Director of the Department of Behavioral Health and Developmental Disabilities, the office’s director shall determine policies and promulgate regulations governing the operation of the department office and the employment of professional and staff personnel.

 (D) The members shall receive the same subsistence, mileage, and per diem provided by law for members of state boards, committees, and commissions.

SECTION 15. Section 1‑3‑420 of the S.C. Code is amended to read:

 Section 1‑3‑420. (A) The Governor, when in his opinion the facts warrant, shall, by proclamation, declare that, because of unlawful assemblage, violence or threats of violence, or a public health emergency, as defined in Section 44‑4‑130, a danger exists to the person or property of any citizen and that the peace and tranquility of the State, or any political subdivision thereof, or any particular area of the State designated by him, is threatened, and because thereof an emergency, with reference to such threats and danger, exists.

 (B) The Governor, upon the issuance of a proclamation as provided for in this section, must immediately file the proclamation in the Office of the Secretary of State, which proclamation is effective upon issuance and remain in full force and effect until revoked by:

 (1) the Governor.;

 (2) the General Assembly with the adoption of a concurrent resolution;

 (3) by a joint written statement from the President of the Senate and the Speaker of the House of Representatives transmitted to the Governor and the Secretary of State if the President of the Senate and the Speaker of the House of Representatives determine that it is not practical or possible to convene the General Assembly to adopt a concurrent resolution.

 (C) If there is a vacancy in the office of the President of the Senate, then the duties that may be discharged by the President pursuant to this section may be discharged by the Chairman of the Senate Rules Committee. If the office of the President and the Chairman of the Senate Rules Committee are vacant, then the Chairman of the Finance Committee may discharge the duty of the President. If there is a vacancy in the office of Speaker of the House of Representatives, then the duties that may be discharged by the Speaker of the House of Representatives pursuant this section may be discharged by the Speaker Pro Tempore of the House of Representatives. If the office of Speaker of the House of Representatives and the office of Speaker Pro Tempore of the House of Representatives are both vacant, the Chairman of the House of Representatives Rules Committee may discharge the duty of the Speaker of the House of Representatives.

SECTION 16. Section 25‑1‑440(a) of the S.C. Code is amended to read:

 (2)(i) declare a state of emergency for all or part of the State if he finds a disaster or a public health emergency, as defined in Section 44‑4‑130, has occurred, or that the threat thereof is imminent and extraordinary measures are considered necessary to cope with the existing or anticipated situation. A declared state of emergency shall not continue for a period of more than fifteen days without the consent of the General Assemblyunless renewed by the Governor for no more than fifteen‑day periods. A declared state of emergency shall also terminate upon the earlier of:

 (A) the termination date established by the Governor in an executive order;

 (B) the termination date established by the General Assembly in a concurrent resolution; or

 (C) by a joint written statement from the President of the Senate and the Speaker of the House of Representatives transmitted to the Governor and the Secretary of State if the President of the Senate and the Speaker of the House of Representatives determine that it is not practical or possible to convene the General Assembly to adopt a concurrent resolution.

 (ii) If there is a vacancy in the office of the President of the Senate, then the duties that may be discharged by the President pursuant to this section may be discharged by the Chairman of the Senate Rules Committee. If the office of the President and the Chairman of the Senate Rules Committee are vacant, then the Chairman of the Finance Committee may discharge the duty of the President. If there is a vacancy in the office of Speaker of the House of Representatives, then the duties that may be discharged by the Speaker of the House of Representatives pursuant this section may be discharged by the Speaker Pro Tempore of the House of Representatives. If the office of Speaker of the House of Representatives and the office of Speaker Pro Tempore of the House of Representatives are both vacant, the Chairman of the House of Representatives Rules Committee may discharge the duty of the Speaker of the House of Representatives.;

SECTION 17. Section 40‑43‑86(E) of the S.C. Code is amended to read:

 (E)(1) A prescription drug order shall contain, at a minimum, the:

 (1)(a) full name and address of the patient;

 (2)(b) name, address, telephone number, and degree classification of the prescriber; license number, and Drug Enforcement Agency registration number of the prescribing practitioner where required by law;

 (3)(c) date of issuance;

 (4)(d) name, strength, dosage form, and quantity of drug prescribed;

 (5)(e) directions for use;

 (6)(f) number of refills authorized. No prescription marked “PRN” or any other nonspecified number of refills may be refilled more than two years beyond the date it was originally written. Nothing in this subsection abridges the right of a pharmacist to refuse to fill or refill a prescription; and

 (7)(g) a written order signed by the prescriber, which shall bear the name of the patient; name, strength, and quantity of the drug or device prescribed; directions for use; date of issue; and, either rubber stamped, typed, printed by hand, or typeset, the name, address, telephone number, and degree classification of the prescriber; and, if a controlled substance is prescribed, the prescriber's federal registration number;

 (8)(h) only one drug and set of instructions for each blank, if preprinted; and

 (9)(i) a chart order is exempt from the requirements of this subsection.

