



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. 4802	Introduced on January 13, 2026
Subject:	Sexually Violent Predator Act	
Requestor:	House Judiciary	
RFA Analyst(s):	Boggs	
Impact Date:	February 5, 2026	

Fiscal Impact Summary

This bill changes the definition of “likely to engage in acts of sexual violence” within the Sexually Violent Predator Act. The bill changes the definition from “that a person that is predisposed to engage in acts of sexual violence and more probably than not will engage in acts of sexual violence to such a degree as to pose a menace to the health and safety of others” to “that a person’s propensity to commit acts of sexual violence is of such a degree as to pose a menace to the health and safety of others.”

This bill will have no expenditure impact on Judicial, the Office of the Attorney General (AG), the Commission on Prosecution Coordination (CPC), the Department of Corrections (Corrections), the Commission on Indigent Defense (CID), the Department of Probation, Parole and Pardon Services (PPP), or the Department of Juvenile Justice (DJJ). Judicial, CPC, PPP, and DJJ indicate this bill does not operationally or fiscally impact them. AG, Corrections, and CID indicate this bill will have a minimal, if any, impact on them and any change can be managed within existing staff and appropriations.

The Office of Mental Health (OMH), within the Department of Behavioral Health and Developmental Disabilities (DBHDD), formerly known as the Department of Mental Health (DMH), anticipates the updated definition will likely result in a reduction of program discharges from the Sexually Violent Predators (SVP) program and therefore increase the number of patients housed through the program. For information, according to DBHDD, in FY 2025-26, the annual total cost per patient was \$111,367, which is fully state funded. Currently, there are 241 patients in the program. If the growth continues past the maximum capacity of the current facility, a capital project will also be needed for an additional wing to house the growing population. For information, maximum capacity of the current facility is 332. However, this number is based on double bed occupancy. Given the nature of the program, these patients are currently housed with single bed occupancy. Under current housing procedures, the SVP facility has already exceeded its maximum housing capacity and has begun overflow housing on special observation units and the certified infirmary that are intended for temporary housing. The facility has a capacity of 228 for regular housing using current single bed occupancy practices and a capacity of 268 if the temporary observation and infirmary beds are included.

Explanation of Fiscal Impact

Introduced on January 13, 2026

State Expenditure

This bill changes the definition of “likely to engage in acts of sexual violence” within the Sexually Violent Predator Act. The bill changes the definition from “that a person that is predisposed to engage in acts of sexual violence and more probably than not will engage in acts of sexual violence to such a degree as to pose a menace to the health and safety of others” to “that a person’s propensity to commit acts of sexual violence is of such a degree as to pose a menace to the health and safety of others.”

This bill will have no expenditure impact on Judicial, AG, CPC, Corrections, CID, PPP, or DJJ. Judicial, CPC, PPP, and DJJ indicate this bill does not operationally or fiscally impact them. AG, Corrections, and CID indicate this bill will have a minimal, if any, impact on them and any change can be managed within existing staff and appropriations.

The OMH division of DBHDD, formerly known as DMH, anticipates the updated definition will likely result in a reduction of program discharges from the SVP program and therefore increase the number of patients housed through the program. For information, according to DBHDD, in FY 2025-26, the annual total cost per patient was \$111,367, which is fully state funded. Currently, there are 241 patients in the program. If the growth continues past the maximum capacity of the current facility, a capital project will also be needed for an additional wing to house the growing population. For information, maximum capacity of the current facility is 332. However, this number is based on double bed occupancy. Given the nature of the program, these patients are currently housed with single bed occupancy. Under current housing procedures, the SVP facility has already exceeded its maximum housing capacity and has begun overflow housing on special observation units and the certified infirmary that are intended for temporary housing. The facility has a capacity of 228 for regular housing using current single bed occupancy practices and a capacity of 268 if the temporary observation and infirmary beds are included.

State Revenue

N/A

Local Expenditure

N/A

Local Revenue

N/A



Frank A. Rainwater, Executive Director