

**SENATE FINANCE COMMITTEE
HEALTH AND HUMAN SERVICES SUBCOMMITTEE
PROVISO RECOMMENDATIONS FOR FY 2022-23**

SECTION 33 - J020 - DEPARTMENT OF HEALTH AND HUMAN SERVICES

33.20 RESTORE ORIGINAL PROVISO (DHHS: Medicaid Accountability and Quality Improvement Initiative) Directs the department to implement accountability and quality improvements initiatives for: (A) Healthy Outcomes Initiative; (B) Improve Community Health; (C) Rural Hospital DSH Payment; (D) Primary Care Safety Net; (E) Obesity Education; (F) Provider Eligibility Data; (G) Pilot of All-Inclusive Health Intervention for Vulnerable Mental Health Patients; and (H) Publish Quarterly Progress Reports
WMC: AMEND proviso to delete the requirement that the department shall consult with the Department of Alcohol and Other Drug Abuse Services.
HOU: ADOPT proviso as amended.
SFC SUBCOMMITTEE RECOMMENDATION: RESTORE original proviso.

33.20. (DHHS: Medicaid Accountability and Quality Improvement Initiative) From the funds appropriated and authorized to the Department of Health and Human Services, the department is authorized to implement the following accountability and quality improvement initiatives:

(A) Healthy Outcomes Initiative - The Department of Health and Human Services may tie Disproportionate Share Hospital (DSH) payments to participation in the Healthy Outcomes Initiative and may expand the program as DSH funding is available.

(B) To improve community health, the department may explore various health outreach, education, patient wellness and incentive programs. The department may pilot health interventions targeting diabetes, smoking cessation, weight management, heart disease, and other health conditions. These programs may be expanded as their potential to improve health and lower costs are identified by the department.

(C) Rural Hospital DSH Payment - Medicaid-designated rural hospitals in South Carolina may be eligible to receive up to one hundred percent of costs associated with uncompensated care as part of the DSH program. Funds shall be allocated from the existing DSH program. To be eligible, rural hospitals must participate in reporting and quality guidelines published by the department and outlined in the Healthy Outcomes Initiative. In addition to the requirements placed upon them by the department, rural hospitals must actively participate with the department and any other stakeholder identified by the department, in efforts to design an alternative health care delivery system in these regions.

(D) Primary Care Safety Net - The department shall implement a methodology to reimburse safety net providers participating in a hospital Healthy Outcomes Initiative program to provide primary care, behavioral health services, and pharmacy services for chronically ill individuals that do not have access to affordable insurance. Qualifying safety net providers are approved, licensed, and duly organized Federally Qualified Health Centers (FQHCs and other entities receiving funding under Section 330 of the Public Health Services Act), Rural Health Clinics (RHCs), local alcohol and drug abuse authorities established by Act 301 of 1973, Free Clinics, other clinics serving the uninsured, and Welvista. The department shall formulate a methodology and allocate \$3,600,000 for innovative care strategies for qualifying safety net providers. The department shall formulate a separate methodology and allocate \$5,000,000 of funding to FQHCs, at least \$1,500,000 of funding for Free Clinics, and \$1,500,000 of funding for local alcohol and drug abuse authorities created under Act 301 of 1973 and up to \$4,000,000 for capital improvements to the Act 301 facilities through consultation with the Department of Alcohol and Other Drug Abuse Services, to ensure funds are provided on a needs based approach. The department may continue to develop and implement a process for obtaining encounter-level data that may be used to assess the cost and impact of services provided through this proviso. Any

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newly established Community Health Center/FQHC shall receive an amount equivalent to the average disbursement made to all centers/FQHCs.

(E) The department shall allocate funds to be used for obesity education for patients, reimbursement payments for providers, and continuing education for all providers through partnerships with the Department.

(F) To be eligible for funds in this proviso, providers must provide the department with patient, service and financial data to assist in the operation and ongoing evaluation of both the initiatives resulting from this proviso, and other price, quality, transparency and DSH accountability efforts currently underway or initiated by the department. The Revenue and Fiscal Affairs Office shall provide the department with any information required by the department in order to implement this proviso in accordance with state law and regulations.

(G) The department may pilot a behavioral health intervention program for wrap-around care to vulnerable mental health patients who frequent the emergency room in hotspots and underserved areas within the state. The pilot program must provide reports detailing progress on the target population and health outcomes achieved. These programs may be expanded as their potential to improve health and lower costs are identified by the department.

(H) The department shall publish quarterly reports on the agency's website regarding the department's progress in meeting the goals established by this provision.

33.22 AMEND FURTHER (DHHS: Rural Health Initiative) Directs the department to use Rural Health Initiative funds to partner with various state agencies, institutions, and other key stakeholders to develop a strategic plan to address medically underserved communities and authorize the department to leverage federal funds to implement the initiative. Authorizes Rural Health Initiative funds to be carried forward and used for the same purpose. Directs the department ensure rural physician coverage through the following: Rural and Underserved Area Provider Capacity; Rural Healthcare Coverage and Education; Rural Medicine Workforce Development; Statewide Health Innovation; and Maternal Mortality Rate. Directs the department to investigate the potential use of DSH and/or other allowable and appropriate sources of funds to improve access to emergency medical services in communities whose access has been degraded due to a hospital's closure during the past five years and to establish a DSH pool for this purpose. Directs RFA and the Area Health Consortium's Office of Healthcare Workforce Analysis and Planning to provide the department with any information required and require the department to submit a report on the evaluation of the state's safety-net providers to the President of the Senate and Speaker of the House by January 1 of the current fiscal year.

WMC: AMEND proviso to update the amount from "\$2,000,000" to "\$3,000,000" to support center staffing, programs, and collaborations in Rural Healthcare Coverage and Education. Includes the Rural Health Network Revitalization Project to the rural physician coverage and provides guidelines for the project. Deletes the establishment of a DSH pool and the solicitation of proposals from and providing financial support for capital expenditures associated with replacing rural hospitals.

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: AMEND proviso further to require consultation with HHS for the expenditure of funds for the Rural Health Network Revitalization project. Requires the Center to submit an annual spending plan for the project. Requires a report to be submitted to the Chairmen of the House Ways and Means Committee and Senate Finance Committee and the Director of DHHS on the specific use of budgeted and expended funds.

33.22. (DHHS: Rural Health Initiative) From the funds appropriated to the Department of Health and Human Services for the Rural Health Initiative in the current fiscal year, the department shall partner with the following state agencies, institutions, and other key

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stakeholders to implement these components of a Rural Health Initiative to better meet the needs of medically underserved communities throughout the state. The department may leverage any and all available federal funds to implement this initiative. Recurring and non-recurring funding for the Rural Health Initiative may be carried forward by the department and expended for the same purpose.

(A) The Department of Health and Human Services shall incentivize the development of primary care access in rural and underserved areas, leverage Medicaid spending on Graduate Medical Education (GME) by implementing methodologies that support recommendations contained in the January 2014 report of the South Carolina GME Advisory Group, and continue to leverage the use of teaching hospitals to ensure rural physician coverage in counties with a demonstrated lack of adequate access and coverage through the following provisions:

(1) Rural and Underserved Area Provider Capacity - the department shall partner with the University of South Carolina School of Medicine to develop a statewide Rural Health Initiative to identify strategies for significantly improving health care access, supporting physicians, and reducing health inequities in rural communities. In addition, the department shall also contract with the MUSC Hospital Authority in the amount of \$1,500,000, and the USC School of Medicine in the amount of \$2,000,000 to further develop statewide teaching partnerships. The department shall also expend \$5,000,000 in accordance with a graduate medical education plan developed cooperatively by the Presidents or their designees of the following institutions: the Medical University of South Carolina, the University of South Carolina, and Francis Marion University.

(2) Rural Healthcare Coverage and Education - The USC School of Medicine, in consultation with statewide rural health stakeholders and partners, shall continue to operate a Center of Excellence to support and develop rural medical education and delivery infrastructure with a statewide focus, through clinical practice, training, and research, as well as collaboration with other state agencies and institutions. ~~The center's activities must be~~ Center shall submit to the department an annual spending plan centered on efforts to improve access to care and expand healthcare provider capacity in rural communities. Upon approval of the annual spending plan, the department shall authorize at least ~~\$2,000,000~~ \$3,000,000 to support center staffing as well as the programs and collaborations delivering rural health research, the ICARED program, workforce development scholarships and recruitment, rural fellowships, health education development, and/or rural practice support and education. Funding released by the department pursuant to this section must not be used by the recipient(s) to supplant existing resources already used for the same or comparable purposes. No later than February first of the current fiscal year, the USC School of Medicine shall report to the Chairman of the House Ways and Means Committee, the Chairman of the Senate Finance Committee, and the Director of the Department of Health and Human Services on the specific uses of funds budgeted and/or expended pursuant to this provision.

(3) Rural Medicine Workforce Development - The department, in consultation with the Medical Education Advisory Committee (MEAC), shall support the development of additional residency and/or fellowship slots or programs in rural medicine, family medicine, and any other appropriate primary care specialties that have been identified by the department as not being adequately served by existing Graduate Medical Education programs. The department shall ensure that each in-state member of the Association of American Medical Colleges is afforded the opportunity to participate in MEAC. New training sites and/or residency positions are subject to approval as specified by the Accreditation Council for Graduate Medical Education (ACGME). The department may also accept proposals and award grants for programs designed to expose resident physicians to rural practice and enhance the opportunity to recruit these residents for long-term practice in these rural and/or underserved communities. Up to \$500,000 of the recurring funds appropriated to the department for the Rural Health Initiative may be used

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for this purpose. Additionally, the department shall use up to \$200,000 of the recurring funds appropriated for the Department of Aging's Geriatric Physicians Loan Forgiveness program.

(4) Statewide Health Innovations - At least \$2,500,000 must be expended by the department to contract with the USC School of Medicine and at least \$1,000,000 to Clemson University to develop and continue innovative healthcare delivery and training opportunities through collaborative community engagement via ICARED, Clemson Rural Health Programming, and other innovative programs that provide clinical services, mental and behavioral health services, children's health, OB/GYN services, and/or chronic disease coverage gaps. In consultation with statewide rural health stakeholders and partners, the department must ensure collaborative efforts with the greatest potential for impact are prioritized.

(5) Maternal Mortality Reduction - Prior to the expiration of the COVID-19 public health emergency, the department shall ensure that 12-month postpartum coverage is preserved by making the election offered pursuant to Section 1902(e)(16) of the Social Security Act. The Department of Health and Human Services shall collaborate with the South Carolina Maternal Mortality and Morbidity Review Committee to develop a method of evaluating the effectiveness of this provision.

(6) Rural Health Network Revitalization Project – For the purpose of establishing self-sustaining rural health networks that will improve care delivery in rural communities, funds appropriated for Rural Health Network Revitalization shall be expended, in consultation with the Director of Department of Health and Human Services, by the South Carolina Center for Rural and Primary Healthcare within the University of South Carolina School of Medicine to provide material support, facilitation, technical assistance, and other resources to rural communities seeking to create or renew their rural health networks. The Center shall submit to the department an annual spending plan. Upon approval of the annual spending plan, the Center shall:

(a) be authorized to provide funding to such communities for a time to establish and support the work,

(b) work with partners across the State to implement evidence-based models of community development and healthcare delivery,

(c) evaluate the implementation and impact of the network development work undertaken; and

(d) facilitate the development, implementation, and evaluation of alternative payment models with payors within the State.

No later than February first of the current fiscal year, the South Carolina Center for Rural and Primary Healthcare within the University of South Carolina School of Medicine shall report to the Chairman of the House Ways and Means Committee, the Chairman of the Senate Finance Committee, and the Director of the Department of Health and Human Services on the specific uses of funds budgeted and/or expended pursuant to this provision.

(B) The department shall continue to investigate the potential use of DSH and/or any other allowable and appropriate source of funds in order to improve access to emergency medical services in one or more communities identified by the department in which such access has been degraded due to a hospital's closure during the past five years.

~~(1) In the current fiscal year, the department is authorized to establish a DSH pool, or carry forward DSH capacity from a previous period as federally permissible, for this purpose and/or if deemed necessary to implement transformation plans for which conforming applications were filed with the department pursuant to this or a previous hospital transformation or rural health initiative proviso, but for which additional negotiations or development were required. An emergency department that is established within 35 miles of its sponsoring hospital pursuant to this or a previous hospital transformation or rural health initiative proviso and which receives dedicated funding pursuant to this proviso shall be exempt from any Department of Health and~~

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~~Environmental Control Certificate of Need requirements or regulations. Any such facility shall participate in the South Carolina Telemedicine Network.~~

~~(2) The department may solicit proposals from and provide financial support for capital expenditures associated with the replacement of two or more rural hospitals, not to exceed one quarter of the total project capital budget. Such a plan must be submitted by a hospital system approved to advise a rural transformation project, and the project must be subject to ongoing advisement by the submitting facility, or subject to acquisition by the advising facility. The advised facility must be designated as a critical access hospital in a county experiencing not less than four percent decrease in population between the most recent decennial censuses and have been deemed eligible to participate in the rural transformation pool in a prior fiscal year. The department shall require such written agreements which may require project milestone, last dollar funding, and other stipulations deemed necessary and prudent by the department to ensure proper use of the funds.~~

(C) The Revenue and Fiscal Affairs Office and the Area Health Education Consortium's Office of Healthcare Workforce Analysis and Planning shall provide the department with any information required by the department in order to implement this proviso in accordance with state law and regulations. Not later than January 1, of the current fiscal year, the department shall submit to the President of the Senate and Speaker of the House of Representatives an evaluation of the state's safety-net providers that includes, at a minimum, Federally Qualified Health Centers, Rural Health Clinics, and to the extent applicable to funding received by the state, free clinics.

- 33.23** **AMEND** (DHHS: IDEA Part C Compliance) Directs the department to report to the Governor and the Chairmen of the Senate Finance and House Ways and Means Committees by December 31, 2021, on the status of the department's efforts to bring the Individuals With Disabilities Education Act (IDEA) Part C program into compliance with federal requirements.
WMC: AMEND proviso to update calendar reference to "2022." Requested by the Department of Health and Human Services.
HOU: ADOPT proviso as amended.
SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

33.23. (DHHS: IDEA Part C Compliance) With the funds available to the department, the Department of Health and Human Services shall report to the Governor, the Chairman of the Senate Finance Committee, and the Chairman of the House Ways and Means Committee no later than December 31, ~~2021~~ 2022 on the status of the department's efforts to bring the Individuals With Disabilities Education Act (IDEA) Part C program into compliance with federal requirements. This report must specifically address areas in which the IDEA Part C program has received low performance scores and include any relevant correspondence from the U.S. Department of Education. The report must explain the department's plan for bringing the program into compliance, including specific steps and the associated timeline.

- 33.24** **AMEND** (DHHS: Personal Emergency Response System) Directs the department to develop RFPs to provide for Personal Emergency Response Systems (PERS) to be issued to Medicaid recipients based on the department's Medicaid Home and Community-based waiver. Directs that PERS devices must include unlimited 24-7 live phone contact with RNs for triage services. Requires the PERS nurse triage call centers be accredited and separate from PERS emergency response call centers. Requires PERS devices comply with all FCC rules and regulations. Requires the department apply for any necessary waivers.
WMC: AMEND proviso to update fiscal year reference to "2022-23."
HOU: ADOPT proviso as amended.