 (2) A pharmacist may refuse to fill or refill a prescription when:

 (a) a contradiction is detected in the patient's records;

 (b) patterns of narcotic abuse are observed in the patient's records;

 (c) the order is not complete or is unclear;

 (d) the pharmacist objects to filling the prescription for religious, moral, or ethical reasons pursuant to the Medical Ethics and Diversity Act, Title 44, Chapter 139. Nothing in this subsection allows pharmacists to deny “right to try” prescriptions as defined in Section 44‑137‑10; or

 (e) the prescription is for off‑label use of the prescribed drug, during a state of emergency declared by the Governor, and the patient is unable to pay for the prescription and/or a pharmacy is under‑reimbursed or not reimbursed by the insurance carrier. For purposes of this subitem, “off‑label use” means the practice of prescribing a prescription drug for a different purpose than the federal Food and Drug Administration’s approved purpose.

SECTION 18. Section 44‑1‑100 of the S.C. Code is amended to read:

 Section 44‑1‑100. All sheriffs and constables in the several counties of this State and police officers and health officers of cities and towns must may aid and assist the Director of the Department of Public Health and Environmental Control and must may carry out and obey his orders, or those of the Department of Public Health and Environmental Control, to enforce and carry out any and all restrictive measures and quarantine regulations that may be prescribed. During during a state of public health emergency, as defined in Section 44‑4‑130, the director may request assistance in enforcing orders issued pursuant to this chapter and pursuant to Chapter 4, Title 44, from the public safety authority, as defined in Section 44‑4‑130, other state law enforcement authorities, and local law enforcement. The public safety authority may request assistance from the South Carolina National Guard in enforcing orders made pursuant to this chapter or pursuant to Chapter 4, Title 44.

SECTION 19. Section 44‑4‑130 of the S.C. Code is amended to read:

 Section 44‑4‑130. As used in the chapter:

 (A) “Biological agent” means a microorganism, virus, infectious substance, naturally occurring or bioengineered product, or other biological material that could cause death, disease, or other harm to a human, an animal, a plant, or another living organism.

 (B) “Bioterrorism” means the intentional use or threatened use of a biological agent to harm or endanger members of the public.

 (C) “Chemical agent” means a poisonous chemical agent that has the capacity to cause death, disease, or other harm to a human, an animal, a plant, or another living organism.

 (D) “Chemical terrorism” means the intentional use or threatened use of a chemical agent to harm or endanger members of the public.

 (E) “Chain of custody” means the methodology of tracking specimens for the purpose of maintaining control and accountability from initial collection to final disposition of the specimens and providing for accountability at each stage of collecting, handling, testing, storing, and transporting the specimens and reporting test results.

 (F) “Commissioner” “Director” means the Commissioner Director of the Department of Public Health and Environmental Control.

 (G) “Contagious disease” is an infectious disease that can be transmitted from person to person, animal to person, or insect to person.

 (H) “Coroners, medical examiners, and funeral directors” have the same meanings as provided in Sections 17‑5‑5 and 40‑19‑10, respectively.

 (I) “DHEC” “Department” means the Department of Public Health and Environmental Control or any person authorized to act on behalf of the Department of Public Health and Environmental Control.

 (J) “Facility” means any real property, building, structure, or other improvement to real property or any motor vehicle, rolling stock, aircraft, watercraft, or other means of transportation.

 (K) “Gene therapy” means any product that mediates its effects by transcription or translation of transferred genetic material or by integrating into the host genome and that are administered as nucleic acids, viruses, or genetically engineered microorganisms.

 (K)(L) “Health care facility” means any nonfederal institution, building, or agency or portion thereof, whether public or private (for‑profit or nonprofit) that is used, operated, or designed to provide health services, medical treatment, or nursing, rehabilitative, or preventive care to any person or persons. This includes, but is not limited to, ambulatory surgical facilities, health maintenance organizations, home health agencies, hospices, hospitals, infirmaries, intermediate care facilities, kidney treatment centers, long‑term care facilities, medical assistance facilities, mental health centers, outpatient facilities, public health centers, rehabilitation facilities, residential treatment facilities, skilled nursing facilities, and adult daycare centers. The term also includes, but is not limited to, the following related property when used for or in connection with the foregoing: laboratories, research facilities, pharmacies, laundry facilities, health personnel training and lodging facilities, and patient, guest, and health personnel food service facilities, and offices and office buildings for persons engaged in health care professions or services.

