



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: S. 1095 Amended by Senate Medical Affairs on April 21, 2026
Subject: Prohibit Abortions
Requestor: Senate Medical Affairs
RFA Analyst(s): Boggs, Bryant, and Welsh
Impact Date: April 22, 2026

Fiscal Impact Summary

This bill prohibits a person from knowingly using or employing any instrument, device, means, or procedure upon a pregnant woman with the intent of causing an abortion, except in a medical emergency or to prevent the death or irreversible impairment of a major bodily function of the pregnant woman, not including psychological or emotional conditions. Further, this bill prohibits any person from knowingly administering, prescribing, delivering, providing, or selling an abortion-inducing drug to a pregnant woman with the intent to cause an unlawful abortion. This bill defines abortion-inducing drug as any drug or chemical, or any combination of drugs or chemicals, or any other substance when used with the intent to cause an abortion of a clinically diagnosable pregnancy. Under this bill, abortion-inducing drug does not mean a contraceptive, an emergency contraceptive, or the use of methotrexate to treat an ectopic pregnancy.

This bill also specifies that it is unlawful to knowingly possess, manufacture, mail, distribute, transport, deliver, or provide an abortion-inducing drug, except in listed exclusions. Additionally, this bill adds Mifepristone and Misoprostol to the list of Schedule IV controlled substances ninety days after the approval of the Governor. Further, this bill makes it unlawful to knowingly or intentionally use force, or the threat of force, to injure or intimidate a pregnant woman to coerce an abortion or to recruit, harbor, or transport an unemancipated pregnant minor who resides in this state to another state to have an abortion or to obtain an abortion-inducing drug without the consent of the parents or legal guardian.

Currently, a person is prohibited from performing an abortion if a fetal heartbeat has been detected unless there is a medical emergency to save the life of the mother or to prevent serious risk of substantial and irrevocable harm of a major body function of the mother, not including psychological or emotional conditions. Additionally, currently an abortion is allowed in the case of rape or incest if the probable gestational age of the unborn child is no more than twelve weeks or if there is a fatal fetal anomaly present.

This bill also states that a physician or any other professionally licensed person who is indicted for an intentional, knowing, or reckless violation of the prohibition on abortion, will have his license suspended by the State Board of Medical Examiners (BME), within the Department of Labor, Licensing and Regulation (LLR). The suspension shall remain in place until the charges against the physician are dismissed, or the physician is acquitted, convicted, pleads guilty, or pleads nolo contendere. If the charges are dismissed, or the physician is acquitted, then the

physician's license may be reinstated by the board upon application by the physician. Further, this bill requires the Board of Pharmacy (BP), within LLR, to notify all pharmacists in South Carolina about the provisions of this law and that lawful prescriptions for mifepristone and misoprostol may be filled in accordance with this act. The fiscal impact for BME, within LLR, is undetermined as BME is unable to predict the volume and complexity of the additional oversight functions required by this bill. LLR anticipates the impact on BP will be minimal and managed within existing staff and appropriations.

Under this bill, any facility licensed by the Department of Public Health (DPH) to operate as an abortion provider pursuant to §44-41-75, and any affiliated physicians or professional medical practices who are operating concurrently with and in the same physical, geographic location, or footprint as the licensed facility are unqualified to provide family planning services under the State's Medicaid program. The Department of Health and Human Services (DHHS), who oversees the State's Medicaid program, anticipates that the agency can comply with this will and remain compliant with current Medicaid regulations. Therefore, this bill will have minimal fiscal impact on DHHS.

This bill prohibits directly or indirectly providing state and local funds for family planning, whether through a grant, a contract, state-administered federal funds, or any other form, to any facility licensed by DPH to operate as an abortion provider pursuant to §44-41-75. Further, these funds may not be directly or indirectly provided to a physician or professional medical practice affiliated with a licensed abortion provider who is operating concurrently with and in the same physical, geographic location, or footprint as the licensed facility. Additionally, this bill requires DPH to prepare, produce, and make publicly available in a user-friendly format a list of all qualified family planning service providers operating within a twenty-five-mile radius of any facility licensed to provide abortions pursuant to §44-41-75 that is excluded from the State's Medicaid provider network.

