Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

Fiscal Year FY 2026-2027

Agency Budget Plan

FORM A - BUDGET PLAN SUMMARY

	For FY 2026-2027, my agency is (mark "X"):	
OPERATING REQUESTS *(FORM B1)*	X	Requesting General Fund Appropriations.
		Requesting Federal/Other Authorization.
		Not requesting any changes.

	For FY 2026-2027, my agency is (mark "X"):	
NON-RECURRING REQUESTS *(FORM B2)*	X	Requesting Non-Recurring Appropriations.
		Requesting Non-Recurring Federal/Other Authorization.
		Not requesting any changes.

	For FY 2026-2027, my agency is (mark "X"):	
CAPITAL REQUESTS *(FORM C)*	X	Requesting funding for Capital Projects.
		Not requesting any changes.

	For FY 2026-2027, my agency is (mark "X"):	
PROVISOS *(FORM D)*	X	Requesting a new proviso and/or substantive changes to existing provisos.
		Only requesting technical proviso changes (such as date references).
		Not requesting any proviso changes.

Please identify your agency's preferred contacts for this year's budget process.

	Name	***Phone***	***Email***
PRIMARY CONTACT:			
SECONDARY CONTACT:			

I have reviewed and approved the enclosed FY 2026-2027 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	Agency Director	***Board or Commission Chair***
***SIGN/DATE*:**		
***TYPE/PRINT NAME*:**		

This form must be signed by the agency head – not a delegate.

Agency Name:	Department of Behavioral Health & Developmental Disabilities
Agency Code:	J080
Section:	34

BUDGET REQUESTS			FUNDING					FTES				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B1 - Recurring	Office of Intellectual & Developmental Disabilities Operations Sustainability	21,000,000	0	0	0	21,000,000	0.00	0.00	0.00	0.00	0.00
2	B1 - Recurring	Sustaining Inpatient Services	15,576,202	0	0	0	15,576,202	0.00	0.00	0.00	0.00	0.00
3	B1 - Recurring	Community Programs Support	4,723,089	0	0	0	4,723,089	0.00	0.00	0.00	0.00	0.00
4	B1 - Recurring	Expanding Recovery Community Organizations and Outreach Programs	5,845,000	0	0	0	5,845,000	0.00	0.00	0.00	0.00	0.00
5	B1 - Recurring	Information Technology and Cyber Security Enhancement	10,000,000	0	0	0	10,000,000	0.00	0.00	0.00	0.00	0.00
6	B2 - Non-Recurring	Information Technology and Cyber Security Enhancement	14,100,000	0	0	0	14,100,000	0.00	0.00	0.00	0.00	0.00
7	B1 - Recurring	Prevention and Addiction Services Expansion	4,275,000	0	0	0	4,275,000	0.00	0.00	0.00	0.00	0.00
8	B1 - Recurring	Law Enforcement and Jail Support Programs	3,450,000	0	0	0	3,450,000	0.00	0.00	0.00	0.00	0.00
9	B2 - Non-Recurring	Unclaimed Lottery Prize Money for Compulsive Gambling Services	250,000	0	0	0	250,000	0.00	0.00	0.00	0.00	0.00
10	C - Capital	OIDD Community Owned Homes	4,000,000	0	0	0	4,000,000	0.00	0.00	0.00	0.00	0.00
11	B1 - Recurring	Unified Care Platform Technology	39,000,000	0	0	0	39,000,000	0.00	0.00	0.00	0.00	0.00
12	B2 - Non-Recurring	Unified Care Platform Technology	63,000,000	0	0	0	63,000,000	0.00	0.00	0.00	0.00	0.00
13	B2 - Non-Recurring	Greenwood Genetics - Physical and Cybersecurity Enhancements & Alzheimer's Initiative	2,150,000	0	0	0	2,150,000	0.00	0.00	0.00	0.00	0.00

TOTALS	187,369,291	0	0	0	187,369,291	0.00	0.00	0.00	0.00	0.00

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	**1**

Provide the Agency Priority Ranking from the Executive Summary.

TITLE	**Office of Intellectual & Developmental Disabilities Operations Sustainability**

Provide a brief, descriptive title for this request.

AMOUNT	**General: $21,000,000** **Federal: $0** **Other: $0** **Total: $21,000,000**

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	**0.00**

Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
X	Change in cost of providing current services to existing program audience
X	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
	Proposed establishment of a new program or initiative
	Loss of federal or other external financial support for existing program
X	Exhaustion of fund balances previously used to support program
	IT Technology/Security related
X	HR/Personnel Related
	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

ACCOUNTABILITY OF FUNDS	1.1 Utilize least restrictive residential settings and supports.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

	OIDD statewide network of local Disabilities & Special Needs Boards and private

RECIPIENTS OF FUNDS	providers would receive these funds allocated through service rate increases. OIDD Consumer patients residing in any of the 5 Regional Centers owned and operated by the state to support individuals with Intellectual & Developmental Disabilities.

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

Office of Intellectual & Developmental Disabilities (OIDD) Operational Increases - $10,000,000

The Office of Intellectual and Developmental Disabilities has experienced sustained economic pressures over multiple fiscal years due to increasing service demands, rising workforce and provider costs. These fiscal constraints have placed significant strain on the Office's ability to maintain service capacity, meet regulatory obligations, and ensure access to quality supports for eligible individuals. Additional appropriations are necessary to stabilize operations, strengthen the provider network, and sustain essential services for South Carolinians with intellectual and developmental disabilities. Worker Comp rates have increased throughout the agency across several years. Statewide Nursing contract rates have significantly increased over the last couple years, with the last receiving a 45% YoY increase. With Medical inflation outpacing standard operational inflation, the consumers inside of OIDD sometimes require a higher level of medical services in comparison to what you would find in a standard hospital setting. Nationwide Medical CPI trends towards the 4-6% inflation range on an annual basis.

State Match Requirement for Intermediate Care Facilities (ICF) - $4,500,000

OIDD is in consultation with Department of Health and Humam Services, for a proposed increase in the ICF state plan fee-for-service in FY26-27. OIDD will need the additional funding to account for the state's match portion of these proposed rate increases. The total estimated cost of the proposed increases is $4,500,000.

Increase in funded DSP positions for OIDD Regional Centers Consumer Support - $6,500,000

This request seeks additional funding to increase the number of direct support professionals (DSPs) at BHDD-OIDD's Regional Centers (ICF/IIDs). Staffing challenges, to the include the recruitment and retention of DSPs, were exacerbated by the COVID-19 pandemic, and centers became reliant on overtime (OT) and contract staff.

BHDD-OIDD is requesting funding to hire 203 DSPs across 4 of the 5 Regional Centers. The addition of these DSPs will raise staffing to a level necessary for appropriate care, to provide active treatment programs and participation in community outings, and to reduce strain on the existing workforce.