 (L)(M) “Health care provider” means any person or entity who provides health care services including, but not limited to, hospitals, medical clinics and offices, special care facilities, medical laboratories, physicians, pharmacists, dentists, physician assistants, nurse practitioners, registered and other nurses, paramedics, firefighters who provide emergency medical care, emergency medical or laboratory technicians, and ambulance and emergency medical workers. This includes out‑of‑state medical laboratories, provided that such laboratories have agreed to the reporting requirements of South Carolina. Results must be reported by the laboratory that performs the test, but an in‑state laboratory that sends specimens to an out‑of‑state laboratory is also responsible for reporting results.

 (M)(N) “Infectious disease” is a disease caused by a living organism or virus. An infectious disease may, or may not, be transmissible from person to person, animal to person, or insect to person.

 (N)(O) “Isolation” and “quarantine” mean the compulsory physical separation (including the restriction of movement or confinement) of individuals and/or groups believed to have been exposed to or known to have been infected with a contagious disease from individuals who are believed not to have been exposed or infected, in order to prevent or limit the transmission of the disease to others; if the context so requires, “quarantine” means compulsory physical separation, including restriction of movement, of populations or groups of healthy people who have been potentially exposed to a contagious disease, or to efforts to segregate these persons within specified geographic areas. “Isolation” means the separation and confinement of individuals known or suspected (via signs, symptoms, or laboratory criteria) to be infected with a contagious disease to prevent them from transmitting disease to others.

 (O)(P) “Protected health information” means any information, whether oral, written, electronic, visual, pictorial, physical, or any other form, that relates to an individual's past, present, or future physical or mental health status, condition, treatment, service, products purchased, or provision of care, and that reveals the identity of the individual whose health care is the subject of the information, or where there is a reasonable basis to believe such information could be utilized (either alone or with other information that is, or reasonably should be known to be, available to predictable recipients of such information) to reveal the identity of that individual.

 (P)(Q) “Public health emergency” means the occurrence or imminent risk of a qualifying health condition.

 (Q)(R) “Public safety authority” means the Department of Public Safety, the State Law Enforcement Division, or designated persons authorized to act on behalf of the Department of Public Safety, the State Law Enforcement Division including, but not limited to, local governmental agencies that act principally to protect or preserve the public safety, or full‑time commissioned law enforcement persons.

 (R)(S) “Qualifying health condition” means:

 (1) a natural disaster; or

 (2) an illness or health condition that may be caused by terrorism, epidemic or pandemic disease, widespread illness, or a novelan infectious agent or biological or chemical agent and that poses a substantial risk of a significant number of human fatalities, widespread illness, or serious economic impact to the agricultural sector, including food supplyincidents of permanent long‑term disability.

 (S)(T) “Radioactive material” means a radioactive substance that has the capacity to cause bodily injury or death to a human, an animal, a plant, or another living organism.

 (T)(U) “Radiological terrorism” means the intentional use or threatened use of a radioactive material to harm or endanger members of the public.

 (U)(V) “Specimens” include, but are not limited to, blood, sputum, urine, stool, other bodily fluids, wastes, tissues, and cultures necessary to perform required tests, and environmental samples or other samples needed to diagnose potential chemical, biological, or radiological contamination.

 (V)(W) “Tests” include, but are not limited to, any diagnostic or investigative analyses necessary to prevent the spread of disease or protect the public's health, safety, and welfare.

 (W)(X) “Trial court” is the circuit court for the county in which the isolation or quarantine is to occur or to the circuit court for the county in which a public health emergency has been declared. If that court is unable to function because of the isolation, quarantine, or public health emergency, the trial court is a circuit court designated by the Chief Justice upon petition and proper showing by the Department of Health and Environmental Control.

 (Y) “Vaccine” means a suspension of attenuated or killed microorganisms, or of antigenic proteins 24 derived from them, that is administered for prevention or amelioration of infectious disease which has obtained Emergency Use Authorization, or which has been approved by the U.S. Food and Drug Administration, and has been licensed for use.

SECTION 20. Section 44‑4‑510 of the S.C. Code is amended to read:

 Section 44‑4‑510. (A)(1) During a state of public health emergency, DHEC the department may perform voluntary physical examinations or tests as necessary for the diagnosis or treatment of individuals.

 (2) DHEC The department may isolate or quarantine, pursuant to the sections of this act and its existing powers under Section 44‑1‑140, any symptomatic person or person who has been exposed to the contagious disease for which the public health emergency has been declared whose refusal of physical examination or testing results in uncertainty regarding whether he or she has been exposed to or is infected with a the contagious disease or possibly contagious disease or otherwise poses a danger to public health.

 (B)(1) Physical examinations or tests may be performed by any qualified person authorized to do so by DHECthe department.

 (2) Physical examinations or tests must not be reasonably likely to result in serious harm to the affected individual.

