



SOUTH CAROLINA REVENUE AND FISCAL AFFAIRS OFFICE
STATEMENT OF ESTIMATED FISCAL IMPACT
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Bill Number:	S. 0303	Amended by Senate Medical Affairs on March 21, 2019
Author:	Kimpson	
Subject:	Transport of Mentally Ill Patient	
Requestor:	Senate Medical Affairs	
RFA Analyst(s):	Gardner and Mitchell	
Impact Date:	April 17, 2019	

Fiscal Impact Summary

This amended bill revises provisions related to the custody and transport of persons believed to have a mental illness who need immediate care.

The Department of Mental Health (DMH) reports that as result of the amended bill, the expenditure impact cannot be determined because the department does not know how many additional annual forty-hour crisis intervention trainings (CIT) will be held as a result of the bill. However, the department does indicate that clinical services provided by staff at the DMH community mental health centers are reduced due to the CIT and cause the centers to lose approximately \$1,000 in revenue for each forty-hour CIT session.

The Office of State Treasurer reports that the implementation of this bill will require the agency to perform activities that will be conducted in the normal course of agency business. As a result, this bill does not have an expenditure impact on the General Fund, Other Funds, or Federal Funds.

The Department of Public Safety reports a recurring cost for 1 new position with an annual salary of \$80,984 in General Funds and \$2,200 in nonrecurring General Funds for equipment for the position in FY 2020-21.

The Criminal Justice Academy reports that this bill will have no expenditure impact to the General Fund, Other Funds, or Federal Funds since the Department of Mental Health serves as the responsible agency.

This bill will have no expenditure impact on local government because the Department of Mental Health and the National Alliance on Mental Illness (NAMI) will continue crisis intervention training to local law enforcement training.

Explanation of Fiscal Impact

Amended by Senate Medical Affairs on March 21, 2019

State Expenditure

This amended bill revises provisions related to the custody and transport of persons believed to have a mental illness who need immediate care. Currently, a state or local law enforcement officer, a friend or relative, or an emergency medical technician (EMT) may transport these patients to a designated mental health facility within 3 days of the date of certification. While

previously it was preferred that state or local law enforcement officers transporting these patients be trained in crisis intervention measures, the bill requires transporting officers to be trained in these measures and serve as part of a therapeutic transport unit.

The amended bill also specifies that a mental health patient transport certification issued during a natural disaster or life-threatening condition will expire within three days after conditions are deemed safe for patient transport. Additionally, the bill requires that a physician responsible for the patient's care notify a friend or relative that he may transport the patient to the designated mental health facility or engage the services of an EMT to provide transportation. The bill retains language designating that friends or family members who choose to transport mental health patients are not entitled to reimbursement from the State for costs associated with the transportation.

The amended bill establishes in the Office of State Treasurer a separate and distinct fund known as the Therapeutic Transport Fund. The revenues of the fund must be distributed by the Department of Public Safety Coordinating Council for the purpose of assisting state and local law enforcement agencies in implementing the provisions of this section, including, but not limited to, initial crisis intervention training costs and staffing, and, ongoing costs related to training and staffing needs. The Department of Public Safety Coordinating Council shall oversee the fund. The Department of Public Safety Coordinating Council shall disburse the funds in a fair and equitable manner, taking into consideration priorities in funding. Applications for funding may not be submitted until crisis intervention training has been completed. This bill, when signed by the Governor, becomes effective on July 1, 2020.

Department of Mental Health. The Department of Mental Health reports that the bill requires law enforcement agencies to develop therapeutic transport units staffed by officers who have received CIT. This forty-hour training is provided by NAMI South Carolina in conjunction with DMH community mental health centers located closest to the law enforcement agency receiving the training. As outlined in Proviso 35.4 of the FY 2018-19 South Carolina Appropriations Act, NAMI South Carolina received from DMH \$170,500 in pass-through funds to conduct its portion of the training.

Clinical staff at DMH community mental health centers provide more than half of the training hours for each forty-hour CIT session. As DMH does not know how many additional annual forty-hour CIT trainings will be held as a result of the bill, the expenditure impact cannot be determined.

Office of the State Treasurer. This bill requires the agency to perform activities that will be conducted in the normal course of agency business. As a result, this bill does not have an expenditure impact on the General Fund, Other Funds, or Federal Funds.

Department of Public Safety. The bill requires the department to establish a process for the application and disbursement of funds to state and local law enforcement agencies. The department also reports that it will need to hire a Program Coordinator II to oversee the newly established Therapeutic Transport Fund. The recurring cost for the position would be an annual

salary of \$80,984 in General Funds and \$2,200 in nonrecurring General Funds for equipment for the position beginning in FY 2020-21.

Criminal Justice Academy. The agency reports that the implementation of this bill will have no expenditure impact to the General Fund, Other Funds, or Federal Funds as the responsible agency for training is the Department of Mental Health.

State Revenue

Should there be a significant increase in the number of trainings required, DMH will experience an increase in the amount of staff diverted to administer crisis intervention trainings. When CIT sessions are conducted, staff from DMH community mental health centers are diverted from their clinical service duties. The loss of these clinical service hours equates to a loss of approximately \$1,000 in potential revenue for each forty-hour CIT session.

The Department of Public Safety reports that any revenue from the Therapeutic Transport Fund is undetermined due to there being no historical data available.

Local Expenditure

This bill will have no expenditure impact on local government because the Department of Mental Health and NAMI will continue crisis intervention training for local law enforcement officers. The Department of Mental Health does not charge local governments for the training.

Local Revenue

N/A

Introduced on January 8, 2019

State Expenditure

This bill amends provisions related to the custody and transport of persons believed to have a mental illness who need immediate care. Currently, a state or local law enforcement officer, a friend or relative, or an emergency medical technician (EMT) may transport these patients to a designated mental health facility within three days of the date of certification. While previously it was preferred that state or local law enforcement officers transporting these patients be trained in crisis intervention measures, the bill requires transporting officers to be trained in these measures and serve as part of a therapeutic transport unit. The bill recommends that an officer who is conducting therapeutic transport of a mental health patient dress in civilian clothes and drive an unmarked sedan.

The bill also specifies that a mental health patient transport certification issued during a natural disaster or life-threatening condition will expire within three days after conditions are deemed safe for patient transport. Additionally, the bill requires that a physician responsible for the patient's care notify a friend or relative that he may transport the patient to the designated mental health facility or engage the services of an EMT to provide transportation. The bill retains language designating that friends or family members who choose to transport mental health patients are not entitled to reimbursement from the State for costs associated with the transportation.

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Local Revenue

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Frank A. Rainwater, Executive Director