Without an increase in staffing levels, the facilities are at risk of noncompliance with regulatory requirements, which could result in decertification and loss of federal matching funds for services provided through the centers. This would also eliminate the need for contract employees as well as the elimination of OT hours currently worked. Nearly half of the total funding for the 203 DSP's would come from the savings derived by the reduction of OT wages.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	**2**

Provide the Agency Priority Ranking from the Executive Summary.

TITLE	**Sustaining Inpatient Services**

Provide a brief, descriptive title for this request.

AMOUNT	**General: $15,576,202** **Federal: $0** **Other: $0** **Total: $15,576,202**

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	**0.00**

Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
X	Change in cost of providing current services to existing program audience
X	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
X	Proposed establishment of a new program or initiative
	Loss of federal or other external financial support for existing program
	Exhaustion of fund balances previously used to support program
	IT Technology/Security related
X	HR/Personnel Related
	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

ACCOUNTABILITY OF FUNDS

1.1.7 (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.2.2, 1.3.1 (FY 24 Accountability Report)

Services will be received by patients that require them. All funds will be monitored for their proper disbursement and utilization.

1.1.3, 6.1.1, and 6.1.2. (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.1.3 (FY 24 Accountability Report)

Services will be available to people in need. Inpatient and long-term care psychiatric services will be available when needed.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS

OMH gives priority to adults, children, and their families affected by serious mental illnesses and significant emotional disorders. The agency is committed to eliminating stigma and promoting the philosophy of recovery, to achieving our goals in collaboration with all stakeholders, and to assuring the highest quality of services possible. The requested funds are expended by the Department for the benefit of individual patients by providing needed mental health services.

The primary recipient of the funds would be the agency and the agency's contractor(s).

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

Sexually Violent Predator Treatment Program - $2,420,047

The Sexually Violent Predator (SVP) Act in the South Carolina Code of Laws Annotated§§ 444810 et seq. Persons committed under the Sexually Violent Predator Act are confined to OMH. The SVPTP is operated by an independent contractor. There has been an increase in referrals for SVPTP evaluation for potential commitment to the program, leading to a record census. There are strict evaluation timelines that must be met per the statute, or the agency could face contempt of court. This request includes the cost of the required request for a South Urban Medical Care CPI increase per established contract with vendor.to meet the significant increase in demand for forensic assessments.

Forensic Inpatient Services - $5,690,004

OMH is statutorily mandated to provide the Forensic Inpatient Service. Once hospitalized, OMH may not release a defendant to community care without approval of the Chief Administrative Judge [SC Code Ann. 172440(c)]. Demand for forensic evaluations, restoration services ($1,353,000), and hospital admissions ($3,446,026) continues to increase while costs for these services increase ($890,979). Demand for forensic services in South Carolina continues to increase, resulting in a growing delay in admissions. Other states are facing costly litigation over forensic treatment delays. OMH has been under court monitoring of its forensic delays in admission for over 20 years and has been particularly challenged o meet the significant increase in demand for forensic assessments.

Psychiatric Residential Treatment Facility (PRTF) - $7,466,151

The agency is responsible for the operation of the Psychiatric Residential Treatment Facility ("PRTF"). The PRTF is primarily designed to safely and securely treat juveniles committed to the Department of Juvenile Justice (DJJ) who have been determined pursuant to [S.C. Code Ann. Section 63-19-1450] to have a mental illness requiring transfer to OMH for treatment. The requested funds account for recurring operating expenses based on operator contracted rates, a scaled plan to reach full occupancy, and projected revenue.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and

method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY

3

Provide the Agency Priority Ranking from the Executive Summary.

TITLE

Community Programs Support

Provide a brief, descriptive title for this request.

AMOUNT

General: $4,723,089

Federal: $0

Other: $0

Total: $4,723,089

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS

0.00

Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
X	Change in cost of providing current services to existing program audience
X	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
X	Proposed establishment of a new program or initiative
X	Loss of federal or other external financial support for existing program
	Exhaustion of fund balances previously used to support program
	IT Technology/Security related
X	HR/Personnel Related
	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

ACCOUNTABILITY OF FUNDS

1.1.7 (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.2.2, 1.3.1 (FY 24 Accountability Report)

Services will be received by patients that require them. All funds will be monitored for their proper disbursement and utilization.

1.1.3, 6.1.1, and 6.1.2. (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.1.3 (FY 24 Accountability Report)

Services will be available to people in need.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS

OMH gives priority to adults, children, and their families affected by serious mental illnesses and significant emotional disorders. The agency is committed to eliminating stigma and promoting the philosophy of recovery, to achieving our goals in collaboration with all stakeholders, and to assuring the highest quality services possible. The requested funds are expended by the Department for the benefit of individual patients by providing needed mental health services.

The primary recipient of the funds would be the agency and the agency's contractor(s).

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

988 Call Center - $3,595,089

The 988 Suicide and Crisis Lifeline is a 24/7 number people in the United States can call, chat, or text if they are in a suicide or behavioral health crisis. Each state is expected to answer 90% of the state's incoming call volume, with a goal of answering 90% of chat and text volume as well. SC has two 988 call centers, one operated by Mental Health America of Greenville County (MHAGC) and the second operated by SC Department of Behavioral Health and Developmental Disabilities (BHDD) Charleston Dorchester Mental Health Center (CDMHC). Currently both call centers are funded by a combination of state appropriations and grant funds. The SAMHSA grant that has supported SC's increase in call answer rate ends in the Fall of 2026. At the same time, the call volume demand has increased by about 20% over the past year. Therefore, the 988 FY27 budget ask is to support: the current program expenditures after the grant ends; the additional staff needed to meet the increase in call demand; and the additional staff needed to answer the chat and text lines allowing SC to reach the goal of answering all forms of contact with SC staff. This funding, if received, will result in more people being connected to local resources and will provide life assisting interventions to the people in SC.

ADA Compliance Agreement - $1,128,000

In July 2023, the US Department of Justice ("DOJ") issued a report finding evidence that South Carolina violated the American with Disabilities Act ("ADA") and sued the state in December 2024. OMH disputes the allegations by the DOJ; however, the action provided OMH with an opportunity to improve patient care and settle the matter without litigation. The parties are engaged in negotiations, the details of which are confidential, but include expanding OMH's existing service array. Over the course of three years, every mental health center in South Carolina will have a second Mobile Crisis Team to respond to psychiatric crises. The program requires redundancy to address simultaneous psychiatric emergencies. This is the second of three reoccurring requests. OMH must have two Certified Peer Support Specialists ("CPSS") at every mental health center, in addition to the specialists on the Assertive Community Treatment ("ACT") teams, to better serve the needs of the serious mentally ill population. CPSSs are people with lived experience who have "walked the walk" of a recovery journey. Clinical staff heavily rely upon CPSSs to engage staff who otherwise may never adhere to treatment recommendations. Patients who are successfully engaged in care are less likely to present to emergency departments (EDs), hospitals, or in the criminal justice system. Permanent Supportive Housing includes rental assistance for seriously mentally ill patients who meet financial need

	requirements and have the ability to live independently.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	**4**

Provide the Agency Priority Ranking from the Executive Summary.