 (3) An exposed person should not be released from quarantine due to a normal physical examination or test result, but should remain in quarantine until the end of the incubation period. Once a person develops symptoms in quarantine, as provided in Section 44‑4‑530(B)(5), they must be removed to isolation. If they refuse testing or examination, the isolation period may be affected.

SECTION 21. Section 44‑4‑520 of the S.C. Code is amended to read:

 Section 44‑4‑520. (A) During a state of public health emergency, DHEC the department may exercise the following emergency powers, in addition to its existing powers, over persons as necessary to address the public health emergency:

 (1) to vaccinate persons as protection against infectious disease and to prevent the spread of contagious or possibly contagious disease;

 (2) to treat persons exposed to or infected with disease; and

 (3) to prevent the spread of contagious or possibly contagious disease, DHEC may isolate or quarantine, pursuant to the applicable sections of this act, symptomatic persons or persons exposed to the disease who are unable or unwilling for any reason (including, but not limited to, health, religion, or conscience) to undergo vaccination or treatment pursuant to this section.

 (B) Vaccinations or treatment, or both, must may be provided only to those individuals who agree have given informed consent to the vaccinations or treatment, or both.

 (C)(1) Vaccination Vaccinations may be performed by any qualified person authorized by DHECthe department.

 (2) To be administered pursuant to this section, a vaccine must not be such as is reasonably likely to lead to serious harm to the affected individual.

 (D)(1) Treatment must be administered by any qualified person authorized to do so by DHECthe department.

 (2) Treatment must not be such as is reasonably likely to lead to serious harm to the affected individual.

 (E) For purposes of this section, “informed consent” means a written document that is signed and dated by an individual. If the individual is a minor, the document must be signed by a parent or legal guardian, or if the individual is incapacitated or without sufficient mental capacity, it must be signed by a designated health care agent pursuant to a health care power of attorney, that at a minimum includes:

 (1) an explanation of the vaccine or treatment that is written in language that is understandable to the average lay person;

 (2) a description of the potential risks and benefits resulting from vaccine or treatment, along with a realistic description of the most likely outcome;

 (3) a statement acknowledging risks associated with the vaccine or treatment if the vaccine or treatment is an indemnified product as defined in Section 44‑1‑55(A)(7); and

 (4) language that clearly indicates that the individual agrees to the administration of the vaccine or treatment, that the individual has had time to thoughtfully and voluntarily accept or decline the vaccine or treatment free from coercion.

 (F) The safety and efficacy of vaccines, tests, and treatments performed and administered as provided in this section must be reviewed and adverse events monitored by the department. References to evidence‑based data determined to validate vaccines, tests, and treatments including, but not limited to VAERS data, must be prominently posted on the department’s public website.

SECTION 22. Section 44‑4‑530 of the S.C. Code is amended to read:

 Section 44‑4‑530. (A) During a public health emergency, DHEC the department may isolate or quarantine an individual or groups of individuals who have been diagnosed with or exposed to the contagious disease for which the public health emergency was declared. This includes individuals or groups who have not been vaccinated, treated, tested, or examined pursuant to Sections 44‑4‑510 and 44‑4‑520. DHEC The department may also establish and maintain places of isolation and quarantine, and set rules and make orders.

 (B) DHEC The department must adhere to the following conditions and principles when isolating or quarantining individuals or groups of individuals:

 (1) isolation and quarantine must be by the least restrictive means necessary to prevent the spread transmission of a the contagious or possibly contagious disease to others and may include, but are not limited to, confinement to private homes or other private and public premises;

 (2) individuals isolated because of objective evidence of infection or contagious disease must be confined separately from quarantined asymptomatic individuals;

 (3) the health status of isolated and quarantined individuals must be monitored regularly to determine if they require isolation or quarantine;

 (4) an asymptomatic quarantined individual must be confined for no more than twenty‑one days;

 (4)(5) if a quarantined individual becomes infected or is reasonably believed to be infected with a the contagious or possibly contagious disease, he or she must be promptly removed to isolation;

 (5)(6) isolated and quarantined individuals must be immediately released when they no longer pose no substantial risk of transmitting a contagious or possibly contagious disease to others;

 (6)(7) the needs of persons isolated and quarantined must be addressed in a systematic and competent fashion including, but not limited to, providing adequate food, clothing, shelter, means of communication with those in isolation or quarantine and outside these settings, medication, and competent medical care;

 (7)(8) premises used for isolation and quarantine must be maintained in a safe and hygienic manner and be designed to minimize the likelihood of further transmission of infection or other harms to persons isolated or quarantined; and

 (8)(9) to the extent possible, cultural and religious beliefs must be considered in addressing the needs of the individuals and establishing and maintaining isolation and quarantine premises.; and

 (10) individuals who have recovered from the contagious disease must not be involuntarily separated from quarantined or isolated family members.