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SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

33.24. (DHHS: Personal Emergency Response System) With funds appropriated and authorized to the Department of Health and Human Services for Fiscal Year ~~2021-22~~ 2022-23, the department shall develop one or more Requests for Proposals, to provide for Personal Emergency Response Systems (PERS) to be issued to Medicaid recipients pursuant to the department's Medicaid Home and Community-based waiver. The PERS devices must include in addition to emergency response services, unlimited twenty-four hour, seven-day a week live phone contact with experienced registered nurses for triage services. A PERS nurse triage call center must be accredited and must be separate from the PERS emergency response call center. The PERS device must have a wireless radio transmitter and a console that is cellular and does not require a traditional land line. A PERS device that includes nurse triage services also must comply with the requirements of Federal Communications Commission rules, 47 C.F.R. Part 68; and be approved by the Underwriters Laboratory or Equipment Testing Laboratories as a health care signaling product. The Department of Health and Human Services shall apply for any waiver necessary under the department's Medicaid Home and Community-based waiver to implement these provisions.

33.27 **AMEND** (DHHS: Optional State Supplement Adjustment) Directs the department to make adjustments to the Optional State Supplementation (OSS) Program to ensure that payment amounts are not reduced due to any federal government cost-of-living adjustments in benefit payments. Directs the department to make a one-time payment in FY 2021-22 to account for the cost-of-living adjustments that happened in the prior two fiscal years.

WMC: AMEND proviso to delete the reference to the one-time payment for the cost-of-living adjustments that happened in the prior two fiscal years. Requested by the Department of Health and Human Services.

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

33.27. (DHHS: Optional State Supplement Adjustments) Cost-of-living adjustments in benefit payments made by the federal government will result in adjustments in the Optional State Supplementation (OSS) Program as determined necessary by the Department of Health and Human Services to ensure that payment amounts are not reduced. The department shall adjust the OSS net income limitation, the OSS facility rate, and the personal needs allowance to ensure that payment amounts are not reduced. OSS benefit payment amounts shall be adjusted to reflect the changes in recipients' countable income. ~~The department shall make a one-time payment in Fiscal Year 2021-22 to account for the cost of living adjustments which occurred in the prior two fiscal years.~~

33.28 **DELETE** (DHHS: Medication Technician Certification) **WMC:** ADD new proviso to direct the department to develop a Medication Technician Certification Program for non-nursing, unlicensed healthcare personnel working in a nursing home or hospital who dispense medication. Directs the department to develop program standards and create and maintain a Medication Technician registry.

HOU: ADOPT new proviso.

SFC SUBCOMMITTEE RECOMMENDATION: DELETE proviso.

~~*33.28. (DHHS: Medication Technician Certification) Of the funds appropriated to the Department of Health and Human Services, the department shall develop a Medication Technician Certification program for selected non-nursing, unlicensed healthcare personnel who provide medications to those receiving services in a licensed nursing home or hospital as defined*~~

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~~*in Section 44-7-130. The department shall develop program standards to include, but not be limited to, curriculum, training and competency, and testing and certification requirements. Additionally, the department shall create and maintain a Medication Technician registry.*~~

33.mhc **ADD** (DHHS: Mental Health Counselors) **SFC SUBCOMMITTEE RECOMMENDATION:** ADD new proviso to direct the department to assume responsibility of providing state matching funds necessary to draw down Medicaid funds for mental health counselors in schools. Directs DMH to transfer general funds to the department in an amount equal to the match by DMH to draw down Medicaid funds for the most recently completed fiscal year.

33.mhc. (DHHS: Mental Health Counselors) The Department of Health and Human Services shall assume the responsibility of providing the state matching funds necessary to draw down federal Medicaid funds for school-based mental health counselors. The Department of Mental Health shall transfer general funds to the Department of Health and Human Services in an amount equal to the Medicaid match used by the Department of Mental Health to draw down similar federal Medicaid funds during the most recently completed fiscal year.

SECTION 34 - J040 - DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

34.44 **DELETE** (DHEC: Wave Dissipation Device) Allows the initiation of a Wave Dissipation Device pilot program and directs that deployment of a qualified wave dissipation device is not construction and meets specific permitting exceptions. Requires a fee of 10 cents per linear foot be paid to the department before deploying or expanding a qualified wave dissipation device. Authorizes the department to order the device to be removed if it determines the device causes material harm, to flora, fauna, physical, or aesthetic resources. Provides a definition for a “qualified wave dissipation device.”

WMC: DELETE proviso. Requested by the Department of Health and Environmental Control.

HOU: ADOPT deletion.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT deletion.

~~**34.44.** (DHEC: Wave Dissipation Device) From funds appropriated to the department for the Coastal Resource Improvement program, the department shall permit a Wave Dissipation Device pilot program to be initiated.~~

~~The deployment of a qualified wave dissipation device seaward of the setback line or baseline pursuant to a study conducted by the Citadel or a research university is not construction and meets the permitting exception contained in Section 48-39-130(D)(2). Prior to deploying or expanding a qualified wave dissipation device, a person proposing to deploy or expand the device must pay the department a fee of ten cents per linear foot of the proposed deployment or expansion. The department may order the removal of all or any portion of a qualified wave dissipation device that the department determines causes material harm to the flora, fauna, physical or aesthetic resources of the area under Section 48-39-130(D)(2) of the 1976 Code.~~

~~A ‘qualified wave dissipation device’ is a device that:~~

~~(1) is placed mostly parallel to the shoreline;~~

~~(2) is designed to dissipate wave energy;~~

~~(3) is designed to minimize scouring seaward of and adjacent to the device by permitting sand to move landward and seaward through the device;~~

~~(4) the horizontal panels designed to dissipate wave energy can be deployed within one hundred twenty hours or less and can be removed within one hundred twenty hours or less;~~

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- (5) does not negatively impact or inhibit sea turtle nesting or other fauna;
 - (6) can be adjusted after initial deployment in response to fluctuations in beach elevations;
- and
- (7) ~~otherwise prevents down coast erosion, protects property, and limits negative impacts to public safety and welfare, beach access, and the health of the beach dune system.~~

34.53 DELETE (DHEC: State Trauma Registry) Directs the department, through the State Trauma Registry to require all state verified trauma centers to submit relevant patient care data and direct the department to develop appropriate policies or regulations by January 1, 2021 to ensure the trauma centers collect the data.

WMC: AMEND proviso to update calendar reference to “2022.”

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: DELETE proviso.

~~**34.53.** (DHEC: State Trauma Registry) From the funds appropriated or authorized in the current fiscal year, the Department of Health and Environmental Control, through the State Trauma Registry, shall direct that all state verified trauma centers are required to submit relevant patient care data. The department shall develop appropriate policies or regulations no later than January 1, 2021 2022, to ensure data is collected by all trauma centers.~~

34.58 AMEND (DHEC: Solar Projects) Directs that within 120 days of the effective date of this act, the department shall submit regulations to offer guidance and develop rules on photovoltaic modules and energy storage system batteries in the management of end-of-life photovoltaic modules and energy storage system batteries on solar projects and the decommissioning of solar projects in excess of thirteen acres. Directs the department to submit interim reports on a quarterly basis beginning July 1, 2021, and a final report by June 30, 2022, to the Chairmen of the Senate Judiciary and House Labor, Commerce and Industry Committees.

WMC: AMEND proviso to delete the requirement for the submission of regulations to all SC residents and instead direct the department to provide recommendations for the regulations. Updates calendar references to “2022” and “2023.” Requested by the Department of Health and Environmental Control.

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

34.58. (DHEC: Solar Projects) From the funds appropriated to the Department of Health and Environmental Control, and within one hundred and twenty days after the effective date of this act, the department ~~shall submit regulations to guide all South Carolinians invested in, selling, installing, and using~~ *provide recommendations for the regulation of* photovoltaic modules and energy storage system batteries in the management of end-of-life photovoltaic modules and energy storage system batteries on solar projects and the decommissioning of solar projects in excess of thirteen acres. Management of end-of-life photovoltaic modules and energy storage system batteries shall include both partial refurbishing of a solar project and complete decommissioning. In the development of these rules, the department shall collaborate with stakeholders and shall consider all of the following matters:

- (1) Whether photovoltaic modules, energy storage system batteries, their materials, or other equipment used in utility-scale solar projects exhibit any of the characteristics of hazardous waste, as identified in 40 C.F.R. Part 261, or under rules adopted pursuant to the S.C. Hazardous Waste Management Act, Section 44-56-10 of the 1976 Code, or if any such equipment is properly characterized as solid waste under State and Federal law.

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(2) Preferred methods to responsibly manage end-of-life photovoltaic modules, energy storage system batteries, or the constituent materials thereof, or other equipment used in utility-scale solar projects, including the extent to which such equipment may be:

- (a) reused, if not damaged or in need of repair, for a similar purpose;
- (b) refurbished, if not substantially damaged, and reused for a similar purpose;
- (c) recycled with recovery of materials for similar or other purposes;

(d) safely disposed of in construction and demolition or municipal solid waste landfills for material that does not exhibit any of the characteristics of hazardous waste under state or federal law; or

(e) safely disposed of in accordance with state and federal requirements governing hazardous waste for materials that exhibit any of the characteristics of hazardous waste under state or federal law.

(3) The volume of photovoltaic modules and energy storage system batteries currently in use in the State, and projections, based upon the data on life cycle identified currently on impacts that may be expected to the State's landfill capacity if landfill disposal is permitted for such equipment at end-of-life.

(4) Whether or not adequate financial assurance requirements are necessary to ensure proper decommissioning of solar projects in excess of thirteen acres upon cessation of operations.

(5) Infrastructure that may be needed to develop a practical, effective, and cost-effective means to collect and transport end-of-life photovoltaic modules, energy storage system batteries, and other equipment used in utility-scale solar projects for reuse, refurbishment, recycling, or disposal.

(6) Whether or not manufacturer or installer stewardship programs for the recycling of end-of-life photovoltaic modules and energy storage system batteries should be established for applications other than utility-scale solar project installations, and if so, fees that should be established for these manufacturers and installers to support the implementation of such requirements.

The department shall submit interim reports to the Chairman of the Senate Judiciary Committee and the Chairman of the House Labor, Commerce and Industry Committee on all activities pursuant to this provision on a quarterly basis beginning July 1, ~~2024~~ 2022, and shall submit a final report with findings, including stakeholder input, to the to the Chairman of the Senate Judiciary Committee and the Chairman of the House Labor, Commerce and Industry Committee no later than June 30, ~~2022~~ 2023.

34.59 AMEND (DHEC: Permit Extension) Directs that the expiration of a critical area permit or navigable water permit issued by the department for dock construction is extended until June 30, 2022. Provides requirements and limitations for the permit extension.

WMC: AMEND proviso to update calendar references to "2023."

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

34.59. (DHEC: Permit Extension) The expiration and any associated vested right of a critical area permit or navigable water permit issued by Department of Health and Environmental Control for the construction of a dock is extended until June 30, ~~2022~~ 2023, provided the permit is valid on July 1, 2021 or at any time during the previous eighteen months. This provision may not be construed or implemented to:

(1) extend a permit or approval issued by the United States or its agencies or instrumentalities;

(2) extend a permit or approval for which the term or duration of the permit or approval is specified or determined pursuant to federal law;

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- (3) shorten the duration that a permit would have had in the absence of this provision;
- (4) prohibit the granting of additional extensions provided by law;
- (5) affect an administrative consent order issued by the department which is in effect on, or issued at any time from the effective date of this provision to June 30, ~~2022~~ 2023;
- (6) affect the ability of a governmental entity to revoke or modify a permit pursuant to law;
- (7) modify a requirement of law that is necessary to retain federal delegation by the State of South Carolina of the authority to implement a federal law or program; or
- (8) affect department's Office of Ocean and Coastal Resource Management permits issued pursuant to R.30 12(N) Access to Coastal Lands

Within thirty days after the effective date of this act, the department shall place a notice in the State Register noting the extension of expiration dates provided for in this provision.

- 34.60 DELETE** (DHEC: Onsite Wastewater Systems) Allows DHEC to expend funds to regulate onsite wastewater systems. Directs that the department may only regulate such systems in the same manner as they were regulated on January 12, 2021.
WMC: DELETE proviso. Requested by the Department of Health and Environmental Control.
HOU: ADOPT deletion.
SFC SUBCOMMITTEE RECOMMENDATION: ADOPT deletion.

~~**34.60.** (DHEC: Onsite Wastewater Systems) In the current fiscal year, the Department of Health and Environmental Control may expend funds appropriated and authorized in this act to regulate onsite wastewater systems, including septic tanks and other sewage treatment and disposal systems, but the department only may regulate such onsite systems in the same manner as such systems were regulated on January 12, 2021.~~

- 34.61 ADD** (DHEC: Acute Hospital at Home Waiver) **WMC:** ADD new proviso to allow a hospital to participate in an Acute Hospital Care at Home waiver program and not be considered as violating its hospital license or be subject to any adverse enforcement action for participating in the program.
HOU: ADOPT new proviso.
SFC SUBCOMMITTEE RECOMMENDATION: ADOPT new proviso.

34.61. (DHEC: Acute Hospital at Home Waiver) In the current fiscal year, a hospital approved by the Centers for Medicare and Medicaid Services to participate in an Acute Hospital Care at Home waiver program may not be deemed to be in violation of its hospital license solely on the basis of its participation in the program. Additionally, the department shall not subject such a hospital to any form of adverse enforcement action relating to its participation in the program.

- 34.62 AMEND NEW PROVISO** (DHEC: EMS Association) **WMC:** ADD new proviso to direct DHEC to remit all funding for EMS Association Recruitment and Retention to the SC EMS Association. Establishes the Governor's Advisory Board of Emergency Care. Directs the association to provide a report detailing progress to the Governor, the Chairmen of the Senate Finance and House Ways and Means Committees, and DHEC annually.
HOU: ADOPT new proviso.
SFC SUBCOMMITTEE RECOMMENDATION: AMEND new proviso to delete the requirement of remittance of all funding for EMS Association Recruitment and Retention to the SC EMS Association. Directs DHEC to consult with the SC EMS Association to study and recommend recruitment strategies. Deletes the establishment of a Governor's Advisory Board.

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Directs the department instead of the EMS Association to provide a progress report. Deletes that the report be submitted to the Governor and adds a submission to the director of DHEC.

34.62. (DHEC: EMS Association) For ~~the current~~ Fiscal Year 2022-23, with the funds appropriated to the Department of Health and Environmental Control ~~shall remit one hundred percent of the funding for EMS Association Recruitment and Retention to, the department shall consult with the South Carolina EMS Association for the purpose of recruiting and retaining personnel statewide, especially in rural areas. Additionally, there is established a Governor's Advisory Board of Emergency Care consisting of representatives from the association, related state agencies, healthcare providers, and other stakeholders. The association will be responsible for staffing the board's activities, as well as implementing and executing to study and recommend strategies to recruit and fill the unprecedented EMS position vacancies across all systems in the State. The ~~association~~ department shall provide a report detailing the ~~progress~~ findings of this effort and any corresponding recommendations for funding to ~~the Governor, the Chairman of the Senate Finance Committee, the Chairman of the House Ways & Means Committee, and the director of DHEC annually.~~~~

34.63 AMEND NEW PROVISO (DHEC: Pollutants Remediation Fund) WMC: ADD new proviso to establish the PFOS, PFOA, and Emerging Pollutants Remediation Fund within the DHEC Environmental Affairs Division. Defines the purposes of the fund and provides a funding mechanism for private well owners and public drinking water systems. Defines “facilitate drinking water improvements”, provides qualifications on disbursement of forgivable loans and grants from the fund, and describes which additional funds may be deposited.

HOU: ADOPT new proviso.