TITLE	**Expanding Recovery Community Organizations and Outreach Programs**

Provide a brief, descriptive title for this request.

AMOUNT	**General: $5,845,000** **Federal: $0** **Other: $0** **Total: $5,845,000**

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	**0.00**

Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
	Change in cost of providing current services to existing program audience
X	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
X	Proposed establishment of a new program or initiative
X	Loss of federal or other external financial support for existing program
X	Exhaustion of fund balances previously used to support program
	IT Technology/Security related
	HR/Personnel Related
	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

Funding would support the following strategies and performance measures:

1.1. Expanding access to primary prevention services that would reduce youth and young adult use of alcohol, tobacco, and other drugs. This request funds a prevention specialist in nine counties currently without one, and funds preventions strategies in all counties. Use of funds are evaluated with process measures and population health outcome measures.

1.2. Increasing and ensuring access to a continuum of evidence-based substance use disorder services, including maintaining recovery community organization capacity and increasing unduplicated persons connecting with services annually through those and other organizations.

1.3. Increasing services to patients with opioid use disorder by ensuring operability

ACCOUNTABILITY OF FUNDS	2.1. Reducing substance use disorders in South Carolina by increasing effectiveness of treatment and recovery programs through stabilization of staff and program operability for patient engagement and success. 3.1. Increasing healthcare integration efforts with local service providers to expand access to inpatient addiction treatment. 3.2. Increase access to substance use services for uninsured individuals needing care. This request ensures the availability of multiple levels of substance use services, and recovery community organizations' operations and outreach to citizens in need. It supports service provider organization operability and access to publicly funded addiction services. Use of funds will be evaluated by quality measures of direct service provision and number of citizens served.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	A competitive grant application process would be used for three-year competitive grant awards to sustain recovery community organizations providing outreach and peer services.

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	**Sustaining and Expanding Recovery Community Organizations and Outreach Programs - $2,000,000** This request represents investment in recovery support and outreach services through recovery community organizations. Recovery community organizations are unique by building local program capacity that provides outreach and engagement services to individuals and families currently struggling with alcohol and drug use who are often underserved without access to healthcare. They also provide services for those who are in recovery from substance use disorders working to build coping skills and resilience through peer and community connections, including coaching and mutual-aid support. One-time federal funds invested in recovery-centered organizations have proven extraordinarily successful in reaching unique populations and fostering community well-being. Last year with grant funding from the Office of Substance Use Services organizations conducted 957 Family Recovery Groups, 3,024 Substance Use Recovery Groups, 2,317 Family Recovery Coaching sessions, 14,280 Substance Use Recovery Coaching sessions, 2,882 referrals to social service supports, 771 referrals to substance use treatment, 52 Peer Support Certification trainings certifying 280 individuals. They engaged in 1,293 outreach and educational events. They guided 767 individuals in safe and affordable recovery housing and served 24,166 unique individuals statewide. Long-term funding is essential to ensuring access to services that are now seen as indispensable including peer service extensions to hospitals around the state. Without funds, services will not occur, and these organizations will struggle to survive. **Residential Treatment and Withdrawal Management Access - $3,845,000** This request represents the annual amount necessary to maintain medical withdrawal management services, transitional beds, and inpatient services to capacity at the county alcohol and drug authorities with those programs.

	Funds will help cover the increasing cost of operations, giving organizations the ability to attract and retain qualified medical and clinical staff, and support other essentials such as security, food, and linens, ensuring bed accessibility for patients regardless of their ability to pay. These programs offer short-term medical addiction stabilization and residential care for high-acuity patients who are uninsured and indigent. In FY24 the programs served 2,751 patients in these programs of those, 1,690 were uninsured and unable to pay for the services they received. In FY25 the programs served 2,526 patients of those, 1,339 were uninsured and unable to pay for care. Through a blend of grants and fee-for-service reimbursement, funds would ensure operability and accessibility of 40 withdrawal management beds, 63 residential beds, and 16 transitional beds. If funds are not received, programs will cut back operations by closing bed availability.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	**5**

Provide the Agency Priority Ranking from the Executive Summary.

TITLE	**Information Technology and Cyber Security Enhancement**

Provide a brief, descriptive title for this request.

AMOUNT	**General: $10,000,000** **Federal: $0** **Other: $0** **Total: $10,000,000**

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	**0.00**

Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
X	Change in cost of providing current services to existing program audience
	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
	Proposed establishment of a new program or initiative
	Loss of federal or other external financial support for existing program
	Exhaustion of fund balances previously used to support program
X	IT Technology/Security related
	HR/Personnel Related
	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

OIDD 1.1 Utilize least restrictive residential settings and supports

1.1.7 (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.2.2, 1.3.1 (FY 24 Accountability Report)

Services will be received by patients that require them. All funds will be monitored for their proper disbursement and utilization.

1.1.3, 6.1.1, and 6.1.2. (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.1.3 (FY 24 Accountability Report)

Services will be available to people in need. Inpatient and long-term care psychiatric services will be available when needed.

OSUS

ACCOUNTABILITY OF FUNDS

Funding would support the following strategies and performance measures:
1.1. Expanding access to primary prevention services that would reduce youth and young adult use of alcohol, tobacco, and other drugs. This request funds a prevention specialist in nine counties currently without one, and funds preventions strategies in all counties. Use of funds are evaluated with process measures and population health outcome measures.

1.2. Increasing and ensuring access to a continuum of evidence-based substance use disorder services, including maintaining recovery community organization capacity and increasing unduplicated persons connecting with services annually through those and other organizations.

1.3. Increasing services to patients with opioid use disorder by ensuring operability and access of programs for treatment and recovery.

2.1. Reducing substance use disorders in South Carolina by increasing effectiveness of treatment and recovery programs through stabilization of staff and program operability for patient engagement and success.

3.1. Increasing healthcare integration efforts with local service providers to expand access to inpatient addiction treatment.

3.2. Increase access to substance use services for uninsured individuals needing care.
This request ensures the availability of multiple levels of substance use services, and recovery community organizations' operations and outreach to citizens in need. It supports service provider organization operability and access to publicly funded addiction services. Use of funds will be evaluated by quality measures of direct service provision and number of citizens served.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS

OIDD statewide network of local Disabilities & Special Needs Boards and private providers would receive these funds allocated through service rate increases. OIDD Consumer patients residing in any of the 5 Regional Centers owned and operated by the state to support individuals with Intellectual & Developmental Disabilities.