 (C) A person subject to isolation or quarantine must comply with DHEC's the department’s rules and orders, and must not go beyond the isolation or quarantine premises. Failure to comply with these rules and orders constitutes a felony misdemeanor and, upon conviction, a person must be fined not more than one thousandtwo hundred dollars or imprisoned not more than thirty days, or both.

 (D)(1) DHEC The department may authorize physicians, health care workers, or others access to individuals in isolation or quarantine as necessary to meet the needs of isolated or quarantined individuals.

 (2) No person, other than a person authorized by DHEC, shall enter isolation or quarantine premises. Failure to comply with this provision constitutes a felony and, upon conviction, a person must be fined not more than one thousand dollars or imprisoned not more than thirty days, or both.

 (3)(2) A person entering an isolation or quarantine premises with or without authorization of DHEC the department may be isolated or quarantined as provided for in this chapter.

 (4)(3) The public safety authority and other law enforcement officers may arrest, isolate, or quarantine an individual who is acting in violation of an isolation or quarantine order after the order is given to the individual pursuant to Section 44‑4‑540(B)(3) or after the individual is provided notice of the order. In a case where an individual is not the subject of an isolation or quarantine order under Section 44‑4‑540, law enforcement officers may provide written or verbal notice of the order. Law enforcement officers may arrest, isolate, or quarantine an individual who is acting in violation of isolation or quarantine rules orders after the rules orders are established and the individual is given written or verbal notice of the rulesorders. An arrest warrant, or an additional isolation, or quarantine order is not required for arrest, isolation, or quarantine under Section 44‑4‑530(D)(4)(3).

 (E) An employer may not fire, demote, or otherwise discriminate against an employee complying with an isolation or quarantine order issued pursuant to Section 44‑1‑80, 44‑1‑110, 44‑1‑140, 44‑4‑520, 44‑4‑530, or 44‑4‑540; however, nothing in this section prohibits an employer from requiring an employee to use annual or sick leave to comply with such an order.

SECTION 23. Section 44‑4‑540 of the S.C. Code is amended to read:

 Section 44‑4‑540. (A) During a public health emergency, the isolation and quarantine of an individual or groups of individuals must be undertaken in accordance with the procedures provided in this section.

 (B)(1) DHEC The department may temporarily isolate or quarantine an individual or groups of individuals through an emergency order signed by the commissioner or his designee, if delay in imposing the isolation or quarantine would significantly jeopardize DHEC's the department’s ability to prevent or limit the transmission of a contagious or possibly contagious disease to others.

 (2) The emergency order must specify the following: (i) the identity of the individual or groups of individuals subject to isolation or quarantine; (ii) the premises subject to isolation or quarantine; (iii) the date and time at which isolation or quarantine commences; (iv) the suspected contagious disease, if known; and (v) a copy of Article V of this act and relevant definitions of this act.

 (3) A copy of the emergency order must be given to the individual(s) or groups of individuals to be isolated or quarantined, or if impractical to be given to a group of individuals, it may be posted in a conspicuous place in the isolation or quarantine premises.

 (4) Within ten five days after issuing the emergency order, DHEC the department must file a petition pursuant to subsection (C) of this section for a court order authorizing the continued isolation or quarantine of the isolated or quarantined individual or groups of individuals.

 (C)(1) DHEC The department may make a written petition to the trial court for an order authorizing the isolation or quarantine of an individual or groups of individuals.

 (2) A petition under subsection (C)(1) must specify the following: (i) the identity of the individual or groups of individuals subject to isolation or quarantine; (ii) the premises subject to isolation or quarantine; (iii) the date and time at which isolation or quarantine commences; (iv) the suspected contagious disease, if known; and (v) a statement of compliance with the conditions and principles for isolation or quarantine of Section 44‑4‑530(B); and (vi) a statement of the basis upon which isolation or quarantine is justified in compliance with this article. The petition must be accompanied by a sworn affidavit of DHEC the department attesting to the facts asserted in the petition, together with any further information that may be relevant and material to the court's consideration.

 (3) Notice to individuals or groups of individuals identified in the petition must be accomplished within twenty‑four hours in accordance with the South Carolina Rules of Civil Procedure. If notice by mail or fax is not possible, notice must be made by personal service.

 (4) A hearing must be held on any petition filed pursuant to this subsection within five days of filing of the petition. In extraordinary circumstances and for good cause shown, DHEC may apply to continue the hearing date on a petition filed pursuant to this section for up to ten days, which continuance the court may grant in its discretion giving due regard to the rights of the affected individuals, the protection of the public's health, the severity of the emergency, and the availability of necessary witnesses and evidence.

 (5)(a) The court must grant the petition if, by a preponderance of the evidence, isolation or quarantine is shown to be reasonably necessary to prevent or limit the transmission of a contagious or possibly contagious disease.

