



SOUTH CAROLINA REVENUE AND FISCAL AFFAIRS OFFICE
STATEMENT OF ESTIMATED FISCAL IMPACT
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This fiscal impact statement is produced in compliance with the South Carolina Code of Laws and House and Senate rules. The focus of the analysis is on governmental expenditure and revenue impacts and may not provide a comprehensive summary of the legislation.

Bill Number:	H.3773	Introduced on January 28, 2021
Author:	West	
Subject:	Restoration Treatment	
Requestor:	House Medical, Military, Public, and Municipal Affairs	
RFA Analyst(s):	Payne and Gardner	
Impact Date:	February 22, 2021	

Fiscal Impact Summary

This bill is estimated to increase the General Fund expenditures of the Department of Mental Health (DMH) by as much as \$2,075,000 annually beginning in FY 2021-22 to operate jail-based and community-based restoration treatment programs for individuals found unfit to stand trial, but who may be fit in the future, as permitted under the provisions of this bill. Additionally, DMH estimates that increasing the restoration treatment period from sixty days to one-hundred and eighty days could reduce the number of long-term patients treated by the department and increase the department's capacity to provide restoration treatment. The fiscal impact of this shift in patients can not be determined at this time, and will depend on the treatment outcomes of patients.

The Judicial Department indicates the bill may cause a delay in the resolution of general sessions or family court cases, though there is no data available with which to estimate the number of filings, hearings, or trials that may be affected. The department expects to manage any increase in costs associated with delays in the resolution of general sessions or family court cases using existing General Fund resources.

Explanation of Fiscal Impact

Introduced on January 28, 2021

State Expenditure

This bill establishes restoration treatment as an option for individuals who are found unfit to stand trial, but who are likely to become fit in the foreseeable future. Currently, if an individual is found to be unfit to stand trial but likely to be fit in the foreseeable future, the individual is hospitalized for up to sixty days. After this sixty-day period, if the individual is still found to be unfit to stand trial, the solicitor responsible for prosecution shall initiate judicial admission proceedings to have the individual involuntarily hospitalized. This bill will allow individuals found unfit to stand trial who are likely to become fit in the foreseeable future to undergo restoration treatment provided by the Department of Mental Health for up to one-hundred and eighty days. This bill also gives DMH the discretion to provide restoration treatment at a hospital or detention facility if an individual is detained, or in a hospital or outpatient basis if the individual is on bond.

Department of Mental Health.

DMH estimates that extending the period for restoration treatment from sixty days to one-hundred and eighty days will have an undetermined fiscal impact on the department. According to DMH, under normal operations prior to the COVID-19 pandemic, there were an average of thirty patients receiving restoration treatment at the department's G. Werber Bryan Psychiatric Hospital. DMH indicates the cost to provide restoration treatment services at the department's psychiatric hospital is approximately \$500 per day per patient. Currently, when a patient completes the sixty-day period for restoration treatment and is found still unfit to stand trial, the patient is recommitted to DMH and treated in a separate section of the hospital devoted to long-term patients. DMH reports that between January 1, 2020 and February 1, 2021, forty-four percent of patients who completed the sixty-day restoration treatment were found still unfit to stand trial. The average stay of long-term patients is 1,400 days according to DMH. Based on their research, DMH estimates the proposed extension of the treatment period could reduce the current recommitment rate of forty-four percent to twenty-five percent or lower, which could result in a reduction of thirty-five patient recommitments annually. DMH anticipates that over time the reduction in long-term patients will increase the capacity available for restoration treatment.

This bill gives DMH the discretion to provide restoration treatment for individuals who are detained in either a hospital setting or detention facility, and DMH may provide treatment for individuals on bond in either a hospital or out-patient basis. DMH indicates providing treatment in detention centers or on an out-patient basis would not only result in lower cost treatment compared to services provided at their psychiatric hospital, but would also allow the department to more timely admit individuals requiring treatment in a hospital setting who are waiting for a bed. Based on information from other states, DMH estimates the cost to provide jail-based restoration treatment to be \$150 to \$250 per day per patient. This estimate would provide for 2.5 additional FTEs including a part-time psychiatrist, a full-time psychologist, and a full-time social work counselor. This amount also includes an estimate for other operating expenses, such as overhead charged by the detention center for use of its space, security, and other medical services. DMH estimates program participation of twenty patients at a time for 365 days. Providing service to twenty patients a day for 365 days results in 7,300 patient service days. Providing 7,300 patient service days at \$150 per patient per day would cost \$1,095,000 annually, while providing 7,300 patient service days at \$250 per patient per day would cost \$1,825,000 annually. DMH estimates the cost to provide treatment in the community for individuals out on bond to be \$100 per day, based on information from other states. This estimate would provide for one additional FTE including a part-time psychiatrist and a part-time psychologist. DMH estimates program participation of ten patients at a time for a full year excluding weekends and holidays, or 250 days. Providing service to ten patients a day for 250 days results in 2,500 patient service days. Providing 2,500 patient service days at \$100 per patient per day would cost \$250,000 annually. Therefore, DMH estimates this bill will increase their General Fund expenditures by as much as \$2,075,000 annually beginning in FY 2021-22 to operate a jail-based and community-based restoration treatment programs.

Judicial Department. This bill requires that restoration treatment be ordered for a person who is mentally ill or has an intellectual disability and has been determined unfit to stand trial but is

likely to become fit in the foreseeable future. It also extends the treatment time frame to 180 days and gives the Department of Mental Health the discretion of selecting a treatment location for such persons. The bill also provides that general sessions or family courts handling cases for persons who have pending criminal charges for a violent offense determine whether the person may be released on bond. While implementation of the bill may cause a delay in the resolution of general sessions or family court cases, there is no data with which to estimate the number of hearings or trials that may be affected. The department expects to manage any increase in costs associated with delays in the resolution of general sessions or family court cases using existing General Fund resources.

State Revenue

N/A

Local Expenditure

N/A

Local Revenue

N/A



Frank A. Rainwater, Executive Director