OMH gives priority to adults, children, and their families affected by serious mental illnesses and significant emotional disorders. The agency is committed to eliminating stigma and promoting the philosophy of recovery, to achieving our goals in collaboration with all stakeholders, and to assuring the highest quality of services possible. The requested funds are expended by the Department for the benefit of individual patients by providing needed mental health services.

OSUS has a competitive grant application process which would be used for three-year competitive grant awards to sustain recovery community organizations providing outreach and peer services.

The primary recipient of the funds would be the agency and the agency's contractor(s).

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

Upgrade and consolidation of BHDD Network Infrastructure-$2,470,000

The current BHDD network is comprised of a patchwork of network equipment that is difficult to support and does not provide stable, secure connectivity, which is critical to

JUSTIFICATION OF REQUEST	deliver clinical services statewide. Replacing this network hardware and moving network support to Admin's IT shared services will provide sustainable, secure connectivity for all BHDD offices and improve clinical care technology support. **Upgrade and consolidation of BHDD Server Infrastructure-$1,680,000** Prior to the establishment of BHDD, OIDD and OMH operated their own data centers. With independent data center operation OIDD and OMH created islands of computing that did not conform to the shared services model. This created an environment with limited observability and culminated in many security vulnerabilities. With Admin's assistance, those data centers have been shut down as part of the move to the Health Campus. In addition, observability and security has immediately been improved. To fully adopt shared services, Admin will migrate BHDD stand-alone servers and storage appliances to the shared services server and storage platforms. The shared services server and storage platform provides redundant, secure services supported by highly specialized staff. Admin will migrate BHDD data and applications to Admin's shared services server and storage platform. Admin will also implement Disaster Recovery (DR) capabilities leveraging State DR standards and vendor provided services. **Upgrade and consolidation of Workplace Services (Email, Teams, SharePoint, Network Drives, Endpoints)- $5,550,000** OMH and OIDD currently manage independent desktop environments not managed under Admin's shared desktop services. The result of this independent operation has culminated in a lack of standardization including different email addresses, support, security and sustainability, which impacts the ability of BHDD to deliver clinical care statewide. Admin provides desktop shared services to many agencies and over 12,000 staff, which ensures standardization for email, One Drive, Teams and SharePoint, management of mobile devices, data protected storage and automated updates and security patching. Admin will migrate BHDD to the shared services desktop platform ensuring consistency in monitoring, operability, security and support. This move will also allow a common BHDD email address for all staff and ensures a standard of ongoing support backed by 24x7 IT support services. **Align Security Posture with SC State Standards-$300,000** OMH and OIDD has operated independently and outside of shared services, which has resulted a need for immediate security focused by Admin. Upon project initiation, Admin immediately began remediating security vulnerabilities and much progress has been made. It is necessary for Admin to continue to oversee security operations for BHDD and in doing so, Admin will engage specialized vendor support and tools to establish a secure operational environment. assessed Complete IT security assessments across the different technologies within BHDD Offices.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY

7

Provide the Agency Priority Ranking from the Executive Summary.

TITLE

Prevention and Addiction Services Expansion

Provide a brief, descriptive title for this request.

AMOUNT

General: $4,275,000

Federal: $0

Other: $0

Total: $4,275,000

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS

0.00

Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
X	Change in cost of providing current services to existing program audience
X	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
X	Proposed establishment of a new program or initiative
X	Loss of federal or other external financial support for existing program
X	Exhaustion of fund balances previously used to support program
	IT Technology/Security related
	HR/Personnel Related
	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

Funding would support the following strategies and performance measures:

1.1. Expanding access to primary prevention services that would reduce youth and young adult use of alcohol, tobacco, and other drugs. This request funds a prevention specialist in nine counties currently without one, and funds preventions strategies in all counties. Use of funds are evaluated with process measures and population health outcome measures.

1.2. Increasing and ensuring access to a continuum of evidence-based substance use disorder services, including maintaining recovery community organization capacity and increasing unduplicated persons connecting with services annually through those and other organizations.

1.3. Increasing services to patients with opioid use disorder by ensuring operability

ACCOUNTABILITY OF FUNDS

2.1. Reducing substance use disorders in South Carolina by increasing effectiveness of treatment and recovery programs through stabilization of staff and program operability for patient engagement and success.

3.1. Increasing healthcare integration efforts with local service providers to expand access to inpatient addiction treatment.

3.2. Increase access to substance use services for uninsured individuals needing care.

This request ensures the availability of multiple levels of substance use services, and recovery community organizations' operations and outreach to citizens in need. It supports service provider organization operability and access to publicly funded addiction services. Use of funds will be evaluated by quality measures of direct service provision and number of citizens served.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS

A competitive grant application process would be used for three-year competitive grant awards to sustain recovery community organizations providing outreach and peer services.

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

Addiction Treatment Services for Uninsured and Indigent - $3,000,000

$2,800,000 would support fee-for-service payment for clinical outpatient care, inpatient treatment, withdrawal management, case management, and methadone services. This request aligns with the Department of Health and Human Services increase in Medicaid reimbursement rates, as the Office of Substance Use Services strives to align payment for the uninsured with the Medicaid fee schedule.

Annually, the Office of Substance Use Services' federal grants and state funds fall short of paying for all the care delivered to uninsured and under-insured patients, leaving provider organizations with unpaid debt. If these funds are not received, the behavioral health service provider organizations committed to serving unfunded patients will be left operationally vulnerable, and patients will not receive care.

The request also represents the $200,000 needed to replace a one-time federal funding enhancement that supported reimbursement of the costs of transporting patients with no means of transportation to clinical care. The Office of Substance Use Services reimbursed $400,000 in costs during the last state fiscal year using federal and state funds to ensure patient access, particularly in rural areas. If funds are not received, patients needing coverage for transportation costs may not access care.

Prevention Services Expansion - $1,275,000

Represents $465,000 to support community-based prevention specialists in nine counties that are currently without these positions. With these funds, every county in the state would have a prevention specialist to engage in community prevention strategies and drug-free community coalition building. Currently multi-county agencies

are unable to dedicate a full-time prevention specialist to serve each county in the catchment area with the staff that are currently in place. The additional 9 specialists will ensure that each county in the state has at least one dedicated prevention specialist to work with the community partners and provide primary substance use prevention services to youth, adults, and families throughout the county.

Many of the multi-county agencies only have 2 specialists to cover 3 or more counties, therefore, service provision is limited to the capacity of the staff to spilt time conducting primary prevention services across the counties they serve. The $810,000 in formula grants to all counties for primary prevention service materials will increase the resources for all 31 county providers to purchase needed supplies and materials to implement effective primary prevention strategies throughout the state will increase the number of citizens impacted.