 (b) An order authorizing isolation or quarantine may do so for a period not to exceed thirty the maximum number of days allowed pursuant to Section 44‑4‑530.

 (c) The order must: (i) identify the isolated or quarantined individuals or groups of individuals by name or shared or similar characteristics or circumstances; (ii) specify factual findings warranting isolation or quarantine pursuant to this act; (iii) include any conditions necessary to ensure that isolation or quarantine is carried out within the stated purposes and restrictions of this act; and (iv) served on affected individuals or groups of individuals in accordance with the South Carolina Rules of Civil Procedure. If notice by mail or fax is not possible, notice must be made by personal service.

 (d) Prior to the expiration of an order issued pursuant to this item, DHEC the department may move to continue the isolation or quarantine for additional periods not to exceed thirty days each. The court must consider the motion in accordance with standards set forth in this item.

 (D)(1) An individual or group of individuals isolated or quarantined pursuant to this act may apply to the trial court for an order to show cause why the individual or group of individuals should not be released. The court must rule on the application to show cause within forty‑eight hours of its filing. If the court grants the application, the court must schedule a hearing on the order to show cause within twenty‑four hours from issuance of the order to show cause. The issuance of the order to show cause does not stay or enjoin the isolation or quarantine order.

 (2)(a) An individual or group of individuals isolated or quarantined pursuant to this act may request a hearing in the trial court for remedies regarding breaches to the conditions of isolation or quarantine. A request for a hearing does not stay or enjoin the isolation or quarantine order.

 (b) Upon receipt of a request under this subsection alleging extraordinary circumstances justifying the immediate granting of relief, the court must fix a date for hearing on the matters alleged not more than twenty‑four hours from receipt of the request.

 (c) Otherwise, upon receipt of a request under this subsection, the court must fix a date for hearing on the matters alleged within five days from receipt of the request.

 (3) In any proceedings brought for relief under this subsection, in extraordinary circumstances and for good cause shown, DHEC the department may move the court to extend the time for a hearing up to forty‑eight hours, which extension the court in its discretion may grant giving due regard to the rights of the affected individuals, the protection of the public's health, the severity of the emergency, and the availability of the necessary witnesses and evidence.

 (E) A record of the proceedings pursuant to this section must be made and retained. In the event that, given a state of public health emergency, parties cannot personally appear before the court, proceedings may be conducted by their authorized representatives and be held via any means that allow all parties to fully participate.

 (F) The court must appoint counsel to represent individuals or groups of individuals who are or who are about to be isolated or quarantined pursuant to the provisions of this act and who are not otherwise represented by counsel. Payment for these appointments must be made in accordance with other appointments for legal representation in actions arising outside of matters in this act, and is not the responsibility of any one state agency. Appointments last throughout the duration of the isolation or quarantine of the individual or groups of individuals. DHEC The department must provide adequate means of communication between such individuals or groups of individuals and their counsel. Where necessary, additional counsel for DHEC the department from other state agencies or from private attorneys appointed to represent state agencies, must be appointed to provide adequate representation for the agency and to allow timely hearings of the petitions and motions specified in this section.

 (G) In any proceedings brought pursuant to this section, to promote the fair and efficient operation of justice and having given due regard to the rights of the affected individuals, the protection of the public's health, the severity of the emergency, and the availability of necessary witnesses and evidence, the court may order the consolidation of individual claims into groups of claims where:

 (1) the number of individuals involved or to be affected is so large as to render individual participation impractical;

 (2) there are questions of law or fact common to the individual claims or rights to be determined;

 (3) the group claims or rights to be determined are typical of the affected individuals' claims or rights; and

 (4) the entire group will be adequately represented in the consolidation.

 (H)(G) Notwithstanding the provisions of subsection (A), prior to the Governor declaring a public health emergency, as defined in Section 44‑4‑130, the isolation and quarantine of an individual or groups of individuals pursuant to Section 44‑1‑80, 44‑1‑110, 44‑1‑140, 44‑4‑520, 44‑4‑530, or 44‑4‑540 must be undertaken in accordance with the procedures provided in this section.

SECTION 24. Section 44‑4‑570 of the S.C. Code is amended to read:

 Section 44‑4‑570. (A) DHECThe department, in coordination with the appropriate licensing authority and the Department of Labor, Licensing and Regulation, may exercise, for such period as the state of public health emergency exists, in addition to existing emergency powers, the following emergency powers regarding licensing of health personnel:

 (1) to require in‑state health care providers to assist in the performance of vaccination, treatment, examination, or testing of any individual as a condition of licensure, authorization, or the ability to continue to function as a health care provider in this State;

 (2)(1) to accept the volunteer services of in‑state and out‑of‑state health care providers consistent with Title 8, Chapter 25, to appoint such in‑state and out‑of‑state health care providers as emergency support function volunteers, and to prescribe the duties as may be reasonable and necessary for emergency response; and

 (3)(2) to authorize the medical examiner or coroner to appoint and prescribe the duties of such emergency assistant medical examiners or coroners as may be required for the proper performance of the duties of the office.