Currently, an abortion performed in this state must be reported by the performing physician to the State Registrar within DPH, within seven days after the abortion is performed. This bill adds that DPH must annually compile a public report providing statistics for the previous calendar year from the information submitted by physicians and statistics for prior calendar years with any updated information for calendar years that was submitted after the compilation of statistics for that year. Additionally, this bill requires DPH to notify all healthcare practitioners and providers in South Carolina about the provisions of this law and that mifepristone and misoprostol may be prescribed and administered in accordance with this act.

DPH anticipates needing to hire 1.0 FTE for record management and reporting to manage the additional workload in vital statistics. The anticipated cost of the FTE, a Statistician III, is \$135,411 for salary and fringe. The agency also anticipates additional recurring expenses of \$23,015 for miscellaneous supplies, indirect costs, and expenses related to the additional workload in vital statistics. Nonrecurring expenses are expected to total \$2,157 for computer equipment for the new FTE. In total, General Fund expenses of the agency will increase by approximately \$160,583 in FY 2026-27 and \$158,426 each year thereafter. DPH will request an increase in General Fund appropriations to support the new FTE position.

This bill creates several new felony and misdemeanor offenses as well as civil actions. As these are new offenses, there is no data to determine the number of new cases that may be heard in circuit court.

This bill may result in an increase in the number of civil or criminal cases and potentially the number of incarcerations, due to the newly created offenses, which may increase the workload of the court system and the Commission of Indigent Defense (CID), the Department of Probation, Parole and Pardon Services (PPP), the Commission on Prosecution Coordination (CPC), and the Department of Corrections (Corrections). Judicial anticipates that the potential impact of the caseload in circuit court can be managed within existing appropriations. Additionally, the potential increase in expenses for each agency will depend upon the increase in the number of cases and number of incarcerations. These agencies anticipate that the potential increase in caseload can be managed within existing appropriations. However, if the bill has an unanticipated impact on caseloads or downstream expenses, Judicial and these agencies will request an increase in General Fund appropriations. For information, according to Corrections, in FY 2024- 25, the annual total cost per inmate was \$37,503, of which \$35,696 was state funded.

This bill prohibits a person or entity from knowingly soliciting or providing funding or assistance for unlawfully delivering, distributing, or providing an abortion-inducing drug to a pregnant woman. In addition to criminal penalties, the Attorney General may initiate a civil asset forfeiture action to recover only those funds directly related to this conduct or may initiate an action for injunctive relief against an individual or organization that violates this, or both. Further, this bill allows the Attorney General, a solicitor acting within his respective circuit, the mother or father of the unborn child, the grandparents, the siblings, and the legal guardians of the unborn child's mother, if the mother is a minor, to bring a civil action against a person who violates a provision of this bill no later than three years after the alleged violation. In the civil action, if the plaintiff proves that the defendant violated, attempted to violate, or threatened to violate a provision of this bill, the court shall award damages of \$10,000 to be imposed on each defendant in addition to injunctive relief, compensatory damages, punitive damages, and reasonable attorney's fees and court costs.

The Attorney General's Office notes that based on similar legislation, this bill will likely be challenged in court, which will significantly increase the workload for current staff. However, the Attorney General's Office anticipates being able to manage this increase in workload with existing staff. The agency also anticipates the need to hire additional attorneys or possibly form a new division to manage the new responsibilities created by this bill, depending upon the number of new actions brought due to this bill. Since the Attorney General's Office is unable to predict the volume of new cases that will result from this bill, the expenditure impact on the agency is undetermined.

This bill specifies that the President of the Senate, on behalf of the Senate, and the Speaker of the House of Representatives (House), on behalf of the House, have an unconditional right to intervene in a court action if a part to the court action challenges the constitutionality of this bill.

Both the Senate and House anticipate being able to manage any responsibilities that may arise due to this bill with existing staff and appropriations.