SFC SUBCOMMITTEE RECOMMENDATION: AMEND new proviso to include identifying pollution “at or above the EPA Health Advisory Limit or EPA Maximum Contaminant Level.” Directs a regulated water utility to demonstrate evidence of a known source of PFOA and PFOS, along with a department-approved risk assessment indicating the potential of adverse on the public, in order to disburse forgivable loans or grants. Deletes the allowance of federal funds to be deposited in the remediation fund. Allows the department to use up to \$2,000,000 for PFAS strategy implementation, staffing, and other costs associated with fund administration.

34.63. (DHEC: Pollutants Remediation Fund) (A) Of the funds appropriated for PFAS Remediation, there is established within the Department of Health and Environmental Control Environmental Affairs Division the PFOS, PFOA, and Emerging Pollutants Remediation Fund which shall be held and administered by the department for the purpose of remediating drinking water perfluorooctanesulfonic acid (PFOS) pollution, perfluorooctanoic acid (PFOA) pollution, cyanobacteria (blue-green algae), and pollution from other emerging contaminants of concern to the department, currently identified or later identified at or above the EPA Health Advisory Limit or EPA Maximum Containment Level. Earnings on balances in the fund shall be credited to the fund. Amounts remaining in the fund at the end of the fiscal year accrue only to the credit of the fund, and the fund shall be available in perpetuity for the purpose of remediating PFOS, PFOA, and other emerging contaminants.

(B) Sixty percent of the funds shall be made available to private well owners and municipal, county, joint, or otherwise public drinking water systems serving thirty thousand customers, or fewer, in the form of forgivable loans or grants. Forty percent of the funds shall be made available to municipal, county, joint, or otherwise public drinking water systems serving more than thirty thousand customers, in the form of forgivable loans or grants.

(C) Forgivable loans or grants may be disbursed from the fund for the purposes of:

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(1) facilitating drinking water improvements that prevent exposure to PFOA and PFOS through drinking water if the combined concentrations of PFOA and PFOS are at or above the EPA Health Advisory Limit of 70 parts per trillion or an updated health advisory or Maximum Contaminant Level issued by EPA;

(2) facilitating drinking water improvements that prevent exposure to PFOA and PFOS through drinking water if a regulated water utility ~~believes that the~~ demonstrates evidence of a known source and the presence of PFOA or PFOS ~~has~~, and a department-approved risk assessment indicating the potential to adversely affect public health in the future, regardless of if the current combined concentrations are at or above the EPA Health Advisory Limit of 70 parts per trillion;

(3) facilitating drinking water improvements that prevent exposure to Cyanobacteria to include, but not be limited to, Microcystis, Lyngbya, Dolichospermum, and Planktothrix at or above EPA drinking water health advisories;

(4) facilitating drinking water improvements that prevent exposure to other emerging contaminants of concern to the department through drinking water if these concentrations of these contaminants exceed an EPA Health Advisory Limit or an EPA Maximum Contaminant Level; or

(5) facilitating drinking water improvements that prevent exposure to other emerging contaminants of concern to the department through drinking water if a regulated water utility ~~believes that the~~ demonstrates evidence of a known source and the presence of the contaminants ~~has~~, and a department-approved risk assessment indicating the potential to adversely affect public health in the future, regardless of if the current concentrations are at or above the EPA Health Advisory Limit or EPA Maximum Contaminant Level.

(D) For purposes of this provision, “facilitate drinking water improvements” means providing for the construction or improvements to drinking water supply, storage, treatment, and distribution facilities and associated costs, as determined in consultation between the department, water provider, and the well owner as the most reasonable, that are necessary to:

(1) change water sources including, but not limited to, connecting a private well to public water system or regionalization efforts that facilitate the merger of one or more drinking water systems to a source with no PFOS and PFOA or with lower combined concentrations of PFOS and PFOA; or

(2) treat drinking water to reduce combined concentrations of PFOA, PFOS, and other emerging contaminants of concern below ~~levels that may adversely affect public health~~ the EPA Health Advisory Limit or an EPA Maximum Containment Level.

(E) Additional funds may be deposited into the fund, which may include:

(1) funds appropriated by the General Assembly;

(2) ~~federal funds;~~

~~(3)~~ private grants, gifts, and bequests;

~~(4)~~(3) contributions to the fund in satisfaction of any public or private obligation for environmental mitigation or remediation, whether such obligation arises out of law, equity, contract, regulation, administrative proceeding, or judicial proceeding;

~~(5)~~(4) net proceeds of bonds issued by the department; and

~~(6)~~(5) interest or other income earned on the monies in the fund.

(F) The department may use up to \$2,000,000 from the fund for implementation of its PFAS strategy and for staffing or other costs associated with the administration of the fund.

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SECTION 35 - J120 - DEPARTMENT OF MENTAL HEALTH

- 35.3 DELETE** (DMH: Alzheimer’s Funding) Directs that \$900,000 of Community Mental Health Centers funds be used to contract for services to provide respite care and diagnostic services for persons afflicted with Alzheimer’s Disease; and provides for submission of financial statements and outcome measures.
WMC: DELETE proviso. Requested by Department of Mental Health.
HOU: ADOPT deletion.
SFC SUBCOMMITTEE RECOMMENDATION: ADOPT deletion.

~~35.3. (DMH: Alzheimer’s Funding) Of the funds appropriated to the Department of Mental Health for Community Mental Health Centers, \$900,000 must be used for contractual services to provide respite care and diagnostic services to those who qualify as determined by the Alzheimer’s Disease and Related Disorders Association. The department must maximize, to the extent feasible, federal matching dollars. On or before September thirtieth of each year, the Alzheimer’s Disease and Related Disorders Association must submit to the department, Governor, Senate Finance Committee, and House Ways and Means Committee an annual financial statement and outcomes measures attained for the fiscal year just ended. These funds may not be expended or transferred during the current fiscal year until the required reports have been received by the department, Governor, Chairman of the Senate Finance Committee, and the Chairman of the House Ways and Means Committee. In addition, when instructed by the Executive Budget Office or the General Assembly to reduce funds by a certain percentage, the department may not reduce the funds transferred to the Alzheimer’s Disease and Related Disorders Association greater than such stipulated percentage.~~

- 35.11 AMEND** (DMH: Fitness to Stand Trial) Directs the department to create a pilot program to determine the efficacy and cost-effectiveness of providing treatment services in a detention center to adult criminal defendants who have been determined to be unfit to stand trial but who will likely be fit in the foreseeable future. Directs the department to have discretion to provide restoration treatment to a defendant in a hospital or detention facility. Directs the department to submit a report of their findings to the Chairmen of the Senate Finance and the House Ways and Means Committees and the Governor by September 1, 2022.
WMC: AMEND proviso to update calendar year reference to “2023.”
HOU: ADOPT proviso as amended.
SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

35.11. (DMH: Fitness to Stand Trial) The Department of Mental Health shall initiate a pilot program to determine the efficacy and cost effectiveness of providing treatment services in a detention center to adult criminal defendants who have been determined unfit to stand trial but who are likely to become fit in the foreseeable future. Upon completion of a court hearing, consideration of evidence that a defendant is unfit to stand trial but is likely to become fit to stand trial in the foreseeable future, and when the court orders the defendant hospitalized for up to an additional sixty days, the department shall have discretion to provide restoration treatment to a defendant in a hospital or in a detention facility. The department shall submit a report detailing the findings of the pilot program to the Chairman of the Senate Finance Committee, the Chairman of the House Ways and Means Committee, and the Governor no later than June 30, ~~2022~~ 2023.

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SECTION 36 - J160 - DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

36.14 DELETE (DDSN: Beaufort DSN Facility) Provides for the department to retain the proceeds from the sale of the local DSN Board of Beaufort County property and to use the funds to purchase a new property. Authorizes unexpended funds to be carried forward and used for the same purpose. Requires the department provide a status report to the Beaufort County Legislative Delegation by June 30, 2022.

WMC: DELETE proviso. Requested by Department of Disabilities and Special Needs.

HOU: ADOPT deletion.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT deletion.

~~**36.14.** (DDSN: Beaufort DSN Facility) For Fiscal Year 2021-22, the Department of Disabilities and Special Needs is authorized to retain the full amount of proceeds from the sale of the local Disabilities and Special Needs Board of Beaufort County property. The funds retained from this sale must be used by the department to purchase a new property for the local Disabilities and Special Needs Board in Beaufort County that more appropriately meets the needs of the individuals served. Unexpended funds may be carried forward into the current fiscal year and used for the same purpose. The department must provide a status report to the Beaufort County Legislative Delegation by June 30, 2022, detailing the retention of any sale proceeds and/or the expenditures of those funds.~~

SECTION 38 - L040 - DEPARTMENT OF SOCIAL SERVICES

38.22 AMEND (DSS: SNAP Coupons) Directs that the department shall continue the “Healthy Bucks” program to provide coupons to allow SNAP recipients to purchase additional fresh fruits and vegetables. Allows each coupon to be doubled up to \$10 month. Directs the agency to work to identify and use funds as matching dollars to continue the success of the program and to report the status of the program to the General Assembly semi-annually. Directs that the status report include the number of recipients, counties served, and cumulative expenditure data.

SFC SUBCOMMITTEE RECOMMENDATION: AMEND proviso to allow recipients to use coupons at authorized farmers markets and vendors instead of grocery stores. Increases the purchase amount from “ten” to “twenty” dollars. Deletes the utilization of funds received “in the prior and current fiscal year” to funds received “during federal fiscal year 2012” from the U.S. Department of Agriculture.

38.22. (DSS: SNAP Coupons) The Department of Social Services shall continue the “Healthy Bucks” program established to provide coupons that allow Supplemental Nutrition Assistance Program (SNAP) recipients to obtain additional fresh fruits and vegetables when purchasing fresh produce at ~~grocery stores or~~ authorized farmers markets and vendors with SNAP benefits through their EBT cards. ~~Each coupon~~ Healthy Buck coupons shall allow the beneficiary to ~~double~~ increase the amount of produce purchased, up to ~~ten~~ twenty dollars per month. The agency shall utilize all funds received ~~in the prior and current fiscal years~~ from the U.S. Department of Agriculture as a bonus for reducing the error rate in processing SNAP applications during federal fiscal year 2012 to fund the program. The agency shall work to identify and utilize funds as matching dollars for the continued success of the “Healthy Bucks” program and shall report semi-annually to the General Assembly on the status of the program. The report shall include, at a minimum, the number of recipients, counties served, and cumulative expenditure data for the program.

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- 38.23** **AMEND** (DSS: Internal Child Fatality Review Committees) Requires the Director of the Department of Social Services to create and fund Internal Child Fatality Review Committees to allow for rapid and expeditious review of child fatalities that are reported to the department.
WMC: AMEND proviso to update fiscal year reference to “2022-23.”
HOU: ADOPT proviso as amended.
SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

38.23. (DSS: Internal Child Fatality Review Committees) For Fiscal Year ~~2021-22~~ 2022-23, the Director of the Department of Social Services shall create and fund Internal Child Fatality Review Committees (internal committees) pursuant to the authority granted in Sections 43-1-60(3), 43-1-80, and 63-7-910(E) of the 1976 Code to allow for the rapid and expeditious review of reported child fatalities that are reported to the Department of Social Services on suspicion of abandonment, child abuse, neglect or harm as defined in Section 63-7-20. This review process will enable the department to respond to the safety needs of any surviving siblings and will lead to improvement in the department’s efforts to prevent child fatalities caused by abandonment, child abuse, neglect or harm. Each internal committee shall be composed of a board-certified child abuse pediatrician, an agent from the State Law Enforcement Division, a local law enforcement officer, a representative from the local coroner’s office, and representatives from the Department of Social Services. The internal committee may invite other service provider organizations as deemed necessary. The department is authorized to provide reasonable compensation for board-certified child abuse pediatricians serving on an internal committee. Internal committees shall have access to information and records maintained by a provider of medical care regarding a child whose death is being reviewed by the internal committee, including information on prenatal care; all information and records maintained by any state, county, or local government agency, including, but not limited to, birth certificates, law enforcement investigation data, county coroner or medical examiner investigation data, parole and probation information and records, and information and records of health agencies that provided services to the child or family. The meetings, information obtained by, reports prepared by, and statements made before the internal committees are confidential and protected from disclosure pursuant to the Freedom of Information Act, criminal and civil proceedings, and subpoenas as set forth in Sections 63-7-940 and 63-7-1990.

SECTION 40 - L060 - DEPARTMENT ON AGING

- 40.9** **ADD** (AGING: Alzheimer’s Respite Program) **WMC:** ADD new proviso to direct that funds be used to provide respite care and diagnostic services to be maximized to attain federal matching dollars. Directs the department to submit an annual financial statement and outcome measures for the prior fiscal year to the Governor, Senate Finance Committee, and House Ways and Means Committee. Prohibits the department from reducing program funds greater than the stipulated percentage when instructed.
HOU: ADOPT new proviso.
SFC SUBCOMMITTEE RECOMMENDATION: ADOPT new proviso.

40.9. (AGING: Alzheimer’s Respite Program) Funds appropriated to the Department on Aging for Alzheimer’s Respite Program must be used to provide respite care and diagnostic services and must be maximized, to the extent feasible, to attain federal matching dollars. On or before September thirtieth of each year, the department must submit to the Governor, Senate Finance Committee, and House Ways and Means Committee an annual financial statement and outcomes measures attained for the fiscal year just ended. In addition, when instructed by the

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Executive Budget Office or the General Assembly to reduce funds by a certain percentage, the department may not reduce the program funds greater than such stipulated percentage.

SECTION 106 - F300 - STATEWIDE EMPLOYEE BENEFITS

106.2 CONFORM TO FUNDING/AMEND FURTHER (SEB: Suspend SCRS & PORS Employer Contribution Rate Increase) Suspends the increase in the employer contribution rate pursuant to Section 9-1-1085 [EMPLOYER AND EMPLOYEE CONTRIBUTION RATES] and Section 9-11-225 [EMPLOYER AND EMPLOYEE CONTRIBUTION RATES] for Fiscal Year 2021-22. Directs that the contribution rate for SCRS and PORS shall increase by 1% from the Fiscal Year 2020-21 rates set in Act 135 of 2020.

WMC: AMEND proviso to update the fiscal year references to “2022-23” and “2021-22.”

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: CONFORM TO FUNDING/AMEND FURTHER to update act reference to “Act 94 of 2021.”

106.2. (SEB: Suspend SCRS & PORS Employer Contribution Rate Increase) The increase in the employer contribution rate imposed by Section 9-1-1085 and Section 9-11-225 for Fiscal Year ~~2021-22~~ 2022-23, respectively, are suspended. The employer contribution rate for the South Carolina Retirement Systems and the Police Officers Retirement Systems during Fiscal Year ~~2021-22~~ 2022-23, expressed as a percentage of earnable compensation, shall increase by 1% from Fiscal Year ~~2020-21~~ 2021-22 rates as set in ~~Act 135 of 2020~~ Act 94 of 2021.

SECTION 108 - F500 - PUBLIC EMPLOYEE BENEFIT AUTHORITY

108.6 CONFORM TO FUNDING/AMEND (PEBA: State Health Plan) Directs that for Plan Year 2022 there shall be an employer premium increase of 0.8% and a subscriber increase of 0%. Authorize PEBA to adjust the plan, benefits, or contributions during Plan Year 2022 to ensure the plan remains fiscally stable.