 (B)(1) The appointment of in‑state and out‑of‑state health care providers pursuant to this section may be for a limited or unlimited time but must not exceed the termination of the state of public health emergency. DHEC The department may terminate the in‑state and out‑of‑state appointments at any time or for any reason provided that any termination will not jeopardize the health, safety, and welfare of the people of this State.

 (2) The appropriate licensing authority may waive any or all licensing requirements, permits, or fees required by law and applicable orders, rules, or regulations for health care providers from other jurisdictions to practice in this State.

 (C)(1) Any health care provider appointed by the department pursuant to this section must not be held liable for any civil damages as a result of medical care or treatment including, but not limited to, trauma care and triage assessment, related to the appointment of the health care provider and the prescribed duties unless the damages result from providing, or failing to provide, medical care or treatment under circumstances demonstrating a reckless disregard for the consequences so as to affect the life or health of the patient.

 (2) This subsection applies if the health care provider does not receive payment from the State other than as allowed in Section 8‑25‑40 for the appointed services and prescribed duties. However, if the health care provider is an employee of the State, the health care provider may continue to receive compensation from the health care provider's employer. This subsection applies whether the health care provider was paid, should have been paid, or expected to be paid for the services at the time of rendering the services from sources including, but not limited to, Medicaid, Medicare, reimbursement under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. Section 512, et seq., or private health insurance.

 (D)(1) The appointment of emergency assistant medical examiners or coroners pursuant to this section may be for a limited or unlimited time, but must not exceed the termination of the state of public health emergency. The medical examiner or coroner may terminate the emergency appointments at any time or for any reason, if the termination will not impede the performance of the duties of the office.

 (2) The medical examiner or coroner may waive any or all licensing requirements, permits, or fees required by law and applicable orders, rules, or regulations for the performance of these duties.

 (3) Any emergency assistant medical examiner or coroner appointed pursuant to this section is immune from civil liability for damages resulting from services relating to and performed during the period of appointment unless the damages result from providing, or failing to provide, services under circumstances demonstrating a reckless disregard for the consequences.

SECTION 25. Section 44‑9‑40 of the S.C. Code and Section 44‑9‑50 of the S.C. Code are repealed.

SECTION 26. (A) The Code Commissioner is directed change references in the S.C. Code from “State Department of Mental Health”, “South Carolina Mental Health Commission”, and “Commission” in Chapter 9, Title 44 and otherwise in the S.C. Code where “commission” refers to the South Carolina Mental Health Commission” to the “Office of Mental Health” or “office” as appropriate.

 (B) The Code Commissioner is directed to change references in the S.C. Code from “Department of Disabilities and Special Needs” or “Department” in Chapter 20, Title 44 to “Office of Intellectual and Developmental Disabilities” or “office” as appropriate. The Code Commissioner is further directed to change references in the S.C. Code to the “Department of Disabilities and Special Needs Commission” or where “commission” refers to the “Department of Disabilities and Special Needs Commission” to “Director of the office of Intellectual and Developmental Disabilities” or “Director” as appropriate.

 (C) The Code Commissioner is directed to change references in the S.C. Code from “Department of Alcohol and Other Drug Abuse Services” or “department” when referring to the Department of Alcohol and Other Drug Abuse Services” to “Office of Substance Abuse Services” or “office” as appropriate.

SECTION 27. (A) Upon the effective date of this act the Director of the Department of Disabilities and Special Needs shall serve as the interim director of the Office of Intellectual and Developmental Disabilities, unless otherwise removed by the Director of the Department of Behavioral Health and Developmental Disabilities, until such time as a successor is appointed by the Director of the Department of Behavioral Health and Developmental Disabilities and assumes the position. In the case of a vacancy in the office director's position on or after the effective date of this act and prior to the appointment of a successor, the Director of the Department of Behavioral Health and Developmental Disabilities may assign an employee of the department to perform the duties required of the vacant position in the interim.

 (B) Upon the effective date of this act, the Director of the Department of Mental Health shall serve as the interim director of the Office of Mental Health, unless otherwise removed by the Director of the Department of Behavioral Health and Developmental Disabilities, until such time as a successor is appointed by the Director of the Department of Behavioral Health and Developmental Disabilities and assumes the position. In the case of a vacancy in the office director's position on or after the effective date of this act and prior to the appointment of a successor, the Director of the Department of Behavioral Health and Developmental Disabilities may assign an employee of the department to perform the duties required of the vacant position in the interim.