This bill creates a right of action for the mother, father, grandparents, and siblings of an unborn child who may bring a civil action for violations of this article. Additionally, it expands the types of damages that may be awarded and the time in which suit may be brought beyond the provisions of the SC Tort Claims Act. The State Fiscal Accountability Authority (SFAA) anticipates this bill will have the potential to significantly increase losses to the Insurance Reserve Fund (IRF) and its insured hospitals. The impact will depend upon the number of actions and the liability assessed. Therefore, the overall expenditure impact on the IRF and SFAA are undetermined. We anticipate that any increase in expenses for the IRF will be offset with an increase in premiums paid by the covered entity. Therefore, this bill may have a General Fund, Other Funds, and/or local expenditure impact for an increase in premiums paid to the IRF.

This bill will have no expenditure impact on the Department of Insurance (DOI) or the Public Employee Benefit Authority (PEBA) as it does not materially alter the agencies' current practices. PEBA notes this bill will have no impact on the State Health Plan (SHP). Additionally, this bill will have no expenditure impact for the University of South Carolina (UofSC) School of Medicine, the Medical University of South Carolina (MUSC), the Department of Juvenile Justice (DJJ), the South Carolina Law Enforcement Division (SLED), or the Department of Social Services (DSS), as each agency anticipates any additional responsibilities due to this bill can be managed with existing staff and appropriations.

This bill may result in a change in the fines and fees collected in court due to an increase in the caseload in court. Court fines and fees are distributed to the General Fund, Other Funds, and local funds. Therefore, the Revenue and Fiscal Affairs Office (RFA) anticipates this bill may result in a change to General Fund, Other Funds, and local revenue due to the change in fines and fees collections in court.

As noted above, this bill may result in an increase in expenses for the IRF, within SFAA. We anticipate these expenses will be offset by an increase in premiums paid by the covered entities. Therefore, this bill may have an Other Funds revenue impact for premiums collected by the IRF, depending on the increase in expenses within the IRF.

This bill requires school districts to include a presentation of a high-quality, computer-generated rendering or animation of at least three minutes in duration comparable in quality with the "Meet Baby Olivia" video developed by Live Action, a 501(c)(3) non-profit, in their comprehensive health education programs. The video must demonstrate the process of fertilization and stages of human development inside the uterus, noting significant markers in cell growth and organ development from fertilization until birth, noting significant markers in cell growth and organ development from fertilization until birth. The bill specifies that the Attorney General may bring a civil action for a writ of mandamus to compel a public school district to comply with this requirement.

The S.C. Department of Education (SCDE) surveyed the seventy-two regular school districts and three charter school districts and received responses from twelve districts. The expenditure impact of this bill varies by district. Several of the responding districts report the need to upgrade technology and provide training for instructors but cannot quantify the costs. One district also notes the potential for legal costs.

RFA contacted all forty-six counties and the Municipal Association of South Carolina (MASC) regarding this legislation and received responses from Dorchester County, Florence County, Horry County, Lancaster County, and MASC. Dorchester County, Florence County, and Lancaster County indicate that this bill will have no expenditure impact. Horry County indicates that this bill will generate additional investigations, prosecutions, public defenses, and court cases, which will increase costs for local governments. Horry County reports that the increase in costs cannot be quantified at this time. MASC reports that this bill may expose municipal governments to potential legal and financial risks under certain circumstances. MASC also anticipates municipal law enforcement agencies will experience an increase in staff time and agency resources due to the violations created by this bill. Further, MASC expressed concern on oversight responsibilities for mail order prescription drugs due to this bill.

Explanation of Fiscal Impact

Amended by Senate Medical Affairs on April 21, 2026

State Expenditure

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This bill will have no expenditure impact on DOI or PEBA as it does not materially alter the agencies' current practices. PEBA also notes this bill will have no impact on SHP. Additionally, this bill will have no expenditure impact for UofSC School of Medicine, MUSC, DJJ, SLED, or DSS, as each agency anticipates any additional responsibilities due to this bill can be managed with existing staff and appropriations.

State Revenue

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Frank A. Rainwater, Executive Director