WMC: AMEND proviso to increase employer premium to “18.1” percent. Update Plan Year reference to “2023.” Directs that patient cost sharing for plan participants may be adjusted to remain in an ACA-grandfathered status. Deletes the requirement that copayments for participants of the plan shall remain the same in 2022 as in 2021.

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: CONFORM TO FUNDING.

108.6. (PEBA: State Health Plan) Of the funds authorized for the State Health Plan pursuant to Section 1-11-710(A)(2) of the 1976 Code, an employer premium increase of ~~0.8~~ 18.1 percent and a subscriber premium increase of zero percent will result for the standard State Health Plan for Plan Year ~~2022~~ 2023. Patient cost sharing for participants of the State Health Plan for Plan Year 2023 may be adjusted within the parameters allowed to remain in an ACA-grandfathered status. ~~Copayments for participants of the State Health Plan shall remain the same in Plan Year 2022 as in Plan Year 2021.~~ Notwithstanding the foregoing, pursuant to Section 1-11-710(A)(3), the Public Employee Benefit Authority may adjust the plan, benefits, or contributions of the State Health Plan during Plan Year ~~2022~~ 2023 to ensure the fiscal stability of the Plan.

108.12 AMEND (PEBA: COVID-19 Return to Work Extension) Directs that for FY 2021-22, the earnings limitation does not apply to retired SCRS or PORS members who return to covered employment to participate in the state’s public health preparedness and response to COVID-19.

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Directs that this provision is not intended to supersede or conflict with Act 102 of 2021, S. 704 of 2021 and if there is a conflict, the Act provisions control.

WMC: AMEND proviso to update fiscal year reference to “2022-23.”

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

108.12. (PEBA: COVID-19 Return to Work Extension) For Fiscal Year ~~2021-22~~ 2022-23, the earnings limitation imposed pursuant to Section 9-1-1790 and Section 9-11-90 of the 1976 Code does not apply to retired members of the South Carolina Retirement System or the Police Officers Retirement System who return to covered employment to participate in the state’s public health preparedness and response to the COVID-19 virus. This section is not intended to supersede or conflict with Act 102 of 2021, S. 704 of 2021. In the event of a conflict, the provisions of the Act control.

108.14 **ADD** (PEBA: South Carolina Retiree Health Insurance Trust Fund) **WMC:** ADD new proviso to suspend the provisions of Section 1-11-705(I)(2) [SOUTH CAROLINA RETIREE HEALTH INSURANCE TRUST FUND ESTABLISHED; ADMINISTRATION] for the current fiscal year. Directs that funds that would have been transferred to the SC Retiree Health Insurance Trust Fund may remain in the operating account for the employee health insurance program. Requested by the Public Employee Benefit Authority.

HOU: ADOPT new proviso.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT new proviso.

108.14. (PEBA: South Carolina Retiree Health Insurance Trust Fund) The provisions of Section 1-11-705(I)(2) of the 1976 Code are suspended for Fiscal Year 2022-23, and, notwithstanding any other provision of law, during Fiscal Year 2022-23, funds that would otherwise have been transferred to the South Carolina Retiree Health Insurance Trust Fund from the operating account for the State’s employee health insurance program pursuant to Section 1-11-705(I)(2) may remain in the operating account for the State’s employee health insurance program.

108.15 **DELETE** (PEBA: PORS and SCRS Return to Work) **HOU:** ADD new proviso to direct that for the current fiscal year, the earnings limitation does not apply if a member of the PORS or SCRS has not been engaged to perform services for an employer in any capacity for a period of twelve consecutive months subsequent to retirement. Requires the member to certify that he meets the requirements. Directs the member to reimburse the system for any benefits paid if he inaccurately certifies. Sponsors: Reps. Pope and Thayer

SFC SUBCOMMITTEE RECOMMENDATION: DELETE proviso.

~~*108.15. (PEBA: PORS and SCRS Return to Work) For compensation earnings during the current fiscal year, the earnings limitation does not apply if a member of the Police Officer Retirement System has not been engaged to perform services for a participating employer in the system or any other system provided in this title for compensation in any capacity, whether as an employee, independent contractor, leased employee, joint employee, or other classification of worker, for a period of at least twelve consecutive months subsequent to retirement. The exemption provided under this subitem does not apply unless the member first certifies to the system that he satisfies the requirements for the exemption. If a member inaccurately certifies that he satisfies the requirements for the exemption provided in this subitem, the member is responsible for reimbursing the system for any benefits wrongly paid to the member.*~~

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~~*For compensation earnings during the current fiscal year, the earnings limitation does not apply if a member of the South Carolina Retirement System has not been engaged to perform services for a participating employer in the system or any other system provided in this title for compensation in any capacity, whether as an employee, independent contractor, leased employee, joint employee, or other classification of worker, for a period of at least twelve consecutive months subsequent to retirement. The exemption provided under this subitem does not apply unless the member first certifies to the system that he satisfies the requirements for the exemption. If a member inaccurately certifies that he satisfies the requirements for the exemption provided in this subitem, the member is responsible for reimbursing the system for any benefits wrongly paid to the member.*~~

- 108.16 DELETE** (PEBA: Retiree Benefits) **HOU:** ADD new proviso to create the Retirement System Study Committee. Provides for the composition of the committee. Directs the committee to study the effects of Act 13 of 2017 on unfunded liabilities and sustainability of the system and the effects of legislation to allow medical technicians to become members of PORS and the earnings limitation for retired members of PORS. Directs the committee to make a report to the General Assembly by June 30, 2023. Sponsor: Cobb-Hunter
SFC SUBCOMMITTEE RECOMMENDATION: DELETE proviso.

~~*108.16. (PEBA: Retiree benefits) (A)(1) There is created the Retirement System Study Committee. The committee consists of:*~~

~~*(a) the executive director of PEBA, or his designee;*~~

~~*(b) two members of the Senate Finance Committee appointed by its chairman;*~~

~~*(c) two members of the Ways and Means Committee appointed by its chairman;*~~

~~*and*~~

~~*(d) two members of the State Employees Association, one of which must be a retiree.*~~

~~*(2) The committee shall elect a chairman from its membership.*~~

~~*(B) From the funds appropriated to the Public Employee Benefit Authority, the Retirement System Study Committee shall study the effects of Act 13 of 2017 on the unfunded liabilities of the system and the overall effects on the sustainability of the retirement systems. Further, the study committee shall study the potential effects of legislation that would allow emergency medical technicians to become members of the Police Officers Retirement System, and the effects of legislation that would increase the earnings limitation for a retired member of the Police Officers Retirement System. By June 30, 2023, the study committee shall deliver the findings of the studies to the General Assembly.*~~

- 108.fa ADD** (PEBA: Fiduciary Audit) **SFC SUBCOMMITTEE RECOMMENDATION:** ADD new proviso to suspend Section 9-4-40 and bid solicitation for the fiduciary audit for FY 2022-23.

~~*108.fa. (PEBA: Fiduciary Audit) For Fiscal Year 2022-23, Section 9-4-40 of the 1976 Code and solicitation of the bid for the fiduciary audit are suspended.*~~

SECTION 117 - X900 - GENERAL PROVISIONS

- 117.74 AMEND FURTHER** (GP: Information Technology for Health Care) Directs DHHS to use funds appropriated and authorized to them to advance the use of health information technology and health information exchange to improve quality and efficiency of health care and to decrease the costs of health care. Provides guidelines for the release of patient records and medical

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information. Establishes the Health Information Exchange Strategy Development Committee to make recommendations for a statewide HIE strategy to promote interoperability to improve patient safety, eliminate unnecessary testing, and increase the efficiency of the health care system. Directs the committee to assess other states' approaches for governing, financing, and implementing HIE efforts. Directs the committee to report their findings to the Governor and the Chairmen of the House Ways and Means and Senate Finance Committees by November 15, 2021. Authorizes the department to use any available and uncommitted funds to develop, submit, or implement advance planning documents for the continuance of a HIE strategy and secure federal funding.

WMC: AMEND proviso to delete the establishment of the Health Information Exchange Strategy Development Committee. Deletes the authorization to use available and uncommitted funds to develop, submit, or implement advance planning documents for the continuance of a HIE strategy and secure federal funding. Authorizes the department to award grants, grants, and/or other agreements in furtherance of the Health Information Exchange Strategy Development Committee.

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: AMEND proviso further to add "or other initiative it deems appropriate to facilitate the useful exchange of health information" at the end of subsection (B).

117.74. (GP: Information Technology for Health Care) From the funds appropriated and authorized to the Department of Health and Human Services, the department shall advance the use of health information technology and health information exchange to improve quality and efficiency of health care and to decrease the costs of health care as follows:

(A) In order to facilitate the qualification of Medicare and/or Medicaid eligible providers and hospitals for incentive payments for meaningful health information technology (HIT) use, a health care organization participating in the South Carolina Health Information Exchange (SCHIEEx) or a Regional Health Information Organization (RHIO) or a hospital system health information exchange (HIE) that participates in SCHIEEx may release patient records and medical information, including the results of any laboratory or other tests ordered or requested by an authorized health care provider within the scope of his or her license or practice act, to another health information organization that requests the information via a HIE for treatment purposes with ~~or without~~ express written consent or authorization from the patient. A health information organization that receives or views this information from a patient's electronic health record or incorporates this information into the health information organization's electronic medical record for the patient in providing treatment is considered an authorized person for purposes of 42 C.F.R. 493.2 and the Clinical Laboratory Improvement Amendments.

~~(B) There is established the Health Information Exchange Strategy Development Committee to make recommendations on the development of a statewide HIE strategy that is intended to promote interoperability for purposes of improving patient safety, eliminating redundant or unnecessary testing, and increasing the efficiency of the healthcare system. The committee shall assess other states' approaches to governing, financing, and implementing their statewide HIE efforts, including enhanced funding made available through the Centers for Medicare and Medicaid Services or other relevant agencies, and shall report its findings and recommendations to the Governor, the Chairman of the House Ways and Means Committee, and the Chairman of the Senate Finance Committee no later than November 15, 2021. The committee shall consider and leverage the capabilities of existing exchanges and organizations already present in South Carolina and shall solicit and evaluate the input of appropriate stakeholders, including but not limited to, those represented on the committee. Upon the request of the committee, the~~

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department shall furnish staff and other necessary resources to support the work of the committee, which shall be comprised of the following:

- ~~(1) — the director of the Revenue and Fiscal Affairs Office or his designee, who shall serve as chair;~~
 - ~~(2) — the director of the Department of Health and Human Services or his designee;~~
 - ~~(3) — the director of the Department of Health and Environmental Control or his designee;~~
 - ~~(4) — the president of the Medical University of South Carolina or his designee;~~
 - ~~(5) — the CEO of the South Carolina Hospital Association or his designee;~~
 - ~~(6) — the CEO of the South Carolina Medical Association or his designee;~~
 - ~~(7) — the CEO of the South Carolina Primary Health Care Association or his designee;~~
- and
- ~~(8) — an individual with substantial HIE experience, who shall be appointed by the Governor.~~

~~(C) The department shall be authorized to use any of its available and uncommitted funds to develop, submit, or implement any advance planning documents or other similar plans in furtherance of a statewide HIE strategy, and to secure any available federal funding. The department shall expeditiously prepare and submit any such documents or plans, particularly if necessary to meet any federal deadlines.~~

~~*(B) The department is authorized to award any grants, contracts, and/or other agreements that it deems to be in furtherance of the recommendations of the Health Information Exchange Strategy Development Committee established pursuant to Act 94 of 2021 or other initiative it deems appropriate to facilitate the useful exchange of health information.*~~

- 117.92 AMEND** (GP: BabyNet Quarterly Reports) Requires quarterly reports on a common template be submitted by the School for the Deaf and Blind, DDSN, DHHS, DMH, and DSS to the Chairmen of the House Ways and Means Committee and Senate Finance.
WMC: AMEND proviso to delete DSS from the reporting requirement.
HOU: ADOPT proviso as amended.
SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

117.92. (GP: BabyNet Quarterly Reports) The School for the Deaf and Blind, the Department of Disabilities and Special Needs, the Department of Health and Human Services, and the Department of Mental Health ~~and the Department of Social Services~~ shall each provide on a common template, a quarterly report to the Chairman of the House Ways and Means Committee and the Chairman of Senate Finance outlining all programs provided by them for BabyNet; all federal funds received and expended on BabyNet and all state funds expended on BabyNet. Each entity and agency shall report on its share of the state’s ongoing maintenance of effort as defined by the US Department of Education under IDEA Part C.

- 117.118 AMEND** (GP: SCRS & PORS Trust Fund) Directs that the funds allocated to PEBA for the SCRS or PORS Trust Funds be credited toward contributions due from participating employers in those systems for FY 2021-22; directs that no credits shall be issued for covered employees of special purpose districts, joint authorities, non-profits, hospitals, participating associations or service organizations as defined in Section 9-1-10(11)(e) [RETIREMENT SYSTEMS DEFINITIONS], and state employees whose salaries are paid with federal funds. Directs that the SC Ports Authority, the SC Public Service Authority, and the Medical University Hospital Authority are excluded from this prohibition. Directs PEBA to collaborate with DOA, EBO, and RFA to determine the amount of credit exclusion for federally funded state employees.
WMC: AMEND proviso to update fiscal year reference to “2022-23.”

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HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

117.118. (GP: SCRS & PORS Trust Fund) Unless otherwise provided in Paragraphs A through D of this provision, the funds appropriated to the Public Employee Benefit Authority (PEBA) for the South Carolina Retirement System Trust Fund and the Police Officers' Retirement System Trust Fund in Part IA, Section 108 of this act shall be credited toward the contributions due from participating employers in SCRS and PORS for Fiscal Year ~~2021-22~~ 2022-23. Each employer's credit shall be determined at the same rate as calculated by PEBA for the pension funding allocation credit for Fiscal Year 2017-18. A participating employer shall not receive a credit that exceeds the employer contributions due from the employer.

(A) From the funds available for allocation pursuant to this provision, no credits shall be issued for covered employees of special purpose districts, joint authorities, or non-profit corporations; however, this provision does not apply to the South Carolina State Ports Authority and the South Carolina Public Service Authority.

(B) From the funds available for allocation pursuant to this provision, no credits shall be issued for covered employees of hospitals; however this provision does not apply to the Medical University Hospital Authority.

(C) From the funds available for allocation pursuant to this provision, no credits shall be issued for covered employees of participating associations or service organizations as defined in Section 9-1-10(11)(e) of the 1976 Code.

(D) From the funds available for allocation pursuant to this provision, no credits shall be issued for state employees who are funded with federal funds. The Public Employee Benefits Authority shall collaborate with the Department of Administration, Executive Budget Office and the Revenue and Fiscal Affairs Office to determine the amount of credit exclusion for federally-funded employees of state agencies.

117.144 AMEND (GP: Statewide Mobile Health Units Coordination Project) Authorizes the SC Center for Rural and Primary Healthcare to (1) identify and maintain a directory of currently operating mobile health units rather than to analyze currently operating clinics and identify relevant stakeholders; (2) offer technical assistance to the units as requested; and (3) direct the center to also partner with DHEC to develop coordinating systems, training, and health education services. **WMC:** AMEND proviso to update fiscal year reference to "2022-23" and include DHHS in the partnership with DHEC.