 (C) Upon the effective date of this act the Director of the Department of Alcohol and Other Drug Abuse Services shall serve as the interim director of the Office of Substance Use Services, unless otherwise removed by the Director of the Department of Behavioral Health and Developmental Disabilities, until such time as a successor is appointed by the Director of the Department of Behavioral Health and Developmental Disabilities and assumes the position. In the case of a vacancy in the office director's position on or after the effective date of this act and prior to the appointment of a successor, the Director of the Department of Behavioral Health and Developmental Disabilities may assign an employee of the department to perform the duties required of the vacant position in the interim.

 (D) Nothing in this act prevents the Director of the Department of Behavioral Health and Developmental Disabilities from reappointing the directors of their respective departments serving in those roles as of the effective date of this act.

SECTION 28. (A) Except for personnel and funds transferred pursuant to subsection (B) of this section, the Office of Intellectual and Developmental Disabilities shall operate as a component department of the Department of Behavioral Health and Developmental Disabilities in the 2025‑2026 Fiscal Year using the authority and funds appropriated to the Department of Disabilities and Special Needs as a standalone agency in the appropriations act of 2025. Except for personnel and funds transferred pursuant to subsection (B) of this section, the Office of Mental Health shall operate as a component department of the Department of Behavioral Health and Developmental Disabilities in the 2025‑2026 Fiscal Year using the authority and funds appropriated to the Department of Mental Health as a standalone agency in the appropriations act of 2025. Except for personnel and funds transferred pursuant to subsection (B) of this section, the Office of Substance Use Services shall operate as a component department of the Department of Behavioral Health and Developmental Disabilities in the 2025‑2026 Fiscal Year using the authority and funds appropriated to the Department of Alcohol and Other Drug Abuse Services as a standalone agency in the appropriations act of 2025.

 (B) Upon appointment and confirmation, the Director of the Department of Behavioral Health and Developmental Disabilities may cause the transfer to the Department of Behavioral Health and Developmental Disabilities such: (1) personnel and attendant funding included in the administrative areas of the 2025 appropriations act and (2) operating expenses included in the administrative areas of the 2025 appropriations act of one or more of the component departments of the Department of Behavioral Health and Developmental Disabilities as, in the determination of the director, is necessary to carry out the duties of the department. The Department of Administration shall cause all necessary actions to be taken to accomplish any such transfer and shall in consultation with the Director of the Department of Behavioral Health and Developmental Disabilities prescribe the manner in which the transfer provided for in this section shall be accomplished. The Department of Administration's actions in facilitating the provisions of this section are ministerial in nature and shall not be construed as an approval process over any of the transfers.

 (C) Except for those positions transferred pursuant to this section or otherwise specifically referenced in this act, employees of the Departments of Disabilities and Special Needs, Mental Health, or Alcohol and Other Drug Abuse Services shall maintain their same status with the appropriate component departments of the Department of Behavioral Health and Developmental Disabilities. Employees of the Department of Mental Health shall become employees of the Office of Mental Health within the Department of Behavioral Health and Developmental Disabilities. Employees of the Department of Disabilities and Special Needs shall become employees of the Office of Intellectual and Developmental Disabilities within the Department of Behavioral Health and Developmental Disabilities. Employees of the Department of Alcohol and Other Drug Abuse Services shall become employees of the Office of Substance Use within the Department of Behavioral Health and Developmental Disabilities.

 (D) Nothing in this act affects bonded indebtedness, if applicable, real and personal property, assets, liabilities, contracts, regulations, or policies of the Departments of Disabilities and Special Needs, Mental Health, or Alcohol and Other Drug Abuse Services existing on the effective date of this act. All applicable bonded indebtedness, real and personal property, assets, liabilities, contracts, regulations, or policies shall continue in effect in the name of the Department of Office of Behavioral Health and Developmental Disabilities or the appropriate component department.

SECTION 29. The General Assembly finds that the sections presented in this act constitute one subject as required by Article III, Section 17 of the South Carolina Constitution, in particular finding that each change and each topic relates directly to or in conjunction with other sections to the subject of health care delivery as clearly enumerated in the title.  The General Assembly further finds that a common purpose or relationship exists among the sections, representing a potential plurality but not disunity of topics, notwithstanding that reasonable minds might differ in identifying more than one topic contained in the act.

SECTION 30.If any section, subsection, paragraph, subparagraph, sentence, clause, phrase, or word of this act is for any reason held to be unconstitutional or invalid, such holding shall not affect the constitutionality or validity of the remaining portions of this act, the General Assembly hereby declaring that it would have passed this act, and each and every section, subsection, paragraph, subparagraph, sentence, clause, phrase, and word thereof, irrespective of the fact that any one or more other sections, subsections, paragraphs, subparagraphs, sentences, clauses, phrases, or words hereof may be declared to be unconstitutional, invalid, or otherwise ineffective.

SECTION 31. This act takes effect upon approval by the Governor.

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