

Agency Name:	Department Of Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81



Fiscal Year FY 2021-2022

Agency Budget Plan

FORM A - BUDGET PLAN SUMMARY

OPERATING REQUESTS <i>(FORM B1)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input checked="" type="checkbox"/>	Requesting General Fund Appropriations.
	<input checked="" type="checkbox"/>	Requesting Federal/Other Authorization.
	<input type="checkbox"/>	Not requesting any changes.

NON-RECURRING REQUESTS <i>(FORM B2)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input checked="" type="checkbox"/>	Requesting Non-Recurring Appropriations.
	<input type="checkbox"/>	Requesting Non-Recurring Federal/Other Authorization.
	<input type="checkbox"/>	Not requesting any changes.

CAPITAL REQUESTS <i>(FORM C)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input type="checkbox"/>	Requesting funding for Capital Projects.
	<input checked="" type="checkbox"/>	Not requesting any changes.
	<input type="checkbox"/>	

PROVISOS <i>(FORM D)</i>	For FY 2021-2022, my agency is (mark "X"):	
	<input checked="" type="checkbox"/>	Requesting a new proviso and/or substantive changes to existing provisos.
	<input type="checkbox"/>	Only requesting technical proviso changes (such as date references).
	<input type="checkbox"/>	Not requesting any proviso changes.

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

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
PRIMARY CONTACT:	Abhijit Deshpande	(803) 896-4320	abhijit.deshpande@llr.sc.gov
SECONDARY CONTACT:	Patrick Jarvis	(803) 896-4315	patrick.jarvis@llr.sc.gov

I have reviewed and approved the enclosed FY 2021-2022 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	<u>Agency Director</u>	<u>Board or Commission Chair</u>
SIGN/DATE:		
TYPE/PRINT NAME:		

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

Agency Name:	<u>Department Of Labor, Licensing & Regulation</u>
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BUDGET REQUESTS			FUNDING					FTES				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B1 - Recurring	Employer Contributions	0	0	3,180,000	0	3,180,000	0.00	0.00	0.00	0.00	0.00
2	B1 - Recurring	V-SAFE	0	0	3,500,000	0	3,500,000	0.00	0.00	0.00	0.00	0.00
3	B1 - Recurring	Personal Services	0	0	2,560,600	0	2,560,600	0.00	0.00	0.00	0.00	0.00
4	B1 - Recurring	IT Security Plan	0	0	500,000	0	500,000	0.00	0.00	0.00	0.00	0.00
5	B1 - Recurring	OSHA Matching Funds	0	0	500,000	0	500,000	0.00	0.00	0.00	0.00	0.00
6	B1 - Recurring	Federal Funds	0	1,000,000	0	0	1,000,000	0.00	0.00	0.00	0.00	0.00
7	B2 - Non-Recurring	Sumter Landfill Search	200,760	0	0	0	200,760	0.00	0.00	0.00	0.00	0.00
8	B1 - Recurring	PTSD Treatment – FAST Program	250,000	0	0	0	250,000	0.00	0.00	0.00	0.00	0.00
9	B2 - Non-Recurring	Emergency Response Task Force - Urban Search and Rescue SC Task Force 1 (US&R SC-TF1) and Helicopter Aquatic Rescue Team (SC-HART) Equipment	850,000	0	0	0	850,000	0.00	0.00	0.00	0.00	0.00
10	B1 - Recurring	Firefighter Cancer Health Care Benefit Plan – Program Implementation	3,500,000	0	0	0	3,500,000	0.00	0.00	0.00	0.00	0.00
11	B1 - Recurring	Firefighter Cancer Health Care Benefit Plan – LLR Administration	284,000	0	0	0	284,000	0.00	0.00	0.00	0.00	0.00
TOTALS			5,084,760	1,000,000	10,240,600	0	16,325,360	0.00	0.00	0.00	0.00	0.00

Agency Name:	Department Of Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	1
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Employer Contributions
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$3,180,000 Total: \$3,180,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

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

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
	<input checked="" type="checkbox"/>	Government and Citizens

ACCOUNTABILITY OF FUNDS	1.1, 1.2, 1.3 2.1, 2.2, 3.1, 3.2, 3.3, 3.4 4.1, 4.2
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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	These funds will be used to pay for the employer share of fringe benefit contributions required as part of LLR employees' pay package.
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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**

\$180,000 of this request is the fringe portion relating to the 2% general pay increase passed by the legislature for the 2019-2020 budget year. The remaining \$3,000,000 is to close the gap between the amounts budgeted in the appropriation act for employer contributions and the actual yearly employer contribution expenditures. Beginning in FY16, the employer rates for SCRS and PORS have incrementally increased from 16.39% and 19.07%, respectively, to 21.81% and 24.49% in FY20. Additionally, in Plan Year 2019, the employer premium for the State Health Plan increased by 7.4%. Through all of these increases, LLR did not request additional budget authorization, as the agency had additional budget authority in other programs to cover the gap. Moving forward, with services expanding, the agency projects that the budget currently authorized for the various programs will need to be expended in those programs, and will not be available to transfer to employer contributions. Also, the agency intends to align its budget more accurately with how it plans to expend the funds.