Investing in primary prevention programs that address higher-risk behaviors and work to prevent negative health outcomes before they occur can lessen the cost burden to public safety, the criminal justice system, education, healthcare, etc. long term. Investing in prevention can save lives and money. Additional resources provided across the state will increase the human capital needed to implement effective prevention programs and strategies. Without these funds, prevention services will lag in the nine counties where prevention work lacks a central coordinator, and primary substance use prevention strategies will fall behind.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	**8**

Provide the Agency Priority Ranking from the Executive Summary.

TITLE	**Law Enforcement and Jail Support Programs**

Provide a brief, descriptive title for this request.

AMOUNT	**General: $3,450,000** **Federal: $0** **Other: $0** **Total: $3,450,000**

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	**0.00**

Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
X	Change in cost of providing current services to existing program audience
X	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
X	Proposed establishment of a new program or initiative
	Loss of federal or other external financial support for existing program
	Exhaustion of fund balances previously used to support program
	IT Technology/Security related
X	HR/Personnel Related
	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

ACCOUNTABILITY OF FUNDS

1.1.7 (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.2.2, 1.3.1 (FY 24 Accountability Report)

Services will be received by patients that require them. All funds will be monitored for their proper disbursement and utilization.

1.1.3, 6.1.1, and 6.1.2. (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.1.3 (FY 24 Accountability Report)

Services will be available to people in need.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS

OMH gives priority to adults, children, and their families affected by serious mental illnesses and significant emotional disorders. The agency is committed to eliminating stigma and promoting the philosophy of recovery, to achieving our goals in collaboration with all stakeholders, and to assuring the highest quality of services possible. The requested funds are expended by the Department for the benefit of individual patients by providing needed mental health services.

The primary recipient of the funds would be the agency and the agency's contractor(s).

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

Berkeley and Orangeburg County Jail Based Programs - $800,000

The Department is requesting recurring funding to replace the non-recurring funds received over the past several fiscal years used to support the pilot program between the Berkeley Community Mental Health Center and the Berkeley County Sheriff's Department Hill-Finklea Detention Center. Some individuals who are incarcerated have a diagnosable serious mental illness. The Berkeley program demonstrates that increased access to care decreases safety concerns and recidivism post-release from the detention center. The agency is seeking to continue the program in Berkeley County and continue the second program in Orangeburg County.

Alternative Transportation Program - $2,650,000

OMH was provided recurring and nonrecurring funding from the General Assembly in FY25-26 to expand the pilot program statewide to transport non-violent adult psychiatric patients who are the subject of an involuntary psychiatric emergency admission. Transport is provided by a private contractor utilizing specially equipped unmarked vehicles and drivers with mental health training wearing professional civilian attire. This recurring funding request replaces nonrecurring funds received last fiscal year. To date, approximately 2,500 transports have been completed utilizing this program. The program does not replace the need for law enforcement to provide some patient transports; however, the program has proven to significantly reduce the number of law enforcement transports and provides a more appropriate means of transportation that alleviates the stigma and reduces patient anxiety and stress for those non-violent patients who have committed no crime.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	**11**

Provide the Agency Priority Ranking from the Executive Summary.

TITLE	**Unified Care Platform Technology**

Provide a brief, descriptive title for this request.

AMOUNT	**General: $39,000,000** **Federal: $0** **Other: $0** **Total: $39,000,000**

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	**0.00**

Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	**Mark "X" for all that apply:**
	Change in cost of providing current services to existing program audience
	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
	Proposed establishment of a new program or initiative
	Loss of federal or other external financial support for existing program
	Exhaustion of fund balances previously used to support program
X	IT Technology/Security related
	HR/Personnel Related
	Consulted DTO during development
	Related to a Non-Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	**Mark "X" for primary applicable Statewide Enterprise Strategic Objective:**
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

OIDD 1.1 Utilize least restrictive residential settings and supports

1.1.7 (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.2.2, 1.3.1 (FY 24 Accountability Report)

Services will be received by patients that require them. All funds will be monitored for their proper disbursement and utilization.

1.1.3, 6.1.1, and 6.1.2. (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

ACCOUNTABILITY OF FUNDS

1.1.3 (FY 24 Accountability Report)

Services will be available to people in need. Inpatient and long-term care psychiatric services will be available when needed.

OSUS

Funding would support the following strategies and performance measures:
1.1. Expanding access to primary prevention services that would reduce youth and young adult use of alcohol, tobacco, and other drugs. This request funds a prevention specialist in nine counties currently without one, and funds preventions strategies in all counties. Use of funds are evaluated with process measures and population health outcome measures.

1.2. Increasing and ensuring access to a continuum of evidence-based substance use disorder services, including maintaining recovery community organization capacity and increasing unduplicated persons connecting with services annually through those and other organizations.

1.3. Increasing services to patients with opioid use disorder by ensuring operability and access of programs for treatment and recovery.

2.1. Reducing substance use disorders in South Carolina by increasing effectiveness of treatment and recovery programs through stabilization of staff and program operability for patient engagement and success.

3.1. Increasing healthcare integration efforts with local service providers to expand access to inpatient addiction treatment.

3.2. Increase access to substance use services for uninsured individuals needing care.
This request ensures the availability of multiple levels of substance use services, and recovery community organizations' operations and outreach to citizens in need. It supports service provider organization operability and access to publicly funded addiction services. Use of funds will be evaluated by quality measures of direct service provision and number of citizens served.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS

The primary recipient of the funds will be contractors and vendors through which the agency procures the technical functionality.

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

The Department requests state funding to implement a Unified Care Platform that modernizes and integrates the State's behavioral health and developmental disability information systems. The platform will replace outdated, disconnected technologies with a single secure system that supports coordinated care, enhances accountability, and improves outcomes for individuals served across South Carolina. Demand for behavioral health, substance use, and developmental disability services continues to rise statewide, while existing technology systems remain fragmented and inefficient. Providers, families, and regional offices rely on multiple legacy programs that cannot share information, leading to delays, duplicated work, and gaps in care.

A unified platform is necessary to:

•Improve continuity of care through real-time information-sharing among authorized

providers.

JUSTIFICATION OF REQUEST	•Reduce administrative burden by consolidating assessments, reporting, and case management functions. •Support stronger oversight using standardized outcomes data and improved fiscal tracking. •Enhance service access for individuals and families navigating multiple programs. State investment is essential to establish the core infrastructure needed to coordinate care across South Carolina's behavioral health and disability systems. Without modernization, the Department's ability to meet state and federal reporting requirements, respond to growing service demand, and manage resources effectively will remain limited. The Unified Care Platform will position the State to make data-driven decisions, improve service quality, and ensure the responsible stewardship of public funds. The Unified Care Platform is a critical modernization initiative that will strengthen South Carolina's behavioral health and developmental disability service delivery system. This investment will improve outcomes, enhance accountability, and ensure individuals and families receive coordinated, high-quality care.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	6

Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Information Technology and Cyber Security Enhancement

Provide a brief, descriptive title for this request.

