**South Carolina General Assembly**

119th Session, 2011-2012

**S. 567**

**STATUS INFORMATION**

Joint Resolution

Sponsors: Senators Alexander, Hayes, O'Dell, Lourie, Pinckney and Land

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Introduced in the Senate on February 15, 2011

Currently residing in the Senate Committee on **Finance**

Summary: Long Term Care Accessibility Task Force

**HISTORY OF LEGISLATIVE ACTIONS**

Date Body Action Description with journal page number

2/15/2011 Senate Introduced and read first time ([Senate Journal‑page 7](file:///h:\sj%20archive\2011\02-15-11.docx))

2/15/2011 Senate Referred to Committee on **Finance** ([Senate Journal‑page 7](file:///h:\sj%20archive\2011\02-15-11.docx))

**VERSIONS OF THIS BILL**

[2/15/2011](file:///p:\pprever\2011-12\567_20110215.docx)

**A** **JOINT RESOLUTION**

TO CREATE THE TASK FORCE ON LONG TERM CARE ACCESSIBILITY IN SOUTH CAROLINA.

Whereas, South Carolina is facing a climate of severe fiscal austerity, and we must find ways in which to maintain services in our state’s Medicaid program without creating an additional financial burden to the State while providing the best possible health care value for South Carolinians; and

Whereas, on average, the Medicaid program can provide home and community based services to three people for the cost of serving one person in an institutional setting; and

Whereas, South Carolina’s eighty-five plus population, the age group that is most likely to need long term care services, will grow ninety-five percent from 2007 to 2030; and

Whereas, South Carolina should prepare for this future by exploring cost savings programs and developing a coordinated system of care; and

Whereas, rebalancing spending on home and community based services and consumer choice will result in short term and long term cost savings to our state’s beleaguered Medicaid program; and

Whereas, South Carolina should have a vision and plan for a long term care system that promotes consumer independence, choice, dignity, autonomy, and privacy for older adults and persons with disabilities; and

Whereas, South Carolina recognizes our long term care system needs to be reviewed to determine how it meets the following criteria: cost containment through identification of efficiencies, as well as identification of duplication, waste, fraud, and abuse, coordination of access to long term care resources, and promotion of independence through consumer choices; and

Whereas, the development of long term care options through technology and innovation to meet the growing older adult market will provide opportunities for workforce and economic development, thus increasing the positive economic impact derived from service providers and their employees. Now, therefore,

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. (A) There is created the Task Force on Long Term Care Accessibility in South Carolina to be composed of ten voting members. All members appointed must have substantial academic, professional, or personal experience in long term care services and support. The commission must be comprised of the following:

(1) one member appointed by the Chairman of the Senate Finance Committee;

(2) one member appointed by the Chairman of the Senate Medical Affairs Committee;

(3) one member appointed by the Chairman of the House Ways and Means Committee;

(4) one member appointed by the Chairman of the House Medical, Military, Public and Municipal Affairs Committee;

(5) two members appointed by the Governor; and

(6) the Directors of the Department of Health and Human Services, Department of Disabilities and Special Needs, Lieutenant Governor’s Office on Aging, and Department of Mental Health, or their designees.

(B) A vacancy on the task force must be filled in the same manner as the original appointment.

(C) Initial appointments to the task force must be made within thirty days of the enactment of this joint resolution. The initial meeting of the task force must be convened by the appointee of the Chairman of the Senate Finance Committee.

(D) The task force shall elect a chairman from among its members.

(E) Members of the task force shall serve without mileage, per diem, and subsistence.

(F) The South Carolina Public Health Institute shall provide research, staffing assistance, and other information that is required to assist in the work of the task force.

(G) An advisory panel may be convened by invitation of the task force to provide the task force with information and recommendations. Members of the advisory panel must have substantial academic, professional, or personal experience in long term care services and supports.

(H) In fulfilling the charge contained in this section, the task force shall present a written report with recommendations on improving coordination of access to long term care resources, promotion of independence through consumer choices, cost containment, and identification of duplication, waste, fraud, and abuse to the General Assembly by July 1, 2012, at which point the task force shall no longer exist unless otherwise authorized by the General Assembly.

SECTION 2. This joint resolution takes effect upon approval by the Governor.

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