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

117.144. (GP: Statewide Mobile Health Units Coordination Project) For Fiscal Year ~~2021-22~~ 2022-23, the South Carolina Center for Rural and Primary Healthcare may provide coordination and requested technical assistance to mobile health units in South Carolina, in order to coordinate statewide delivery of services to increase access to preventative and diagnostic health care, and reduce health inequities for rural, vulnerable, underserved, and displaced populations in South Carolina. To support this goal, the South Carolina Center for Rural and Primary Healthcare shall: 1) be authorized to identify and maintain a directory of currently operating mobile health units, the areas of the state in which they serve, and the scope of services they provide; 2) offer technical assistance to these units, and any established in the future, in the form of operational, technical, or logistical guidance and consultation as requested; and 3) partner with The University of South Carolina Salkehatchie and Denmark Technical College, along with other public institutions of higher education and organizations, *the Department of Health and Human Services*, and the Department of Health and Environmental Control to develop

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coordinating systems, support, training and health education services. The center shall be available to assist and support implementation strategies driven by local, regional, and state data and research and aligned efforts, and may provide organization and collaboration among mobile health units and any units that may begin operating in the future. The mobile health units may collaborate with the South Carolina Center for Rural & Primary Healthcare, and other partners, in these efforts.

117.149 CONFORM TO FUNDING/AMEND FURTHER (GP: Employee Compensation) Provides a plan to distribute employee pay increases for FY 2021-22 in the amount of 2.5%. Direct EBO to review Executive Branch agencies in FY 2021-22 to determine whether their budgets warrant an increase in other fund authorization due to the 2.5% pay raise and if so, to work with the Comptroller General to increase the authorization for the affected agencies. Direct that allocations associated with the increases for retirement employer contributions be based on the rate of the retirement system in which employees participate. Authorize the use of excess funding for statewide employer contributions for other statewide purposes and allow the unexpended funds to be carried forward.

WMC: AMEND proviso to update the distributed pay increase from 2.5% to 3%. Deletes the requirement that Area Agencies on Aging compensation be increased and the requirement that no pay increase will be allowed for local councils or providers on aging.

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: CONFORM TO FUNDING/AMEND FURTHER to update fiscal year reference to “2022-23.”

117.149. (GP: Employee Compensation) The amounts appropriated to F300-Statewide Employee Benefits for Employee Pay Increases must be allocated by the Department of Administration, Executive Budget Office to the various state agencies to provide for employee pay increases in accordance with the following plan:

(1) With respect to classified and non-judge judicial classified employees, effective on the first pay date that occurs on or after July first of the current fiscal year, the compensation of all classified employees shall be increased by ~~two and one half~~ three percent.

(2) With respect to unclassified and non-judge judicial unclassified employees or unclassified executive compensation system employees not elsewhere covered in this act, effective on the first pay date that occurs on or after July first of the current fiscal year the compensation of all unclassified employees shall be increased by ~~two and one half~~ three percent. Any employee subject to the provisions of this paragraph shall not be eligible for compensation increases provided in paragraphs 1, 3, 4, 5, or 6.

(3) With respect to unclassified employees of institutions of higher education and technical colleges eligible in this item, institutions and technical colleges are authorized to allot the total funds for compensation increases among individual employees without uniformity. The funds provided for compensation increases for any employee subject to the provisions of this item are based on an annual average ~~two and one half~~ three percent increase and may be based on performance.

(4) Effective on the first pay date that occurs on or after July first of the current fiscal year, agency heads not covered by the Agency Head Salary Commission, shall receive an annualized base pay increase of ~~two and one half~~ three percent.

(5) With respect to local health care providers, compensation increases shall be ~~two and one half~~ three percent effective on the first pay date that occurs on or after July first of the current fiscal year. ~~With respect to Area Agencies on Aging funded by the Department on Aging, compensation shall be increased by two and one half percent effective on the first pay date that occurs on or after July first of the current fiscal year. With respect to local councils on aging or~~

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local providers of services funded by the Department on Aging through Area Agencies on Aging, no pay increases will be allowed. School Bus Driver salary and fringe funding to school districts shall be increased by ~~two and one half~~ three percent.

(6) Effective on the first pay date that occurs on or after July first of the current fiscal year, the Chief Justice and other judicial officers shall receive an annualized base pay increase of ~~two and one half~~ three percent.

(7) Effective on the first pay date that occurs on or after July first of the current fiscal year, county auditors and county treasurers shall receive an annualized base pay increase of ~~two and one half~~ three percent.

For Fiscal Year ~~2021-22~~ 2022-23, the Executive Budget Office is directed to review Executive Branch agencies to determine whether their budgets warrant an other fund authorization increase due to the ~~two and one half~~ three percent compensation increase for all full-time employees. If so warranted, the Executive Budget Office shall work with the Office of the Comptroller General to increase such authorization for the affected agencies.

The Department of Administration shall allocate associated compensation increases for retirement employer contributions based on the retirement rate of the retirement system in which individual employees participate.

The Executive Director of the State Fiscal Accountability Authority is authorized to use excess appropriations for the current fiscal year designated for statewide employer contributions for other statewide purposes. At the discretion of the Executive Director of the State Fiscal Accountability Authority, such action may be considered a permanent transfer into the receiving agency's base budget.

Funds appropriated in Part IA, F300, Section 106, Statewide Employee Benefits may be carried forward from the prior fiscal year into the current fiscal year.

117.153 AMEND FURTHER (GP: Behavioral Health Capacity) Directs DMH, DHHS, DHEC, DAODAS, and other relevant agencies to coordinate efforts to ensure that the statewide system for delivery of mental health services is: structured to provide a range of treatment options and settings appropriate to meet patient needs; responsive to changes in federal laws, regulations, or policies; and is economical. Directs DMH to use funds from the COVID-19 Response Reserve Account to increase access to crisis stabilization services; introduce crisis stabilization units to previously unserved area; and expand its program to provide hospital-level care for indigent patients. Directs the DHHS director, after consulting with the DMH director, to establish coverage and reimbursement policies for mobile crisis stabilization and intensive outpatient services. Authorizes DHHS to use funds for the initial capital costs of establishing crisis stabilization units. Directs the Data Oversight Council to established data collection procedures. Direct the DHHS director, with support from other state health agency directors, to assess opportunities to improve substance use disorder or serious mental illness treatments. Authorizes the DHHS director to apply for a state planning grant and to pursue necessary state plan amendments and/or waivers.

WMC: AMEND proviso to direct DHHS to coordinate with DMH, DHEC, DAODAS, and other relevant agencies to examine effectiveness in the existing statewide system for the delivery of Medicaid and non-Medicaid behavioral health services. Adds the ensuring the statewide system for delivery of behavioral services is compliant with Section 44-9-90(7) [POWERS AND DUTIES OF MENTAL HEALTH COMMISSION] to the list of effectiveness to evaluate. Directs DHHS with the support of DMH to assess gaps in coverage of care, crisis stabilization, and other behavioral health services and deletes the requirement that DMH carry out this effort. Directs DHHS, upon the assessment, to establish coverage and reimbursement policies to address deficiencies and improve behavioral health services. Provides for the strategies and policies that may be piloted to improve behavioral health services. Requires the Data Oversight Council, DHEC, and any

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other state agency to provide information on behavioral health service to DHHS if requested. Deletes the abilities listed for alternative options for treating individuals with substance use disorders and serious mental illnesses and the grant DHHS was authorized to apply for after evaluation of these options. Directs DHHS, DJJ, and DMH to ensure access to “no eject, no reject” services is restored to children and adolescents who require this specific care. Directs DMH to examine ways to convert state-funded indigent care to a sustainable reimbursement model improving access to behavioral health treatment while reducing their reliance on state funds, and to provide a report on the results of this examination. Directs DMH to also contract for an independent review of its revenue cycle and ensure its compliance with hospital price transparency rules. Requires DHHS, with support of SDE and DMH, to improve access to and the quality of school-based behavioral health services and identify the disparities and availability of the care and provides for the requirements of this effort. Authorizes DHHS to establish and fund various pilot projects or initiatives intended to develop the health care workforce and provides for the requirements of this effort. Directs DHHS to consult with DMH to assess the feasibility and potentially establish a statewide system for near-real time tracking of in-patient psychiatric hospital beds and crisis stabilization beds and provides for the requirements of such system. Authorizes DHHS to enter contracts and agreements, offer grants, and otherwise expend funds, establish demonstration projects, develop policies and procedures to assure accountability in the expenditure of these funds, and apply for federal matching when available. Requires DHHS to report annually to the Senate Finance Committee and House Ways and Means Committee on the expenditures made under this provision. Allows funds appropriated for Behavioral Health Capacity to be retained by DHHS and carried forward to be expended for any purpose in this provision.

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: AMEND proviso further to direct that crisis stabilization unit facilities are eligible for licensure under Regulation 61-125 without being owned or operated by DMH.

117.153. (GP: Behavioral Health Capacity) (A) The Department of ~~Mental Health and Human Services, in coordination with~~ the Department of ~~Mental Health and Human Services~~, the Department of Health and Environmental Control, the Department of Alcohol and Other Drug Abuse Services, and all other relevant agencies shall ~~coordinate their efforts to ensure that the statewide system for the delivery of mental health services required by Section 44-9-90(7) of the 1976 Code is~~ examine and analyze the existing statewide system for the delivery of Medicaid and non-Medicaid behavioral health services to assess the system's effectiveness in:

(1) ~~structured so as to provide~~ providing a range and supply of treatment options and settings that are appropriate to meet the varying needs of individual patients;

(2) being responsive to changes in federal law, regulation, or policy that improve access to care and/or associated reimbursement, particularly where related to the treatment of patients in Institutions for Mental Disease (IMDs); ~~and~~

(3) being economical in its approach, so as to obtain the greatest value possible for each state taxpayer dollar; and

(4) ensuring that the statewide system for the delivery of behavioral health services complies with the requirements of Section 44-9-90(7) of the 1976 Code.

(B) With the ~~funds appropriated for Inpatient Services and/or made available from the COVID-19 Response Reserve account established pursuant to Act 135 of 2020,~~ support of the Department of Mental Health, the Department of Health and Human Services shall undertake an effort to assess existing gaps in coverage for or the supply of inpatient psychiatric care, increase access to crisis stabilization, and other inpatient or outpatient behavioral health services. Based upon this assessment, the Department of Health and Human Services shall establish, or with the

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full cooperation of any other requested state agency, request the establishment of coverage and reimbursement policies that it deems necessary to address existing deficiencies and bring about a more comprehensive and effective continuum of behavioral health care in South Carolina. Priorities for this effort may be piloted on a regional basis and shall include, but not be limited to:

(1) increasing the number of beds available to provide inpatient psychiatric care, with emphasis on communities with the greatest current need, and using the appropriate combination of new construction, augmentation or reconfiguration of existing facilities, or contracting with psychiatric or acute care hospitals to obtain short-term capacity;

~~(1)(2)~~ The department shall increase the number of operating ~~establishing~~ crisis stabilization units and introduce them to ~~beds and services to provide needed short-term medication, counseling, and other support in~~ previously unserved areas of the State, working toward the goal of having at least one such unit located ~~such services available~~ within a 90-minute drive of each South Carolinian, and with coverage and reimbursement being funded through Medicaid for its beneficiaries or through the Department of Mental Health for indigent care, regardless of the provider of these services;. In each case, the department may choose to operate the unit independently or through a partnership with one or more partners and/or contractors. The department shall engage with community stakeholders in identifying new host communities and developing referral and discharge strategies.

(2) The department may also use these funds to expand its program to contract with psychiatric and acute care hospitals to place indigent patients who need hospital level care in hospitals' general or psychiatric beds on a temporary basis during a crisis.

(3) formalizing and expanding the coverage of claims-based mobile crisis stabilization services that offer rapid and intensive interventions intended to stabilize individuals at the sites of behavioral health crises;

(4) developing one or more regional dedicated psychiatric emergency departments, operating twenty-four hours per day, seven days per week to effectively evaluate and triage patients experiencing acute behavioral health emergencies;

(5) developing effective referral and discharge strategies and engaging with existing community providers to ensure that sufficient outpatient services, case management services, and standards of care are in place;

(6) leveraging and building upon existing telehealth capacity to support and extend outpatient services; and

(7) promoting the development of in-state treatment options for specific behavioral health conditions for which patients are routinely placed out-of-state due to an insufficiency of treatment options or settings in South Carolina.

(C) After consulting with the Director of the Department of Mental Health, the Director of the Department of Health and Human Services shall establish such coverage and reimbursement policies for mobile crisis stabilization, and/or intensive outpatient services as he deems necessary and appropriate to fulfill the intent of this provision. These policies shall facilitate the claiming of matching funds where feasible. Any state funds saved through this effort shall remain committed to the provision of care to patients with behavioral health needs. With funds available to the department, the Department of Health and Human Services shall be authorized to provide as much as one hundred thousand dollars per bed towards the initial capital costs of establishing crisis stabilization units pursuant to this provision. The Department of Mental Health shall supply information in the format specified by the Department of Health and Human Services for this purpose. The Executive Director of the Public Employee Benefit Authority shall be encouraged to consult with the Director of the Department of ~~Mental Health and Human Services~~ to make appropriate coverage and reimbursement policy changes to ensure proper access to ~~mobile crisis and crisis stabilization~~ behavioral health services for covered beneficiaries.

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(D) The Data Oversight Council, established pursuant to Section 44-6-170 of the 1976 Code, shall undertake whatever rulemaking is necessary to ensure that the data on the utilization of crisis stabilization units are collected in a manner generally consistent with the requirements for general acute care hospitals and specialized hospitals, so that the effectiveness of these services may be properly evaluated. The Data Oversight Council, Department of Health and Environmental Control, and any other state agency shall, upon the request of and in the format specified by the Department of Health and Human Services, furnish information on behavioral health service demand, utilization, or financing needed to facilitate the implementation of this provision.

(E) With the support of the Director of the Department of Mental Health, the Director of the Department of Alcohol and Other Drug Abuse Services, and any other identified agency head, the Director of the Department of Health and Human Services shall evaluate opportunities to improve and/or coordinate treatment capacity for individuals diagnosed with substance use disorder and/or serious mental illness including, but not limited to, options established pursuant to Sections 1115, 1915(l), and/or 1947 of the Social Security Act or made available to states by the Centers for Medicare and Medicaid Services through State Medicaid Director Letters 17-003, 18-011, or 19-0003. ~~These options shall be evaluated based substantially upon criteria such as their relative abilities to:~~

~~(1) increase behavioral health treatment capacity at the inpatient, partial hospitalization, intensive outpatient, and/or outpatient levels of care;~~

~~(2) obtain federal matching funds to help offset the costs of state-funded treatment for substance use and/or mental health treatment; and~~

~~(3) convert indigent care to a sustainable reimbursement model that improves access to behavioral health and/or substance use treatment while potentially alleviating pressure on the state general fund and reducing levels of uncompensated care.~~

~~(F) After or while completing the evaluation required by subsection (E), the Director of the Department of Health and Human Services shall be authorized to apply for a state planning grant pursuant to Section 1947(e) of the Social Security Act and pursue any necessary implementing state plan amendments and/or waivers. Copies of the public notices accompanying these actions shall be furnished to the Chairman of the House Ways and Means Committee and the Chairman of the Senate Finance Committee. In consultation with the Department of Juvenile Justice and the Department of Mental Health, the Department of Health and Human Services shall ensure that access to "no eject, no reject" services is restored for children and adolescents requiring care in a private residential treatment facility.~~

(G) To ensure that individuals requiring behavioral health services are protected from unexpected or excessive billings, the Department of Mental Health shall examine ways to convert state-funded or DSH-funded indigent care to a sustainable reimbursement model that improves access to behavioral health treatment while potentially reducing uncompensated care levels and the department's reliance on state funds. In the current fiscal year, the department shall report to the Chairmen of the Senate Finance Committee and the House Ways and Means Committee on the results of this examination and the actions taken to address any findings. The department also shall:

(1) contract for an exhaustive independent review of its entire revenue cycle, to eliminate inefficiencies and improve business processes, ensure that bills are produced on a timely and accurate basis, and assess and maximize the proportion of the time during which the department's clinicians and providers are rendering chargeable treatment services to the State's citizens; and

(2) ensure its immediate and ongoing compliance with the hospital price transparency rules established at 45 C.F.R. Part 180, and also meet its obligation to provide certain patients

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with good faith estimates as required by the No Surprises Act, P.L. 116-260, and subsequent regulation.