AMOUNT	$14,100,000

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
	Change in cost of providing current services to existing program audience
	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
	Proposed establishment of a new program or initiative
	Loss of federal or other external financial support for existing program
	Exhaustion of fund balances previously used to support program
X	IT Technology/Security related
	Consulted DTO during development
	HR/Personnel Related
	Request for Non-Recurring Appropriations
	Request for Federal/Other Authorization to spend existing funding
	Related to a Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

OIDD 1.1 Utilize least restrictive residential settings and supports

1.1.7 (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.2.2, 1.3.1 (FY 24 Accountability Report)

Services will be received by patients that require them. All funds will be monitored for their proper disbursement and utilization.

1.1.3, 6.1.1, and 6.1.2. (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.1.3 (FY 24 Accountability Report)

Services will be available to people in need. Inpatient and long-term care psychiatric services will be available when needed.

OSUS

ACCOUNTABILITY OF FUNDS	Funding would support the following strategies and performance measures: 1.1. Expanding access to primary prevention services that would reduce youth and young adult use of alcohol, tobacco, and other drugs. This request funds a prevention specialist in nine counties currently without one, and funds preventions strategies in all counties. Use of funds are evaluated with process measures and population health outcome measures. 1.2. Increasing and ensuring access to a continuum of evidence-based substance use disorder services, including maintaining recovery community organization capacity and increasing unduplicated persons connecting with services annually through those and other organizations. 1.3. Increasing services to patients with opioid use disorder by ensuring operability and access of programs for treatment and recovery. 2.1. Reducing substance use disorders in South Carolina by increasing effectiveness of treatment and recovery programs through stabilization of staff and program operability for patient engagement and success. 3.1. Increasing healthcare integration efforts with local service providers to expand access to inpatient addiction treatment. 3.2. Increase access to substance use services for uninsured individuals needing care. This request ensures the availability of multiple levels of substance use services, and recovery community organizations' operations and outreach to citizens in need. It supports service provider organization operability and access to publicly funded addiction services. Use of funds will be evaluated by quality measures of direct service provision and number of citizens served.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS	OIDD statewide network of local Disabilities & Special Needs Boards and private providers would receive these funds allocated through service rate increases. OIDD Consumer patients residing in any of the 5 Regional Centers owned and operated by the state to support individuals with Intellectual & Developmental Disabilities. OMH gives priority to adults, children, and their families affected by serious mental illnesses and significant emotional disorders. The agency is committed to eliminating stigma and promoting the philosophy of recovery, to achieving our goals in collaboration with all stakeholders, and to assuring the highest quality of services possible. The requested funds are expended by the Department for the benefit of individual patients by providing needed mental health services. OSUS has a competitive grant application process which would be used for three-year competitive grant awards to sustain recovery community organizations providing outreach and peer services. The primary recipient of the funds would be the agency and the agency's contractor(s).

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

	Upgrade and consolidation of BHDD Server Infrastructure-$1,300,000 Prior to the establishment of BHDD, OIDD and OMH operated their own data centers. With independent data center operation OIDD and OMH created islands of computing that did not conform to the shared services model. This created an environment with limited observability and culminated in many security vulnerabilities.

JUSTIFICATION OF REQUEST

With the Department of Administration's assistance, those data centers have been shut down as part of the move to the Health Campus. In addition, observability and security has immediately been improved. To fully adopt shared services, Admin will migrate BHDD stand-alone servers and storage appliances to the shared services server and storage platforms.

The shared services server and storage platform provides redundant, secure services supported by highly specialized staff. The Department of Administration will migrate BHDD data and applications to the shared services server and storage platform. Department of Administration will also implement Disaster Recovery (DR) capabilities leveraging State DR standards and vendor provided services.

Upgrade and consolidation of Workplace Services (Email, Teams, SharePoint, Network Drives, Endpoints)- $9,000,000

OMH and OIDD currently have independent desktop environments not managed under shared desktop services. The result of this independent operation has culminated in a lack of standardization including different email addresses, support, security and sustainability, which impacts the ability of BHDD to deliver clinical care statewide.

The Department of Administration provides desktop shared services to many agencies and over 12,000 staff, which ensures standardization for email, One Drive, Teams and SharePoint, management of mobile devices, data protected storage and automated updates and security patching.

The Department of Administration will migrate BHDD to the shared services desktop platform ensuring consistency in monitoring, operability, security and support. This move will also allow a common BHDD email address for all staff and ensures a standard of ongoing support backed by 24/7 IT support services.

Align Security Posture with SC State Standards-$1,300,000

OMH and OIDD has operated independently and outside of shared services, which has resulted a need for immediate security focused by the Department of Administration. Upon project initiation, The Department of Administration immediately began remediating security vulnerabilities and much progress has been made.

It is necessary for the Department of Administration to continue to oversee security operations for BHDD and in doing so, will engage specialized vendor support and tools to establish a secure operational environment.

Provide Oversight Professional Services (Management and Admin)-$2,500,000

In support of Proviso 117.107, the Department of Administration provides IT shared services to over 45 agencies in the state. This year they successfully migrated four agencies and is actively working to migrate another 5 agencies in the next year. The process of migration is highly technical, complex and time consuming. The Department of Administration utilizes state contract vendors to provide highly specialized skills to aid in the process of migration. This practice ensures that they can provide rapid results while minimizing risk for state agency customers and the citizens that they serve.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY

9

Provide the Agency Priority Ranking from the Executive Summary.

TITLE

Unclaimed Lottery Prize Money for Compulsive Gambling Services

Provide a brief, descriptive title for this request.

AMOUNT

$250,000

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
	Change in cost of providing current services to existing program audience
	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
	Proposed establishment of a new program or initiative
	Loss of federal or other external financial support for existing program
	Exhaustion of fund balances previously used to support program
	IT Technology/Security related
	Consulted DTO during development
	HR/Personnel Related
X	Request for Non-Recurring Appropriations
	Request for Federal/Other Authorization to spend existing funding
	Related to a Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

ACCOUNTABILITY OF FUNDS

Funding would support the following strategies and performance measures:

2.1. Reducing substance use disorders in South Carolina by increasing effectiveness of treatment and recovery programs through stabilization of staff and program operability for patient engagement and success.

3.2. Increase access to substance use services for uninsured individuals needing care.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS

OSUS would continue to contract with County alcohol and drug abuse authorities offering fee-for-service billing opportunity to ensure availability of clinical services.

