

South Carolina General Assembly
117th Session, 2007-2008

A168, R94, H3135

STATUS INFORMATION

Joint Resolution

Sponsors: Reps. J.E. Smith, Funderburk and Cotty

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Companion/Similar bill(s): 353

Introduced in the House on January 9, 2007

Introduced in the Senate on February 27, 2007

Last Amended on February 22, 2007

Passed by the General Assembly on May 30, 2007

Governor's Action: June 6, 2007, Signed

Summary: Statewide Comprehensive Service Delivery System

HISTORY OF LEGISLATIVE ACTIONS

Date	Body	Action Description with journal page number
12/13/2006	House	Prefiled
12/13/2006	House	Referred to Committee on Medical, Military, Public and Municipal Affairs
1/9/2007	House	Introduced and read first time HJ-73
1/9/2007	House	Referred to Committee on Medical, Military, Public and Municipal Affairs HJ-73
1/23/2007	House	Member(s) request name added as sponsor: Funderburk
1/25/2007	House	Member(s) request name added as sponsor: Cotty
2/21/2007	House	Committee report: Favorable with amendment Medical, Military, Public and Municipal Affairs HJ-6
2/22/2007	House	Amended HJ-24
2/22/2007	House	Read second time HJ-25
2/22/2007	House	Unanimous consent for third reading on next legislative day HJ-25
2/22/2007		Scrivener's error corrected
2/23/2007	House	Read third time and sent to Senate HJ-2
2/23/2007		Scrivener's error corrected
2/27/2007	Senate	Introduced and read first time SJ-6
2/27/2007	Senate	Referred to Committee on Medical Affairs SJ-6
5/23/2007	Senate	Committee report: Favorable with amendment Medical Affairs SJ-53
5/24/2007		Scrivener's error corrected
5/24/2007	Senate	Committee Amendment Adopted SJ-40
5/24/2007	Senate	Read second time SJ-40
5/29/2007	Senate	Read third time and returned to House with amendments SJ-34
5/30/2007	House	Concurred in Senate amendment and enrolled HJ-39
5/31/2007		Ratified R 94
6/6/2007		Signed By Governor
6/13/2007		Copies available
6/13/2007		Effective date 06/06/07
7/30/2007		Act No. 168

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VERSIONS OF THIS BILL

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(A168, R94, H3135)

A JOINT RESOLUTION TO ESTABLISH A STUDY COMMITTEE TO DEVELOP A STATEWIDE COMPREHENSIVE SERVICE DELIVERY SYSTEM FOR PERSONS WITH EPILEPSY IN THIS STATE AND TO PROVIDE FOR THE MEMBERSHIP, DUTIES, AND RESPONSIBILITIES OF THE STUDY COMMITTEE.

Whereas, the identification and planning of systems to provide service delivery for persons with epilepsy is vital; and

Whereas, the treatment, the education, and the training of the public and professional service providers, and the treatment and rehabilitation of persons with epilepsy is an investment that benefits all of society; and

Whereas, the goal of a comprehensive epilepsy program is to improve the health and welfare of persons with epilepsy by assisting them in the attainment of optimum physical, psychological, and social potential in order to enhance their quality of life and to enable them to engage in a useful and productive life; and

Whereas, various studies have been conducted that provide data on the needs of persons with epilepsy, and specifically in South Carolina this data shows that 2.2% or 90,000 individuals have had epilepsy sometime in their lifetime and 1.1% or 44,000 have epilepsy requiring treatment; and

Whereas, the prevalence of epilepsy is expected to increase with the aging population and the return of head-injured veterans; and

Whereas, 64% of those adults with active epilepsy are disabled; and

Whereas, the rate of psychological impairment in people with active epilepsy is twice the rate of impairment in those people who do not have epilepsy; and

Whereas, it is imperative to coordinate care providers in order to provide the diverse and needed resources for persons with epilepsy to enable these persons to maintain or regain their highest quality of life and level of productivity possible. Now, therefore,

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

Study Committee on Service Delivery for Persons with Epilepsy; created

SECTION 1. (A) There is created the Study Committee on Service Delivery for Persons with Epilepsy. This committee shall review the multifaceted needs of persons with epilepsy in this State and the available resources to meet these needs and shall develop a statewide comprehensive plan for the delivery of multifaceted services to persons with epilepsy.

(B) The committee is composed of:

- (1) one member of the public at large to be appointed by the Governor;
- (2) one member of the Senate to be appointed by the President Pro Tempore of the Senate;
- (3) one member of the House of Representatives to be appointed by the Speaker of the House;
- (4) one representative from each of the following state agencies:
 - (a) the Department of Health and Environmental Control;
 - (b) the Department of Health and Human Services;
 - (c) the Department of Disabilities and Special Needs;
 - (d) the Department of Vocational Rehabilitation;
- (5) one representative from each of the following to be appointed by the Governor:
 - (a) the Epilepsy Foundation of South Carolina, upon the recommendation of the foundation's board;
 - (b) a community-based neurological practitioner, upon the recommendation of the South Carolina Medical Association;
 - (c) a nurse practitioner, upon the recommendation of the South Carolina Nurses Association;
 - (d) one adult consumer, upon the recommendation of the Epilepsy Foundation of South Carolina; and

(e) one member who is the parent of a pediatric consumer, upon the recommendation of the Epilepsy Foundation of South Carolina.

(C) The at-large public member appointed by the Governor shall serve as chairman.

(D) Vacancies occurring on the committee must be filled in the same manner as the original appointment.

(E) The Department of Health and Human Services shall provide and coordinate staffing for the study committee.

(F) Members of the study committee will serve without mileage, per diem, and subsistence.

Study committee, duties and responsibilities

SECTION 2. (A) The committee shall develop a specific plan for a coordinated approach to service delivery for persons with epilepsy, using the resources of both the public and private sectors. The plan must include, but is not limited to:

(1) a definition of epilepsy;

(2) a statewide system that addresses the issues of prevention, identification, treatment, rehabilitation, and community integration of people with epilepsy and must include, but is not limited to:

(a) designation of a lead agency for each person with epilepsy, which shall assume primary responsibility for coordination of service delivery for that person;

(b) a case management system;

(c) medical care and long-term care monitoring;

(d) education;

(e) employment;

(f) housing;

(g) mental health;

(h) independent living services;

(i) access to and availability of treatment resources;

(3) recommendations for the expansion of Medicare or Medicaid, or both, and other financial services to address the needs of the epilepsy population, including families;

(4) a data system in which epilepsy and seizure disorders can be identified from existing data sources to continually track and monitor the incidence and prevalence of epilepsy, including mortality and morbidity;

(5) recommendations for education programs to inform the public about epilepsy, its causes, prevention, employment, first responder treatment, and availability of treatment and services. The

committee shall explore instituting more programs in the public schools, kindergarten through twelfth grade and institutions of higher learning, to promote awareness of epilepsy as a growing problem and shall explore incorporating epilepsy as part of the curriculum in medical schools;

(6) recommendations for policy and legislative changes that may be needed including, but not limited to, insurance, employment, prevention, motor vehicle driving, and public and personal safety practices.

(B) In carrying out its responsibilities under this joint resolution, the chairman may appoint subcommittees as he or she considers appropriate. The committee and subcommittees may utilize the knowledge and expertise of any individual in another state agency, group, or association.

(C) The committee shall submit its report to the General Assembly before July 1, 2008, at which time the Study Committee on Service Delivery for Persons with Epilepsy is abolished.

Time effective

SECTION 3. This joint resolution takes effect upon approval by the Governor.

Ratified the 31st day of May, 2007.

Approved the 6th day of June, 2007.