(H) With the support and participation of the Department of Education and the Department of Mental Health, and with the intent of assuring access to behavioral health services to every student in the State through either a public or private provider, the Department of Health and Human Services must lead a comprehensive effort to improve access to and the quality of school-based behavioral health services in South Carolina, while identifying and taking steps to address community-level disparities in the availability of this care. This effort shall include, but not be limited to:

(1) the performance of a comprehensive review of Medicaid and non-Medicaid school-based behavioral health services in South Carolina, including an assessment of the availability of such services and the identification of any barriers to access, such as coverage and reimbursement rules, billing practices, other insurer policies, state agency, school district rules or procedures, or provider shortages;

(2) a revisitation of existing coverage policies for medically necessary services provided to children, including those with or without a disability determination, and whether those services are or are not required by a child's individualized education plan or individualized family services plan, whether they do or do not arise from a referral under the Early and Periodic Screening, Diagnostic, and Treatment program, and in the context of State Medicaid Director Letter 14-006;

(3) the rescission of any Medicaid or PEBA policies that deny coverage, solely on the basis that those services are being provided within a school or through a telehealth encounter that originates in a school, of medically necessary outpatient services that have been furnished to eligible children by enrolled and qualified providers;

(4) the issuance of any new Medicaid policies needed to durably enshrine any appropriate telehealth coverage that had been authorized on a temporary basis during the public health emergency;

(5) a review of statewide and school district-level policies and practices relating to suicide risk referral protocols and behavioral health training for student-facing personnel in schools; and

(6) reporting to the Chairman of the Senate Finance Committee and the Chairman of the House Ways and Means Committee on any other relevant potential policy changes that the Director of the Department of Health and Human Services believes would advance the intent of this provision, but which would have a fiscal impact that is sufficiently substantial to require the General Assembly's direct consideration in the future.

(I) The Department of Health and Human Services is authorized to establish programs and/or fund in whole or in part, including through the potential use of CHIP Health Services Initiatives, various pilot projects or other initiatives that are intended to develop the health care workforce in South Carolina. Such efforts must be targeted toward current or future providers who demonstrate, by whatever means is selected by the department, commitments to remaining in-state and including Medicaid beneficiaries among their patients. The development of the behavioral health workforce shall be prioritized, although the department may also address other provider classes, such as respiratory therapists, for which shortages have been highlighted and/or exacerbated by the public health emergency. Further consideration also should be given to attracting additional qualified preceptors and increasing opportunities for clinical rotations. The department may partner with or enlist the support of the Technical College System, Area Health Education Centers, and/or Student Loan Corporation in designing or administering these programs and, where appropriate, is encouraged to structure them as public-private partnerships in conjunction with the state's hospital and health systems and other key employers of health providers.

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~~(G)~~(J) If either the Director of the Department of Mental Health or the Director of the Department of Health and Human Services finds that state personnel and/or procurement rules are limiting his ability to fulfill the intent of this provision, he shall notify the State Fiscal Accountability Authority of this in writing and request whatever exemptions are necessary to ensure that clinical staff may be recruited, retained, and/or contracted for so as to provide greater access to behavioral health treatment.

~~(H)~~(K) In consultation with the Department of Mental Health, the Department of Health and Human Services shall assess the feasibility of, and if warranted, take steps to establish or obtain through grant, contract, subscription, or other procurement, a statewide system for the near-real time tracking of in-patient psychiatric hospital beds and crisis stabilization beds. This system should be generally designed to draw data from providers' existing electronic medical record systems and make summary-level data available to authorized users within state agencies, participating provider organizations, and any others to be specified by the Department of Health and Human Services, for the purposes of managing critical resources and ensuring that patients may be promptly treated in the most effective and clinically appropriate setting. To protect patient privacy and ensure HIPAA compliance, the system may only collect information on the types, counts, and availability of beds, or other categorical or aggregated information, as opposed to individually identifying patient details. In partnership with the following named agencies, the Department of Health and Human Services may also explore and pursue the use of such a system:

(1) to meet the emergency preparedness and disaster recovery requirements of the Department of Health and Environmental Control and the Emergency Management Division that are currently met by the Bed Availability Report Tracking system; and/or

(2) to augment or replace the capabilities of the Department on Aging's GetCareSC website.

(L) From the funds appropriated to or otherwise made available to it, the Department of Health and Human Services is authorized to procure, enter into contracts and agreements, offer grants, and otherwise expend funds as well as establish demonstration projects in one or more areas of the state to encourage and promote necessary infrastructure and investment to achieve the objectives set out in this provision. The department shall develop policies and procedures as necessary to assure accountability in the expenditure of these funds and apply for federal matching funds when appropriate and available. The department shall report annually to the Senate Finance Committee and the House Ways and Means Committee on all expenditures made under this provision.

~~(M) A Crisis stabilization unit-facility facilities established or funded pursuant to this provision shall be deemed to have met the operation or partnership terms of Section 101.K. and Section 102.G. of eligible for licensure under Regulation 61-125 without being owned or operated by the Department of Mental Health. Such a facility and any other facility funded or established pursuant to this provision is a DMH facility for purposes of Section 44-7-170(B)(2), even if it is constructed and/or operated by one or more private entities.~~

(N) Funds appropriated for Behavioral Health Capacity may be retained by the Department of Health and Human Services and carried forward to be expended for any purpose specified in this provision.

117.154 AMEND (GP: Mental Health Transportation) Directs that funds appropriated to DMH for the Alternative Transportation Program be used to transport individuals pursuant to Article 5, Chapter 17, Title 44 [CUSTODY AND ADMISSION OF PERSONS REQUIRING IMMEDIATE CARE]. Authorizes these funds to be carried forward and used for the same purposes. Directs the DMH director to work with the SFAA Division of Procurement Services to develop and issue a RFP for an Alternative Transportation Program to provide transportation services for

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nonviolent individuals that require immediate hospitalization. Directs the Division of Procurement Services to allow stakeholders to provide recommendations on the scope and structure of the program pursuant to certain provisions. Directs the authority to provide a report by January 15, 2022, to the Governor and the Chairmen of the House Ways and Means and Senate Finance Committees on program implementation and any projected cost overrun.

WMC: AMEND proviso to update calendar reference to “2023.”

HOU: ADOPT proviso as amended.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT proviso as amended.

117.154. (GP: Mental Health Transportation) (A) Funds appropriated to the Department of Mental Health for the Alternative Transportation Program shall exclusively be used to support the transportation of individuals pursuant to Article 5, Chapter 17, Title 44 of the 1976 Code and as defined herein. These funds may be carried forward and expended for the same purpose.

(B) As soon as practicable within the current fiscal year, the Director of the Department of Mental Health shall cooperate with the Division of Procurement Services of the State Fiscal Accountability Authority in the development and issuance of a Request for Proposals (RFP) for an Alternative Transportation Program that provides transportation services for nonviolent individuals requiring immediate hospitalization as described in Article 5, Chapter 17, Title 44 of the 1976 Code. The purpose of the RFP shall be to seek proposals from qualified private providers to provide timely, safe, and secure transportation for such individuals. Before finalizing the RFP, the Division of Procurement Services shall provide relevant stakeholders with an opportunity to provide recommendations on the scope and structure of the Alternative Transportation Program, subject to the following provisions:

(1) The program shall initially be made available within a pilot region to be identified by the authority in consultation with the Department of Mental Health. Subject to the authority’s judgment, the RFP shall be structured so as to accommodate subsequent awards and/or contract amendments to serve other regions of the State, in which case, only one vendor shall be selected in each region, but a single vendor may be selected to provide services in multiple or all regions.

(2) In structuring the initial pilot, the authority shall endeavor to provide the availability of the Alternate Transportation Program in an optimal service area at an annualized cost that does not exceed the amount appropriated for this purpose.

(3) The RFP shall be conducted as provided for under the South Carolina Consolidated Procurement Code.

(4) Upon implementation, the Alternative Transportation Program must be available on a 24-hour basis every day of the year.

(5) Drivers must pass a criminal background check and complete relevant and appropriate training prior to furnishing services.

(6) Transportation vehicles must be secure but nondescript and drivers must be clothed in professional attire that does not resemble a law enforcement uniform.

(C) When transportation is provided through this Alternative Transportation Program, the written agreement described in Section 44-17-440(A) of the 1976 Code shall not be required.

(D) No later than January 15, ~~2022~~ 2023, the authority shall provide the Governor, the Chairman of the House Ways and Means Committee, and the Chairman of the Senate Finance Committee with a report on the implementation of this program. The report shall include a projection of the annualized amount by which the cost of a statewide Alternative Transportation Program might, at full implementation, exceed the amount appropriated for the program in the current fiscal year.

117.163 DELETE (GP: Justice Forty Oversight Committee) **WMC:** ADD new proviso to create a thirteen member Justice Forty Oversight Committee to address environmental justice in South

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Carolina and factors causing environmental injustice in communities. Provides for the composition, staffing, responsibilities, and guidelines of the study committee. Requires a report to be provided by June 30, 2023.

HOU: ADOPT new proviso.

SFC SUBCOMMITTEE RECOMMENDATION: DELETE proviso.

~~*117.163. (GP: Justice Forty Oversight Committee) (A) There is created a thirteen member Justice Forty Oversight Committee within state government to study opportunities to address the issue of environmental justice in South Carolina. The study committee shall be chaired by the Director of Environmental Affairs at the Department of Health and Environmental Control and shall:*~~

~~*(1) identify disadvantaged and marginalized communities throughout South Carolina with environmental justice impact;*~~

~~*(2) identify the infrastructure deficiencies in these communities;*~~

~~*(3) assist members of the community in developing a plan to apply for assistance to secure funding for infrastructure projects; and*~~

~~*(4) undertake other actions necessary to carry out the purpose of the committee.*~~

~~*(B) The study committee shall be comprised of:*~~

~~*(1) two members of the House of Representatives who serve on the Joint Bond Review Committee appointed by the Chairman of the House Ways and Means Committee;*~~

~~*(2) two members of the Senate who serve on the Joint Bond Review Committee appointed by the Chairman of the Senate Finance Committee;*~~

~~*(3) the Director of Environmental Affairs for the Department of Health and Environmental Control or his designee;*~~

~~*(4) the Director of the Office of Regulatory Staff or his designee;*~~

~~*(5) the Director of the Housing Finance and Development Authority or his designee;*~~

~~*(6) the Director of the South Carolina Primary Health Care Association or his designee;*~~

~~*(7) the Commissioner of Agriculture or his designee;*~~

~~*(8) a member of the White House Environmental Justice Advisory Council;*~~

~~*(9) the Secretary of Transportation or his designee; and*~~

~~*(10) two members appointed by the Governor with experience in the designation and implementation of Opportunity Zones.*~~

~~*(C) The study committee shall work with any other appropriate entities while undertaking its assigned duties.*~~

~~*(D) The House of Representatives and the Senate shall provide appropriate staffing for the committee.*~~

~~*(E) The study committee shall provide a report to the House Ways and Means Committee, the Senate Finance Committee, the White House Council on Environmental Quality, and the White House Environmental Justice Advisory Council by June 30, 2023, at which time the study committee shall be dissolved.*~~

117.165 ADD (GP: Disinfection and Cleaning) WMC: ADD new proviso to allow agencies and political subdivisions to utilize federal funds to implement cleaning, sanitization, and disinfection to meet the most current requirements issued by DHEC. Allows the plans to be separate from standard cleaning procedures and may include additional steps to proactively address disinfection and sanitization in public areas.

HOU: ADOPT new proviso.

SFC SUBCOMMITTEE RECOMMENDATION: ADOPT new proviso.

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117.165. (GP: Disinfection and Cleaning) For the current fiscal year, agencies and political subdivisions, including public school districts, may utilize federal funds authorized by the General Assembly to implement or procure cleaning, sanitization, and disinfection that, at a minimum, meets the most current requirements issued by the Department of Health and Environmental Control. These plans may be separate from standard cleaning procedures implemented and may include additional steps to address disinfection and sanitization of all surfaces in public areas on a proactive, recurring basis to mitigate the impact of any COVID-19 strains, as well as other communicable diseases.

SECTION 118 - X910 - STATEWIDE REVENUE

118.15 DELETE (SR: Nonrecurring Revenue) Appropriates non-recurring revenue to various agencies for Fiscal Year 2021-22, generated from specific sources.
WMC: DELETE proviso.
HOU: ADOPT deletion.
SFC SUBCOMMITTEE RECOMMENDATION: ADOPT deletion.

118.15. (SR: Nonrecurring Revenue) ~~(A) The source of revenue appropriated in subsection (B) is nonrecurring revenue generated from the following sources:~~

- ~~(1) \$60,298,684 from Fiscal Year 2018-19 Contingency Reserve Fund;~~
- ~~(2) \$396,459,950 from Fiscal Year 2019-20 Undesignated/Unreserved Funds;~~
- ~~(3) \$125,239,577 from Fiscal Year 2020-21 Debt Service Lapse;~~
- ~~(4) \$646,713,463 from projected Fiscal Year 2020-21 unobligated general fund revenue as certified by the Board of Economic Advisors;~~
- ~~(5) \$65,000,000 from CARES Act Reimbursements;~~
- ~~(6) \$20,480,045 from Litigation Recovery Account; and~~
- ~~(7) \$112,895,790 from Estimated Excess Debt Service above Projected Expenditures.~~

~~Any restrictions concerning specific utilization of these funds are lifted for the specified fiscal year. The above agency transfers shall occur no later than thirty days after the close of the books on Fiscal Year 2020-21 and shall be available for use in Fiscal Year 2021-22, except as provided for in item (52)(g).~~

~~This revenue is deemed to have occurred and is available for use in Fiscal Year 2021-22 after September 1, 2021, following the Comptroller General's close of the state's books on Fiscal Year 2020-21, except as provided for in item(52)(g).~~

~~(B) The appropriations in this provision are listed in priority order. Item (1) must be funded first and each remaining item must be fully funded before any funds are allocated to the next item. Provided, however, that any individual item may be partially funded in the order in which it appears to the extent that revenues are available.~~

~~The State Treasurer shall disburse the following appropriations by September 30, 2021, for the purposes stated:~~

- ~~(1) F310— General Reserve Fund
General Reserve Fund Contribution \$18,723,614;~~
- ~~(2) Y140— State Ports Authority
Intermodal Container Transfer Facility and Waterborne
Cargo Infrastructure..... \$200,000,000;~~
- ~~(3) H630— Department of Education
Capital Funding for Disadvantaged Schools..... \$100,000,000;~~
- ~~(4) H640— Governor's School for the Arts and Humanities
(a) Chiller and Boiler Replacement..... \$ 415,000;~~