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon

predetermined eligibility criteria?

JUSTIFICATION OF REQUEST	Section 59-150-230 (I) of the South Carolina Education Lottery Act directs that a portion of unclaimed prize money - to be determined through the annual appropriations process - be appropriated to OSUS for the prevention and treatment of compulsive gambling and educational programs related to gambling disorders. These activities are to include a resource to call for problem gambling, prevention programming, and the implementation of public education efforts, as well as availability of behavioral health services for compulsive gambling disorder. OSUS Proviso 37.2 of Part 1B of Act 91 of the General Appropriations Act, positions OSUS as the primary resources for services related to compulsive gambling and directs the Department to provide information, education, and referral services to local behavioral health provider network for a comprehensive system of problem and pathological gambling. OSUS contracts with the County Alcohol and Drug Abuse Authorities to provide gambling treatment services for problem and pathological gamblers. Without funds, direct services for problem gambling will not be available for those individuals who have no means to pay for clinical care. This request is asking that the $250,000.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY

12

Provide the Agency Priority Ranking from the Executive Summary.

TITLE

Unified Care Platform Technology

Provide a brief, descriptive title for this request.

AMOUNT

$63,000,000

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
	Change in cost of providing current services to existing program audience
	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
	Proposed establishment of a new program or initiative
	Loss of federal or other external financial support for existing program
	Exhaustion of fund balances previously used to support program
X	IT Technology/Security related
	Consulted DTO during development
	HR/Personnel Related
	Request for Non-Recurring Appropriations
	Request for Federal/Other Authorization to spend existing funding
	Related to a Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

OIDD 1.1 Utilize least restrictive residential settings and supports

1.1.7 (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.2.2, 1.3.1 (FY 24 Accountability Report)

Services will be received by patients that require them. All funds will be monitored for their proper disbursement and utilization.

1.1.3, 6.1.1, and 6.1.2. (FY 24 Accountability Report)

BHDD OMH offers an array of programs and services. All funds requested will be monitored for their proper disbursement and utilization.

1.1.3 (FY 24 Accountability Report)

Services will be available to people in need. Inpatient and long-term care psychiatric services will be available when needed.

OSUS

ACCOUNTABILITY OF FUNDS

Funding would support the following strategies and performance measures:
1.1. Expanding access to primary prevention services that would reduce youth and young adult use of alcohol, tobacco, and other drugs. This request funds a prevention specialist in nine counties currently without one, and funds preventions strategies in all counties. Use of funds are evaluated with process measures and population health outcome measures.

1.2. Increasing and ensuring access to a continuum of evidence-based substance use disorder services, including maintaining recovery community organization capacity and increasing unduplicated persons connecting with services annually through those and other organizations.

1.3. Increasing services to patients with opioid use disorder by ensuring operability and access of programs for treatment and recovery.

2.1. Reducing substance use disorders in South Carolina by increasing effectiveness of treatment and recovery programs through stabilization of staff and program operability for patient engagement and success.

3.1. Increasing healthcare integration efforts with local service providers to expand access to inpatient addiction treatment.

3.2. Increase access to substance use services for uninsured individuals needing care. This request ensures the availability of multiple levels of substance use services, and recovery community organizations' operations and outreach to citizens in need. It supports service provider organization operability and access to publicly funded addiction services. Use of funds will be evaluated by quality measures of direct service provision and number of citizens served.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS

The primary recipient of the funds will be contractors and vendors through which the agency procures the technical functionality.

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

The Department requests state funding to implement a Unified Care Platform that modernizes and integrates the State's behavioral health and developmental disability information systems. The platform will replace outdated, disconnected technologies with a single secure system that supports coordinated care, enhances accountability, and improves outcomes for individuals served across South Carolina. Demand for behavioral health, substance use, and developmental disability services continues to rise statewide, while existing technology systems remain fragmented and inefficient. Providers, families, and regional offices rely on multiple legacy programs that cannot share information, leading to delays, duplicated work, and gaps in care.

A unified platform is necessary to:

•Improve continuity of care through real-time information-sharing among authorized providers.

•Reduce administrative burden by consolidating assessments, reporting, and case management functions.

•Support stronger oversight using standardized outcomes data and improved fiscal

tracking.

•Enhance service access for individuals and families navigating multiple programs.

State investment is essential to establish the core infrastructure needed to coordinate care across South Carolina's behavioral health and disability systems. Without modernization, the Department's ability to meet state and federal reporting requirements, respond to growing service demand, and manage resources effectively will remain limited. The Unified Care Platform will position the State to make data-driven decisions, improve service quality, and ensure the responsible stewardship of public funds. The Unified Care Platform is a critical modernization initiative that will strengthen South Carolina's behavioral health and developmental disability service delivery system. This investment will improve outcomes, enhance accountability, and ensure individuals and families receive coordinated, high-quality care.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY

13

Provide the Agency Priority Ranking from the Executive Summary.

TITLE

Greenwood Genetics - Physical and Cybersecurity Enhancements & Alzheimer's Initiative

Provide a brief, descriptive title for this request.

AMOUNT

$2,150,000

What is the net change in requested appropriations for FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
	Change in cost of providing current services to existing program audience
	Change in case load/enrollment under existing program guidelines
	Non-mandated change in eligibility/enrollment for existing program
	Non-mandated program change in service levels or areas
	Proposed establishment of a new program or initiative
	Loss of federal or other external financial support for existing program
	Exhaustion of fund balances previously used to support program
	IT Technology/Security related
	Consulted DTO during development
	HR/Personnel Related
X	Request for Non-Recurring Appropriations
	Request for Federal/Other Authorization to spend existing funding
	Related to a Recurring request – If so, Priority #

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES

Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	Education, Training, and Human Development
X	Healthy and Safe Families
	Maintaining Safety, Integrity, and Security
	Public Infrastructure and Economic Development
	Government and Citizens

ACCOUNTABILITY OF FUNDS

This is a research and development investment to improve and expand existing specialized genetic service levels. The number of infants and children requiring more extensive and expensive services will be reduced if prompt curative treatment is received. The use of genomic technologies will optimize primary prevention and treatment options for individuals with intellectual disabilities and their families.

What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF FUNDS

The Greenwood Genetic Center (GGC) would receive these funds.

What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon

predetermined eligibility criteria?

JUSTIFICATION OF REQUEST

Summary of GGC's FY2027 Request:

- $900,000 (non-recurring): Physical and cybersecurity enhancements for five decades of clinical and genomic data and samples.

- $1,250,000 (non-recurring): Continuation of the SC Carroll A. Campbell, Jr Alzheimer's Initiative.

