



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. 3860	Introduced on January 30, 2025
Subject:	Opioid Overdose Prevention	
Requestor:	House Medical, Military, Public, and Municipal Affairs	
RFA Analyst(s):	Boggs	
Impact Date:	April 23, 2025	

Fiscal Impact Summary

This bill requires every first responder station and dispatch office in South Carolina to maintain an adequate supply of unexpired opioid antidote medication for use in accordance with the provisions of the South Carolina Overdose Prevention Act.

Currently, first responders are authorized to administer opioid antidotes in an emergency. First responders include emergency medical services (EMS) providers, law enforcement officers, or fire department workers directly engaged in examining, treating, or directing persons during an emergency.

The Department of Public Health (DPH) houses the Law Enforcement Officer Naloxone (LEON) and Reduction of Opioid Loss of Life (ROLL) programs which train law enforcement and fire department agencies across South Carolina to identify, treat, and report drug overdoses attributed to opioids. DPH reports that the bill will not impact expenditures for the agency. Further, the agency maintains the Bureau of Emergency Medical Services and the Bureau of Drug Control, which catalogs information on emergency use of opioid antidotes. DPH indicates that these reporting mechanisms will not be impacted by this bill.

Revenue and Fiscal Affairs (RFA) also contacted all forty-six counties and the Municipal Association of South Carolina (MASC) on behalf of municipalities to determine the impact on local governments. We received responses from three counties and MASC. Based on the responses received, we anticipate this bill will result in an increase in local expenditures, but the amount is undetermined due to the potential cost of maintaining an adequate supply of antidote and training and equipment for first responders for opioid overdose treatment, among other items. MASC indicates that local governments may try to obtain state or federal funds in order to offset some of the associated costs through the LEON program or by applying to receive funding through the South Carolina Opioid Recovery Fund (SCORF). To the extent that these funds are available, it may offset the cost of the opioid antidotes for local governments.

Explanation of Fiscal Impact

Introduced on January 30, 2025

State Expenditure

This bill requires every first responder station and dispatch office in South Carolina to maintain an adequate supply of unexpired opioid antidote medication for use in accordance with the provisions of the South Carolina Overdose Prevention Act.

Currently, first responders are authorized to administer opioid antidotes in an emergency. First responders include EMS providers, law enforcement officers, or fire department workers directly engaged in examining, treating, or directing persons during an emergency.

DPH certifies emergency medical technicians and paramedics, as well as houses the LEON and ROLL programs which train law enforcement and fire department agencies across South Carolina to identify, treat, and report drug overdoses attributed to opioids. DPH reports that the bill will not impact expenditures for the agency. Further, the agency maintains the Bureau of Emergency Medical Services and the Bureau of Drug Control, which catalogs information on emergency use of opioid antidotes. DPH indicates that these reporting mechanisms will not be impacted by this bill.

State Revenue

N/A

Local Expenditure

RFA contacted all forty-six counties and MASC to determine the impact on local governments. We received responses from three counties and MASC. Based on the responses received, we anticipate this bill will result in an increase in local expenditures, but the amount is undetermined for a number of reasons. First, the responding counties are unsure as to the potential costs associated with maintaining an adequate supply of antidotes, partially because an adequate supply is not defined or easy to determine. Additionally, there are likely to be costs for training and equipping first responders for opioid overdose treatment, especially in areas that do not have policies in place already. MASC indicates that local governments may try to obtain state or federal funds in order to offset some of the associated costs. For example, DHP currently provides the opioid antidote, Narcan, to law enforcement officers at no charge under the LEON program. According to information found on the Department of Alcohol and Other Drug Abuse Services' (DAODAS) website, an additional federal grant to continue the LEON program was awarded through August 2025. Additionally, local governments may apply to the SCORF to receive funding to purchase opioid antidotes. To the extent that these funds are available, it may offset the cost of the opioid antidotes for local governments.

Local Revenue

N/A



Frank A. Rainwater, Executive Director