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	(b) HVAC Split System Replacement	\$ 150,000;
	(c) IT Server Replacement	\$ 90,000;
	(d) GSAH Drama Theatre Lighting.....	\$ 66,300;
	(e) GSAH Dance Studio Floor Upgrade	\$ 86,000;
(5)	H670—Education Television Commission Datacasting Initiative	\$ 1,320,232;
(6)	H710—Wil Lou Gray Opportunity School (a) Security Cameras and Keyless Entry.....	\$ 200,000;
	(b) Classroom Security Improvements and Flooring	\$ 300,000;
(7)	H950—State Museum Commission (a) Permanent Gallery Renovation Phase II.....	\$ 3,750,000;
	(b) Planetarium Technology Upgrade	\$ 350,000;
	(c) Museum Website	\$ 150,000;
	(d) Wi-Fi Expansion.....	\$ 70,000;
	(e) Security Camera System.....	\$ 70,000;
	(f) Firewall Replacement	\$ 35,000;
(8)	H960—Confederate Relic Room and Military Museum Commission High Density Mobile Storage Unit.....	\$ 180,000;
(9)	L120—Governor’s School for Agriculture at John De La Howe De la Howe Hall Renovation	\$ 6,600,000;
(10)	H090—The Citadel (a) Maintenance, Renovation, and Replacement.....	\$ 2,860,201;
	(b) Stevens Barracks Update and Replacement.....	\$ 3,500,000;
(11)	H120—Clemson University Maintenance, Renovation, and Replacement.....	\$22,630,332;
(12)	H150—University of Charleston Maintenance, Renovation, and Replacement.....	\$10,729,884;
(13)	H170—Coastal Carolina University Maintenance, Renovation, and Replacement.....	\$ 7,899,283;
(14)	H180—Francis Marion University (a) Maintenance, Renovation, and Replacement.....	\$ 4,958,113;
	(b) School of Education/School of Business Building	\$17,000,000;
	(c) Site Development—Medical Education Collaborative with MUSC and USC.....	\$21,000,000;
(15)	H210—Lander University (a) Maintenance, Renovation, and Replacement.....	\$ 5,214,471;
	(b) Nursing Building	\$ 5,000,000;
(16)	H240—South Carolina State University Maintenance, Renovation, and Replacement.....	\$ 3,001,862;
(17)	H270—University of South Carolina—Columbia (a) School of Medicine Relocation	\$10,000,000;
	(b) Maintenance, Renovation, and Replacement.....	\$19,000,000;
	(c) Horry Guignard House Renovation.....	\$ 1,350,000;
(18)	H290—University of South Carolina—Aiken Maintenance, Renovation, and Replacement.....	\$ 9,761,866;
(19)	H340—University of South Carolina—Upstate Maintenance, Renovation, and Replacement.....	\$ 8,740,816;
(20)	H360—University of South Carolina—Beaufort Maintenance, Renovation, and Replacement.....	\$ 2,848,396;
(21)	H370—University of South Carolina—Lancaster	

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	Maintenance, Renovation, and Replacement.....	\$ 2,998,490;
(22)	H380—University of South Carolina—Salkehatchie Maintenance, Renovation, and Replacement.....	\$ 1,344,092;
(23)	H390—University of South Carolina—Sumter Maintenance, Renovation, and Replacement.....	\$ 7,750,000;
(24)	H400—University of South Carolina—Union Maintenance, Renovation, and Replacement.....	\$ 1,678,007;
(25)	H470—Winthrop University Maintenance, Renovation, and Replacement.....	\$ 9,188,419;
(26)	H510—Medical University of South Carolina (a) Maintenance, Renovation, and Replacement.....	\$20,000,000;
	(b) Hospital Authority—SC Children’s Hospitals Infrastructure	\$10,000,000;
(27)	H590—State Board for Technical and Comprehensive Education (a) Aiken Technical College Maintenance, Renovation, and Replacement	\$ 3,256,722;
	(b) Central Carolina Technical College Maintenance, Renovation, and Replacement	\$10,000,000;
	(c) Central Carolina Technical College Academic and Student Services Building	\$13,000,000;
	(d) Denmark Technical College Maintenance, Renovation, and Replacement	\$ 3,000,000;
	(e) Florence-Darlington Technical College Maintenance, Renovation, and Replacement	\$10,997,734;
	(f) Greenville Technical College Maintenance, Renovation, and Replacement	\$14,795,060;
	(g) Horry-Georgetown Technical College Maintenance, Renovation, and Replacement	\$ 9,195,619;
	(h) Horry-Georgetown Technical College Diesel Training Lab	\$ 500,000;
	(i) Midlands Technical College Maintenance, Renovation, and Replacement	\$12,431,545;
	(j) Midlands Technical College Dual Credit and Quickjobs	\$ 3,500,000;
	(k) Northeastern Technical College Maintenance, Renovation, and Replacement	\$ 3,000,000;
	(l) Orangeburg-Calhoun Technical College Maintenance, Renovation, and Replacement	\$ 3,562,258;
	(m) Orangeburg-Calhoun Technical College Machine Tool Technology Classroom Update	\$ 2,000,000;
	(n) Piedmont Technical College Maintenance, Renovation, and Replacement	\$ 6,893,159;
	(o) Spartanburg Community College Maintenance, Renovation, and Replacement	\$ 6,073,662;
	(p) Spartanburg Community College Union County Campus Building Expansion	\$ 4,800,000;
	(q) Technical College of the Lowcountry Maintenance, Renovation, and Replacement	\$ 3,375,022;
	(r) Technical College of the Lowcountry Culinary Center	\$ 3,500,000;
	(s) Tri-County Technical College Maintenance, Renovation, and Replacement	\$ 8,073,560;

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(t)	Tri-County Technical College Oconee Hall Renovations ...	\$ 5,000,000;
(u)	Trident Technical College Maintenance, Renovation, and Replacement	\$16,306,515;
(v)	Trident Technical College Lowcountry Transportation and Logistics Center	\$ 5,000,000;
(w)	Williamsburg Technical College Maintenance, Renovation, and Replacement	\$ 3,000,000;
(x)	York Technical College Maintenance, Renovation, and Replacement	\$ 6,168,637;
(y)	York Technical College Student Center	\$ 5,860,049;
(28)	J020—Department of Health and Human Services Medicaid Management Information System	\$16,678,434;
(29)	J040—Department of Health and Environmental Control	
(a)	Nursing Program Expansion	\$ 1,000,000;
(b)	Newborn Screening—Act 55 of 2019 and Spinal Muscular Atrophy	\$ 101,128;
(30)	J120—Department of Mental Health	
(a)	State Veterans Nursing Homes Match	\$49,788,352;
(b)	Ligature Resistant Fixture Replacement	\$ 2,310,000;
(c)	Inpatient Services	\$ 2,000,000;
(d)	Alternative Transportation Program	\$ 1,000,000;
(e)	Detention Center Telepsychiatry Team	\$ 843,000;
(f)	Detention Center Medication Fund	\$ 1,000,000;
(g)	Crisis Stabilization Unit Pilot—Midlands	\$ 1,200,000;
(h)	Mental Illness Recovery Center Inc. (MIRCI)	\$ 250,000;
(i)	Coastal Empire Mental Health Center HVAC, Sprinklers, Fire Alarm, and Roof	\$ 1,600,000;
(j)	Crafts Farrow Electrical Distribution System Renovation ..	\$ 1,200,000;
(k)	Waccamaw Center HVAC, Sprinklers, Fire Alarm, and Roof	\$ 1,600,000;
(31)	J160—Department of Disabilities and Special Needs	
(a)	South Carolina Genomic Medicine Initiative at Greenwood Genetic Center	\$ 2,000,000;
(b)	Coastal Regional Center Electrical Grid	\$ 1,500,000;
(c)	Community Housing Pilot Program for Aging Consumers ..	\$ 750,000;
(32)	J200—Department of Alcohol and Other Drug Abuse Services Local Center Staff Retention and Operations	\$ 2,500,000;
(33)	L040—Department of Social Services	
(a)	Title IV-E Revenue Replacement	\$ 9,000,000;
(b)	SCCADVASA	\$ 500,000;
(c)	Infrastructure Integrity	\$11,713,430;
(d)	Children’s Law Center	\$ 1,500,000;
(34)	L080—Department of Children’s Advocacy Network of Children’s Advocacy Centers	\$ 170,000;
(35)	H790—Department of Archives and History	
(a)	Sesterecentennial Commission	\$ 1,460,000;
(b)	African American History Commission Green Book	\$ 100,000;
(c)	Digital Lab and Office Space	\$ 500,000;
(36)	H910—Arts Commission Grant Funds for Arts Organizations/Emergency Relief	\$ 2,000,000;

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(37) P120	Forestry Commission	
	Firefighting Equipment.....	\$ 1,000,000;
(38) P160	Department of Agriculture	
	(a) Hemp Testing Laboratory Equipment	\$ 425,000;
	(b) Backup Generator	\$ 300,000;
(39) P200	Clemson University—PSA	
	(a) Sandhill Recreation Research & Extension Building Repair	\$ 990,000;
	(b) Pee Dee Research & Education Center Greenhouse Construction	\$ 2,000,000;
(40) P210	South Carolina State University—PSA	
	(a) Small Business Recovery Assistance and Training	\$ 350,000;
	(b) Impact of COVID-19 on Small Farm Sustainability and Capacity	\$ 250,000;
	(c) Immunity Boost: Nutrition Education and Awareness During COVID	\$ 300,000;
(41) P280	Department of Parks, Recreation and Tourism	
	(a) Destination Specific	\$15,000,000;
	(b) Tourism Advertising	\$ 5,000,000;
	(c) South Carolina Association of Tourism Regions	\$ 600,000;
	(d) Venues at Arsenal Hill.....	\$ 8,350,000;
	(e) Hunting Island Lighthouse Repairs	\$ 3,000,000;
	(f) Fair Play Welcome Center Rebuild and Beautification.....	\$ 4,000,000;
	(g) Welcome Center Rebuild (N. Augusta, Little River, Landrum, and Blacksburg)	\$21,500,000;
	(h) South Carolina Film Commission	\$15,000,000;
	(i) Advertising and Operations	\$ 1,340,000;
(42) P320	Department of Commerce	
	(a) Deal Closing Fund	\$ 3,700,000;
	(b) Locate SC	\$ 4,000,000;
	(c) PGA Championship 2021	\$ 360,000;
	(d) Gallo Economic Development Project	\$ 8,300,000;
(43) P450	Rural Infrastructure	
	(a) Water and Sewer Regionalization Fund	\$ 3,500,000;
	(b) Rural Infrastructure Fund	\$ 2,129,944;
(44) D100	State Law Enforcement Division	
	(a) State Investigation Reimbursement	\$ 549,676;
	(b) Agency Personnel Equipment—Forensics	\$ 713,000;
	(c) Forensic Equipment	\$ 952,000;
	(44.1) From the funds appropriated to the State Law Enforcement Division in Item (44)(a) for State Investigation Reimbursement, the division shall retain \$72,052 and shall transfer \$144,777 to the Department of Transportation, \$102,087 to the Forestry Commission, \$30,000 to the Department of Health and Environmental Control, and \$200,760 to the State Fire Division at the Department of Labor, Licensing and Regulation.	
(45) E210	Prosecution Coordination Commission	
	Docket Backlog Intake Program	\$ 2,160,000;
(46) E230	Commission on Indigent Defense	
	Docket Backlog Contract Counsel.....	\$ 4,800,000;
(47) K050	Department of Public Safety	
	(a) Agency Vehicle Rotation.....	\$ 800,000;

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	(b) Communication Equipment Replacement	\$ 600,000;
	(e) Insurance Reserve Fund Premium Increase.....	\$ 1,246,457;
	(d) Body Cameras—Statewide Program.....	\$ 1,000,000;
(48)	N040 Department of Corrections	
	(a) Contract Nursing.....	\$ 4,550,984;
	(b) Critical Medical and Hepatitis C Treatment, Supplies and Equipment.....	\$ 4,000,000;
	(c) Critical Long-term Re-entry Programming Equipment.....	\$ 500,000;
	(d) Preventive Health Screening.....	\$ 1,500,000;
	(e) Insurance Reserve Fund Premium Increase.....	\$ 5,984,009;
(49)	N080 Department of Probation, Parole and Pardon Services	
	(a) Agency Fleet Replacement	\$ 625,672;
	(b) Insurance Reserve Fund Premium Increase.....	\$ 562,692;
(50)	N120 Department of Juvenile Justice	
	(a) Marine and Wilderness Program	\$ 1,500,000;
	(b) Security Fencing for Maple, Cypress, & Poplar.....	\$ 619,000;
	(c) HVAC Replacement	\$ 2,000,000;
	(d) Fire Alarm Upgrade Birchwood Campus	\$ 1,500,000;
	(e) Insurance Reserve Fund Premium Increase.....	\$ 520,000;
(51)	N200 Law Enforcement Training Council	
	Criminal Justice Academy	
	(a) HVAC Replacement Buildings 10 & 11	\$ 383,135;
	(b) Target System Upgrades.....	\$ 302,500;
	(c) FATS Training Building and Building 4.....	\$ 1,682,000;
	(d) Paving Project.....	\$ 632,500;
	(e) Emergency Generator for Academy Main Building.....	\$ 2,750,000;
(52)	P240 Department of Natural Resources	
	(a) Marine Resources Research Lab Shoreline Stabilization ...	\$ 585,500;
	(b) State Water Plan Pee Dee and Broad River Basins	\$ 2,995,000;
	(c) Waterfowl Areas Category 1	\$ 1,500,000;
	(d) Ocean Research Vessel Replacement	\$ 1,207,000;
	(e) Agency Vehicle Rotation.....	\$ 750,000;
	(f) Waddell Fish Hatchery Deferred Maintenance/Upgrades ...	\$ 3,500,000;
	(g) Ft. Johnson Property Acquisition	\$23,250,000;
	(52.1) The funds appropriated to the Department of Natural Resources for Ft. Johnson Property Acquisition in item (52)(g), shall be distributed from the Contingency Reserve Fund by July 5, 2021. This item and all associated transactions are deemed approved and authorized by the General Assembly.	
(53)	P400 Conservation Bank	
	Conservation Grants	\$ 9,000,000;
(54)	R520 State Ethics Commission	
	Non-Compliance Personnel Equipment.....	\$ 12,000;
(55)	R060 Office of Regulatory Staff	
	(a) Statewide Broadband Expansion	\$10,000,000;
	(b) Statewide Broadband Office.....	\$ 11,870;
	(c) Power Grid Study	\$ 500,000;
	(d) Electricity Market Reform Study Committee (Act 187 of 2020)	\$ 750,000;
(56)	R360 Department of Labor, Licensing and Regulation	
	Urban Search & Rescue Task Force and Helicopter Aquatic	