For over 50 years, GGC has collected and maintained extensive clinical, genetic, and genomic data, and retained DNA and RNA biological samples from almost 500,000 patients. Recognizing the highly sensitive and confidential nature of this data and these samples, GGC is committed to ensuring their protection. However, with the increasing sophistication and persistence of both domestic and international cyber threats, we are respectfully requesting $900,000 in non-recurring funds to strengthen both the physical and cybersecurity systems safeguarding this critical data and these irreplaceable samples.

In addition, with the support of a $2,000,000 non-recurring state appropriation in FY2024, GGC and its partners embarked on the Carroll A. Campbell, Jr. Alzheimer's Initiative (CCI) to pursue innovative cellular therapies for the treatment of Alzheimer's disease and other neurodegenerative disorders. The primary focus of the CCI is to explore the use of mitochondrial organelle transplantation (MOTTM) as a therapy for adult and pediatric conditions associated with mitochondrial dysfunction. MOTTM is a therapy that isolates mitochondria from healthy cells and delivers them into cells with defective mitochondrial function (a common feature of many disorders like ALS and Alzheimer's disease) to improve the neurodegeneration associated with these and other rare conditions that impact both children and adults.

Through this initiative, GGC and its partners have already made significant progress to establish the necessary research infrastructure for this project, including laboratory renovations on GGC's Greenwood campus and the acquisition of specialized instrumentation allowing for the production of cellular therapies for testing in cell and animal models.

The CCI team has prioritized three high-impact areas of research:

1. Clinical Trial Development using mitochondrial organelle transplantation in patients with ALS at the VA hospital in Florida, with the goal of expanding trials to patients with Alzheimer's disease.

2. Preclinical Studies to test the efficacy of mitochondrial organelle transplantation in mouse models of Alzheimer's disease and pediatric mitochondrial disorders, with a forthcoming publication demonstrating promising results.

3. Mechanistic Investigation into mitochondrial uptake and trafficking led by GGC researchers, which may inform combination therapies to enhance the effectiveness of the mitochondrial transplantation.

The continuation of this initiative is essential to advancing potential therapies to improve the quality of life for patients and families while reducing healthcare costs to the State. To sustain this momentum, GGC respectfully requests $1,250,000 in non-recurring funding in FY2027.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
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FORM C – CAPITAL REQUEST

AGENCY PRIORITY

10

Provide the Agency Priority Ranking from the Executive Summary.

TITLE

OIDD Community Owned Homes

Provide a brief, descriptive title for this request.

AMOUNT

$4,000,000

How much is requested for this project in FY 2026-2027? This amount should correspond to the total for all funding sources on the Executive Summary.

CPIP PRIORITY

N/A

Identify the project's CPIP plan year and priority number, along with the first year in which the project was included in the agency's CPIP. If not included in the agency's CPIP, please provide an explanation. If the project involves a request for appropriated state funding, briefly describe the agency's contingency plan in the event that state funding is not made available in the amount requested.

OTHER APPROVALS

None other required unless single home renovation exceeds the 250K threshold for JBRC approval.

What approvals have already been obtained? Are there additional approvals that must be secured in order for the project to succeed? (Institutional board, JBRC, SFAA, etc.)

LONG-TERM PLANNING AND SUSTAINABILITY

Long term planning, these properties will be removed from the state's obligation for continued deferred maintenance. With transfer of ownership to local DSN Boards, homes can be better tailored to their constituents that are served within a radius of the proximity of each home.

What other funds have already been invested in this project (source/type, amount, timeframe)? Will other capital and/or operating funds for this project be requested in the future? If so, how much, and in which fiscal years? Has a source for those funds been identified/secured? What is the agency's expectation with regard to additional annual costs or savings associated with this capital improvement? What source of funds will be impacted by those costs or savings? What is the expected useful life of the capital improvement?

To increase residential capacity in the community, OIDD purchased buildings for local providers to operate. A November 2017 Senate Oversight Report recommended that OIDD divest itself of properties within the community by transitioning the OIDD-owned properties to the providers who operate them. Significant deferred maintenance needs must be addressed prior to conveyance as outlined in proviso 36.6.

OIDD solicited and received assessments for maintenance and improvements of OIDD-owned properties operated by providers and surveyed providers to determine willingness to consider a property transfer. OIDD is seeking non-recurring funding for deferred maintenance needs to restore properties to an acceptable standard to encourage local providers to accept conveyance.

SUMMARY

Provide a summary of the project and explain why it is necessary. Please refer to the budget guidelines for appropriate questions and thoroughly answer all related items.

Agency Name:	Department of Behavioral Health & Developmental Disabilities		
Agency Code:	J080	Section:	34

FORM D – PROVISO REVISION REQUEST

NUMBER	34.New
	Cite the proviso according to the renumbered list (or mark "NEW").
TITLE	Executive Leadership Covered Status
	Provide the title from the renumbered list or suggest a short title for any new request.
BUDGET PROGRAM	N/A
	Identify the associated budget program(s) by name and budget section.
RELATED BUDGET REQUEST	N/A
	Is this request associated with a budget request you have submitted for FY 2026-2027? If so, cite it here.
REQUESTED ACTION	Add
	Choose from: Add, Delete, Amend, or Codify.
OTHER AGENCIES AFFECTED	None.
	Which other agencies would be affected by the recommended action? How?
SUMMARY & EXPLANATION	The proviso will provide BHDD flexibility in the recruiting, hiring, retention practices of the future leadership and executive staff within the agency.

Summarize the existing proviso. If requesting a new proviso, describe the current state of affairs without it. Explain the need for your requested action. For deletion requests due to recent codification, please identify SC Code section where language now appears.

FISCAL IMPACT

N/A

Provide estimates of any fiscal impacts associated with this proviso, whether for state, federal, or other funds. Explain the method of calculation.

PROPOSED PROVISO TEXT

34.ELCS The following Full-time Equivalent (FTE) positions authorized and for which funds are appropriated in Part IA of this act serve in an at-will capacity and are exempt from the provisions of Article 5, Chapter 17 of Title 8 of the S.C. Code of Laws:

1) Any position, regardless of title or the organizational reporting structure for that position, functioning as the director or administrative head of an Office or Division of the Department of Behavioral Health and Developmental Disabilities.

2) Any position that reports directly to a position functioning as the director or administrative head of an Office or Division of the Department of Behavioral Health and Developmental Disabilities.

3) Any position, regardless of title or organizational reporting structure, functioning as the director or administrative head of (a) financial operations, (b) human resources, or (c) legal affairs for the Department of Behavioral Health and Developmental Disabilities.

The exemptions established by this proviso are in addition to and should be read in conjunction with any permanent law regarding the at-will status of any other FTE position within the Department of Behavioral Health and Developmental Disabilities.

Paste existing text above, then bold and underline insertions and strikethrough deletions. For new proviso requests, enter requested text above.