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DHEC

34.44. (DHEC: Wave Dissipation Device) From funds appropriated to the department for the Coastal Resource Improvement program, the department shall permit a Wave Dissipation Device pilot program to be initiated.

The deployment of a qualified wave dissipation device seaward of the setback line or baseline pursuant to a study conducted by the Citadel or a research university is not construction and meets the permitting exception contained in Section 48 39 130(D)(2). Prior to deploying or expanding a qualified wave dissipation device, a person proposing to deploy or expand the device must pay the department a fee of ten cents per linear foot of the proposed deployment or expansion. The department may order the removal of all or any portion of a qualified wave dissipation device that the department determines causes material harm to the flora, fauna, physical or aesthetic resources of the area under Section 48 39 130(D)(2) of the 1976 Code.

A 'qualified wave dissipation device' is a device that:

- (1) is placed mostly parallel to the shoreline;
- (2) is designed to dissipate wave energy;
- (3) is designed to minimize scouring seaward of and adjacent to the device by permitting sand to move landward and seaward through the device;
- (4) the horizontal panels designed to dissipate wave energy can be deployed within one hundred twenty hours or less and can be removed within one hundred twenty hours or less;
- (5) does not negatively impact or inhibit sea turtle nesting or other fauna;
- (6) can be adjusted after initial deployment in response to fluctuations in beach elevations; and
- (7) otherwise prevents down coast erosion, protects property, and limits negative impacts to public safety and welfare, beach access, and the health of the beach dune system.

34.60. (DHEC: Onsite Wastewater Systems) In the current fiscal year, the Department of Health and Environmental Control may expend funds appropriated and authorized in this act to regulate onsite wastewater systems, including septic tanks and other sewage treatment and disposal systems, but the department only may regulate such onsite systems in the same manner as such systems were regulated on January 12, 2021.

DMH

35.3. (DMH: Alzheimer's Funding) Of the funds appropriated to the Department of Mental Health for Community Mental Health Centers, \$900,000 must be used for contractual services to provide respite care and diagnostic services to those who qualify as determined by the Alzheimer's Disease and Related Disorders Association. The department must maximize, to the extent feasible, federal matching dollars. On or before September thirtieth of each year, the Alzheimer's Disease and Related Disorders Association must submit to the department, Governor, Senate Finance Committee, and House Ways and Means Committee an annual financial statement and outcomes measures attained for the fiscal year just ended. These funds may not be expended or transferred during the current fiscal year until the required reports have been received by the department, Governor, Chairman of the Senate Finance Committee, and the Chairman of the House Ways and Means Committee. In addition, when instructed by the Executive Budget Office or the General Assembly to reduce funds by a certain percentage, the department may not reduce the funds transferred to the Alzheimer's Disease and Related Disorders Association greater than such stipulated percentage.

DDSN

36.14. (DDSN: Beaufort DSN Facility) For Fiscal Year 2021-22, the Department of Disabilities and Special Needs is authorized to retain the full amount of proceeds from the sale of the local Disabilities and Special Needs Board of Beaufort County property. The funds retained from this sale must be used by the department to purchase a

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new property for the local Disabilities and Special Needs Board in Beaufort County that more appropriately meets the needs of the individuals served. Unexpended funds may be carried forward into the current fiscal year and used for the same purpose. The department must provide a status report to the Beaufort County Legislative Delegation by June 30, 2022, detailing the retention of any sale proceeds and/or the expenditures of those funds.

General Provisions

117.74. (GP: Information Technology for Health Care) From the funds appropriated and authorized to the Department of Health and Human Services, the department shall advance the use of health information technology and health information exchange to improve quality and efficiency of health care and to decrease the costs of health care as follows:

(A) In order to facilitate the qualification of Medicare and/or Medicaid eligible providers and hospitals for incentive payments for meaningful health information technology (HIT) use, a health care organization participating in the South Carolina Health Information Exchange (SCHIE) or a Regional Health Information Organization (RHIO) or a hospital system health information exchange (HIE) that participates in SCHIE may release patient records and medical information, including the results of any laboratory or other tests ordered or requested by an authorized health care provider within the scope of his or her license or practice act, to another health information organization that requests the information via a HIE for treatment purposes with or without express written consent or authorization from the patient. A health information organization that receives or views this information from a patient's electronic health record or incorporates this information into the health information organization's electronic medical record for the patient in providing treatment is considered an authorized person for purposes of 42 C.F.R. 493.2 and the Clinical Laboratory Improvement Amendments.

(B) There is established the Health Information Exchange Strategy Development Committee to make recommendations on the development of a statewide HIE strategy that is intended to promote interoperability for purposes of improving patient safety, eliminating redundant or unnecessary testing, and increasing the efficiency of the healthcare system. The committee shall assess other states' approaches to governing, financing, and implementing their statewide HIE efforts, including enhanced funding made available through the Centers for Medicare and Medicaid Services or other relevant agencies, and shall report its findings and recommendations to the Governor, the Chairman of the House Ways and Means Committee, and the Chairman of the Senate Finance Committee no later than November 15, 2021. The committee shall consider and leverage the capabilities of existing exchanges and organizations already present in South Carolina and shall solicit and evaluate the input of appropriate stakeholders, including but not limited to, those represented on the committee. Upon the request of the committee, the department shall furnish staff and other necessary resources to support the work of the committee, which shall be comprised of the following:

- (1) the director of the Revenue and Fiscal Affairs Office or his designee, who shall serve as chair;
- (2) the director of the Department of Health and Human Services or his designee;
- (3) the director of the Department of Health and Environmental Control or his designee;
- (4) the president of the Medical University of South Carolina or his designee;
- (5) the CEO of the South Carolina Hospital Association or his designee;
- (6) the CEO of the South Carolina Medical Association or his designee;
- (7) the CEO of the South Carolina Primary Health Care Association or his designee; and
- (8) an individual with substantial HIE experience, who shall be appointed by the Governor.

(C) The department shall be authorized to use any of its available and uncommitted funds to develop, submit, or implement any advance planning documents or other similar plans in furtherance of a statewide HIE strategy, and to secure any available federal funding. The department shall expeditiously prepare and submit any such documents or plans, particularly if necessary to meet any federal deadlines.