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	Rescue Team	\$ 850,000;
(57)	R400— Department of Motor Vehicles Mail Tracking System.....	\$ 457,500;
(58)	R600— Department of Employment and Workforce Be Pro Be Proud	\$ 642,500;
(59)	U120— Department of Transportation Litter Pickup	\$ 8,000,000;
(60)	U300— Division of Aeronautics (a) Main Hangar Window Replacement	\$ 350,000;
	(b) Exterior Roof and Coating.....	\$ 400,000;
(61)	B040— Judicial Department (a) Virtual Courtroom Expansion.....	\$ 7,600,000;
	(b) Case Management System Modernization	\$10,000,000;
	(c) Digital Court Reporter Project.....	\$ 1,425,000;
(62)	C050— Administrative Law Court (a) E Filing Module	\$ 175,000;
	(b) Public Area Renovations	\$ 38,390;
(63)	A010— The Senate (a) Operating Costs/Reapportionment.....	\$ 4,000,000;
	(b) Security.....	\$ 250,000;
(64)	A050— House of Representatives (a) Security.....	\$ 250,000;
	(b) Reapportionment	\$ 2,000,000;
(65)	A170— Legislative Services Agency Legislative Systems and Security Upgrade.....	\$ 5,000,000;
(66)	D300— Office of Resiliency (a) Resiliency Reserve Fund— Act 163 of 2020	\$44,000,000;
	(b) Resiliency Revolving Loan Fund— Act 163 of 2020	\$ 6,000,000;
	(c) IT Equipment and Furniture	\$ 80,000;
(67)	D500— Department of Administration (a) Division of State Human Resources Class & Compensation Reform.....	\$ 500,000;
	(b) Facilities Management Permanent Improvements.....	\$ 6,198,000;
	(c) Executive Institute	\$ 200,000;
(68)	E160— Office of State Treasurer Tuition Prepayment Plan	\$31,900,000;
(69)	E240— Office of Adjutant General (a) Aiken Readiness Center.....	\$ 5,200,000;
	(b) Armory Revitalization	\$ 2,500,000;
	(c) Olympia Armory Repairs and Renovations.....	\$ 1,200,000;
	(d) SCEMD Phased Replacement of HVAC Units (Phase 1 of 3).....	\$ 162,950;
	(e) SC Military Museum Public Outreach for SC National Guard History	\$ 500,000;
	(f) Kershaw County Armory Relocation of Maintenance Yard	\$ 300,000;
	(g) Non Federal Share Declared Natural Disasters	\$12,651,884;
	(h) FEMA Match— Declared Tornado Disasters	\$ 5,382,759;
(70)	E260— Department of Veterans' Affairs (a) Office of Secretary.....	\$ 452,500;
	(b) Public Information.....	\$ 13,800;

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- (e) State Coalition Integration..... \$ 38,500;
- (d) SC Base Protection Fund..... \$ 8,000,000;
- (e) Administrative Services Division..... \$ 15,000;

(71) ~~E280—Election Commission
State Matching Funds for 2020 HAVA Grant..... \$ 1,353,494;~~

(72) ~~\$800,000 shall be appropriated for Educational Purposes as follows:
H630—Department of Education: Trinity Technology Center \$100,000; Briggs De
Laine Pearson Foundation \$250,000; SC Retired Educators Academic Tutorial Services
\$200,000; and Roper Mountain Science Center \$250,000;~~

(73) ~~\$19,070,851 shall be appropriated for Economic Development purposes as follows:
P320—Department of Commerce: SC Minority Business Center \$300,000; Pinewood Depot
\$350,000; Unemployment Job Training \$500,000; North Maple Street/Kapstone/Global Trade
Center Improvements \$2,820,851; SC Technology and Aviation Center Infrastructure Upgrades
\$9,000,000; Graduation Alliance \$500,000; Palmetto Goodwill \$500,000; SC Association for
Community Economic Development \$2,000,000; and Southern Carolina Regional Development
Alliance Building Renovation \$100,000; and Y140—State Ports Authority: Georgetown Port
\$1,000,000; and Permitting Activities Related to Jasper Ocean Terminal Port \$2,000,000;~~

(74) ~~\$18,963,263 shall be appropriated for Healthcare purposes as follows:
J200—Department of Alcohol and Other Drug Abuse Services: Aiken Center Renovation
\$380,000; Trinity Behavioral Health Care Building Replacement \$500,000; Palmetto Foundation
for Prevention and Recovery \$50,000; Rubicon Drug and Alcohol Center—Hartsville \$75,000;
Chesterfield Alpha Center Renovation \$250,000; and Westview Behavioral Health Services
Renovation and Increased Security \$31,000; J160—Department of Disabilities and Special
Needs: Union County Greenhouse Repair \$15,000; J040—Department of Health and
Environmental Control: Socastee Flooding Prevention \$1,000,000; Lake Caldwell Dam
Remediation \$750,000; Stormwater Facilities Improvement City of Rock Hill \$1,000,000; EMS
Association Recruitment and Retention \$350,000; Colon Cancer Prevention Network \$250,000;
Darlington Lift Stations/Sewer Project \$300,000; and James R. Clark Memorial Sickle Cell
Foundation \$300,000; L040—Department of Social Services: Orangeburg County Domestic
Violence Shelter \$1,500,000; Family Justice Center—Horry County Program \$1,500,000;
Epworth Children’s Home \$350,000; Florence Crittenton \$100,000; Sexual Assault Victim
Sensitivity Training \$1,000,000; SAFE for Families SC \$25,000; Dickerson Children’s
Advocacy Center \$250,000; and Women in Unity \$200,000; and J020—Department of Health
and Human Services: The Men’s Center of the PeeDee \$175,000; Camp Cole \$250,000; A
Child’s Haven \$500,000; Children’s Place \$500,000; Nicholtown Child and Family
Collaborative \$25,000; MedEx Academy \$75,000; The Therapy Place \$150,000; Samaritan
House Homeless Shelter \$50,000; Beaufort Jasper Hampton Comprehensive Health Services
\$375,000; Antioch Senior Center \$300,000; CR Neal Center \$200,000; Community Medicine
Foundation \$250,000; The Medi CRC \$50,000; Resurrection Homeless Shelter \$100,000; Phillis
Wheatley Center \$25,000; Lisa School House Rocks \$50,000; Emma Wright Fuller Foundation
\$50,000; Center for Educational Equity \$25,000; Outstanding Youth Awards \$25,000; Pleasant
Valley Connection \$25,000; Community Wellness Group \$100,000; St. John Community
Holistic Wellness Center \$100,000; SC Cervical Cancer Awareness Initiative \$161,000; Medical
Ministries Inc. \$8,000; Camp Happy Days \$237,500; Community Health Worker Pilot Program
\$1,900,000; New Morning Foundation \$750,000; Nurse Family Partnership \$250,000; Brain
Injury Association \$100,000; Shoreline Behavioral Health Services Facility Expansion
\$1,000,000; Vital Aging of Williamsburg \$300,000; South Carolina HIV Council “The Wright
Wellness Center” \$300,000; M.A.D. USA (Men Against Domestic Violence) \$330,763; and Sea
Haven for Youth Health Care for Homeless Youth \$50,000;~~

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~~(75) \$6,548,300 shall be appropriated for Law Enforcement purposes as follow: K050—Department of Public Safety: Lancaster Sheriff’s Office Armored Vehicle \$340,000; Sumter County Sheriff’s Office \$500,000; Sumter Police Department \$750,000; Dillon County Sheriff’s Office Officer Equipment \$398,000; Beaufort Crime Lab \$500,000; Fairfax Law Enforcement Building Renovation \$350,000; Laurens County Sheriff’s Office Operations and Training Building \$250,000; Florence County Sheriff’s Office Equipment/Renovations \$153,500; Newberry County Sheriff’s Department Emergency Call Equipment \$225,000; Greenwood Sheriff’s Department Police Cars \$300,000; Allendale County Sheriff’s Office New Building \$176,800; and Body Cameras—Florence County Sheriff’s Office Program Implementation \$1,000,000; N080—Department of Probation, Parole and Pardon Services: Laurens County Office Facility Renovations \$238,000; Turning Leaf Expansion Campaign \$667,000; Paths to Wholeness, Inc. Pilot Re-entry Program \$100,000; and Rock of Ages (Fresh Start Transition Program) \$250,000; and N120—Department of Juvenile Justice: PACE Center for Girls \$350,000;~~

~~(76) \$12,920,000 shall be appropriated for Local Government purposes as follow: E240—Office of Adjutant General: Swift Water Rescue Team \$50,000; Undeclared Tornado Disaster Reimbursement—Seneca \$2,500,000; Newberry County Emergency Management \$50,000; and Information Technology for JAG Branch of State National Guard \$200,000; L060—Department on Aging: Orangeburg Senior Community Center \$50,000; and Fairfax Senior Citizen’s Building \$300,000; D500—Department of Administration: Tri-City Visionaries Weatherization and Energy Related Home Repairs \$200,000; U120—Department of Transportation: Historic T Bridge Repairs—City of Gaffney \$500,000; Forest Lake Place Bridge \$500,000; Five Points Road Funding \$850,000; Interchange Justification Report Rebuilding Exit on I-85 \$1,000,000; City of Forest Acres Bridge Replacement \$500,000; and Palmetto Trail Highway 301 Pedestrian Bridge \$1,600,000; and X220—Aid to Subdivisions—State Treasurer: Latta Revitalization Commission \$75,000; AmeriCorps SC \$200,000; Goose Creek Amphitheater Construction \$1,500,000; Cyber Security/Base Camp Equipment and Staff Training \$450,000; Mayson Crossroad Community Center Upgrades \$25,000; Dacusville Heritage Pavilion \$25,000; Town of Liberty \$40,000; City of Pickens \$55,000; Trinity Education Community and Conference Center \$200,000; Diane’s Call \$100,000; Pineville Antioch Multi-purpose Building \$240,000; Upstate Family Resource Center \$350,000; Town of Jenkinsville Town Hall Resource Center \$50,000; St. Lawrence Community Center Upgrades \$250,000; Green Pond Resource Center Equipment Purchase \$25,000; Sheldon Township Project \$25,000; Dorchester Paws Facility Upgrades \$350,000; Town of Brunson \$50,000; Town of Gifford \$40,000; Town of Furman \$40,000; Mill Town Theater \$220,000; Town of Pendleton \$250,000; and Salem Community Center Renovations \$60,000;~~

~~(77) \$94,243,600 shall be appropriated for Sports, Recreation, Tourism, and Agriculture purposes as follows: H790—Department of Archives and History: Pickens County Historical Updates \$25,000; Hagood Mill \$100,000; Dorchester Heritage Center \$480,000; Drayton Hall Preservation Trust \$250,000; Lincoln Preservation \$450,000; City of Abbeville—Barksdale McGowan House Climate Control Repairs \$150,000; Revolutionary War Sites \$400,000; Town of Iva—Repair of Historical Building \$50,000; Flagship of Luca Vasquez de Ayllon Shipwreck Survey \$250,000; Georgetown County Historical Society—Plantersville Cultural Center Eco-tourism Initiative \$53,500; and Marion County Library—Carnegie Library Renovation and Expansion \$250,000; H910—Arts Commission: Greenville Cultural and Arts Center \$19,000,000; Gibbes Art Museum \$500,000; Sumter Opera House \$15,000,000; Spartanburg County Foundation Cultural Movement \$340,000; Chapman Cultural Center’s Mayfair Mills Art Studios \$225,000; Charleston Food and Wine Festival \$200,000; Spoleto Festival \$500,000; South Sumter Art Park Project \$550,000; SC Artisans Center \$200,000; The Renaissance Foundation \$400,000; and Hartsville Center Theatre \$500,000; J160—Department of Disabilities~~

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and Special Needs: Special Olympics South Carolina \$250,000; J040— Department of Health and Environmental Control: City of Myrtle Beach Ocean Outfall \$500,000; and City of North Myrtle Beach Ocean Outfall \$500,000; P240— Department of Natural Resources: Port Royal Multi-use Building Upgrades and Shrimp Dock Repairs \$500,000; Feral Swine Eradication \$500,000; Greenwood County Boat Ramp \$300,000; Steel Creek Boat Landing Repair \$200,000; and Port Royal Shrimp Dock \$400,000; P280— Department of Parks, Recreation and Tourism: Myrtle Beach Safety Barriers \$250,000; Lexington County Convention Center \$1,000,000; Friends of the Green Crescent Trail \$200,000; Aiken County Railroad Museum \$205,000; Dolly Cooper Park Improvement \$350,000; Lee State Park Equestrian Center \$100,000; Dreher Island State Park Upgrades \$150,000; Kings Mountain State Park Upgrades \$600,000; Surfside Pier \$500,000; Doko Meadows Park Security Improvements \$250,000; Marlboro Civic Center \$500,000; Eagles Fields Baseball League \$50,000; Murrells Inlet Dredging \$2,000,000; Downtown Spartanburg Infrastructure \$12,000,000; Alvin Community Center \$30,000; Stump Removal Lake Marion \$300,000; Florence County Civic Center \$1,000,000; Fairfield County Recreation Facilities \$150,000; Martin Luther King Park Upgrades \$25,000; Explore Black Charleston/Columbia \$50,000; Winding Woods Building Pad \$500,000; Pine Hill Building Pad \$500,000; Calhoun County Museum Preservation \$100,000; Town of Timmonsville Park \$100,000; Palmetto Trail Columbia/Elmwood Greenway \$500,000; Miracle Park \$500,000; Southeastern Wildlife Expo \$300,000; Charleston Visitor Center \$1,500,000; SC Aquarium \$2,000,000; Mother Emanuel Foundation Capital Infrastructure \$4,000,000; Lee County Tennis Center \$250,000; Palmetto Trail Phase 3 \$1,000,000; Lower Richland Diamond Fest \$30,000; African American Tourism Institute \$50,000; Black Cowboy Festival \$50,000; Park Campground Comfort Station/Rest Station Renovations \$500,000; Colleton County Miracle League Field \$450,000; Town of Piedmont Replace Saluda River Foot Bridge \$250,000; South Sumter Park Improvements \$500,000; Columbia Convention Center Renovation \$9,000,000; ArtFields Collective \$500,000; Shot Pouch Greenway and Swan Lake Iris Gardens Improvements \$1,500,000; City of Conway Revitalization \$500,000; Morris Island Lighthouse \$350,000; Brookland Center Community Programs \$300,000; Cayce History Park \$1,000,000; Amazing Grace Park, The Clementa Pinckney Park \$500,000; Gordon Park/Dillon County Parks and Recreation \$300,000; Wateree River Veterans Park \$200,000; Town of Hodges Park Completion \$50,000; Greenwood County Parks and Tourism Grants \$75,000; and Calhoun Falls Marina \$1,000,000; E260— Department of Veterans’ Affairs: Shaw Welcome Center \$750,000; and Dolly Cooper Veterans Cemetery Hearse \$60,000; P160— Department of Agriculture: Colleton County Food Assistance Program \$350,000; Berkeley County Agricultural Educational Exhibition Area \$950,000; and Town of Mayesville Grant Matching Funds \$45,100; and P360— Patriots Point Development Authority: National Medal of Honor Museum \$1,000,000;

(78) \$14 shall be appropriated for Miscellaneous purposes as follows: H630— Department of Education: Reading Partners \$1; L120— Governor’s School for Agriculture at John De La Howe: Agriculture Shop Facility \$1; Greenhouse Facility \$1; Residential Hall Renovation \$1; and L.S. Brice School Renovation \$1; J120— Department of Mental Health: Harris Hospital Renovation \$1; P200— Clemson University—PSA: Pee Dee Research & Extension Building Repairs \$1; P280— Department of Parks, Recreation and Tourism: Anderson Civic Center Renovations \$1; P320— Department of Commerce: SC TAC \$1; N120— Department of Juvenile Justice: Security Upgrades Phase 1 of 2 \$1; and Midlands Evaluation Center Booking and Intake Area \$1; R040— Public Service Commission: Outside Expert Consultants for SC Energy Act \$1; U200— County Transportation Funds: Pickens County Transportation Commission—Reduce Easley Traffic Congestion \$1; E160— Office of State Treasurer: Mid Year Reduction Fund \$1; and U120— Department of Transportation: Infrastructure Maintenance Trust Fund \$1;

(79) U120— Department of Transportation
Rest Areas Renovation..... \$40,000,000;

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~~(80) U200 — County Transportation Funds~~

~~County Transportation Committees \$50,000,000.~~

~~(C) Unexpended funds appropriated pursuant to this provision may be carried forward to succeeding fiscal years and expended for the same purposes.~~