The agency will fund this request with existing revenue sources and cash balances.

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 Labor, Licensing & Regulation		
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FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	2
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	V-SAFE
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$3,500,000 Total: \$3,500,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

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

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input checked="" type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	3.1, 3.2, 3.3, 3.4
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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 recipients of these funds are local and volunteer fire departments. The funds are to be distributed to applicants pursuant to Section 23-9-25 through a competitive process.
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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 South Carolina Department of Labor, Licensing and Regulation (LLR) is submitting a request for an increase of \$3.5 million in other funds budget authorization. This additional budget authorization will be used to distribute Volunteer Strategic Assistance and Fire Equipment Program (V-SAFE) revenue pursuant to Sections 38-7-20 and 23-9-25.

The Office of the State Fire Marshal (OSFM) receives insurance premium taxes quarterly that are required by the above referenced statutes to be awarded as grants to local fire departments for equipment purchases. This is a recurring initiative and the budget authorization for these distributions has never been requested in the past budget cycles except for the first-year appropriations, when the program was established with the Capital Reserve Funds in FY16-17.

At the beginning of Fiscal Year 2020-2021, OSFM had a cash balance of ~\$975,000 in the V-SAFE account and expects ~\$1.01 million in additional revenues throughout the year.

LLR received a one time appropriation from the Joint Other Funds Committee of \$2.5 million in FY19-20. This request is to make that authorization recurring and to add sufficient authorization to cover the additional cash that will come from the proposed changes to transfer the State Treasurer's .5% of the funds to LLR (38-7-20 (B)(2)).

On September 23, 2020, the General Assembly passed S.753. As of September 25, 2020, the bill has been enrolled for ratification. The act will take effect upon approval by the Governor. Per this act, LLR will receive additional ½ of the 1% funds listed in 38-7-20 (2) from the State Treasurer's Office. At the beginning of Fiscal Year 2020-2021, STO had a cash balance of ~3.2 mil in their V-Safe account which will be transferred to LLR in FY21.

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.

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Agency Code:	R360	Section:	81

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	3
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Personal Services
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$2,560,600 Total: \$2,560,600
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

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

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input checked="" type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	1.1, 1.2, 1.3 2.1, 2.2, 3.1, 3.2, 3.3, 3.4 4.1, 4.2
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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	Agency Employees
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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**

For State FY 2019-2020, the legislature passed a 2% general increase for state employees with service dates starting prior to 1/1/19. \$510,600 of this request is asking for additional authorization in the amount of the increase. The amount for the 2% was calculated using actual salary figures from the Agency's accounting system.

\$2,050,000 of this request is to align the Agency's appropriations with its budget. In previous budget cycles, the agency has asked for, and received additional FTE's from the General Assembly. However, the agency did not request additional budget authority with these previous FTE requests. In past years, the agency has had additional operating appropriations available to transfer to personal services, but with the increasing demand of services provided by LLR and rising costs, those surplus operating appropriations are no longer available to cover the deficit in authorization for agency-wide personal services.

The agency will fund this request with existing revenue sources and cash balances.

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 Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	4
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	IT Security Plan
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$500,000 Total: \$500,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

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

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input checked="" type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	1.1, 1.2, 1.3 2.1, 2.2, 3.1, 3.2, 3.3, 3.4 4.1, 4.2
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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 recipient of these funds will be contractors and vendors, new and existing that will, or have been, selected through a competitive process pursuant to SC Consolidated Procurement Code (Section 11-35)
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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**

These funds are being requested to pay for IT services and equipment to keep the Agency compliant with the Division of Technology/Division of Information Security standards relating to end-user computing devices and information security and privacy. The funds will be used to replace aging equipment, maintain cyber liability insurance, maintain and update firewalls, maintain cloud support and security for disaster recovery purposes, and maintain or improve the Agency's cybersecurity infrastructure in Fiscal Year 2021-2022 and beyond. All of these initiatives are listed in the Agency's State IT Plan. The total amount is calculated based on current market prices and state contract prices, where applicable. The Agency has not previously asked for any additional authorization relating to these costs, and as the Agency's services have expanded, along with costs, we are seeking additional Other Funds authorization to maintain the required equipment and data standards. The Agency will use current revenue sources and cash balances to fund these requests.

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 Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	5
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	OSHA Matching Funds
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$0 Other: \$500,000 Total: \$500,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

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

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input checked="" type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	2.1.1, 2.1.2, 2.1.3 2.2.1, 2.2.2, 2.2.3
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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 funds will be used as the state match portion of the federal OSHA grant programs. These funds will be received by OSHA program employees for their salaries and benefits and by vendors that provide services and supplies to the OSHA programs.
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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**

Proviso 81.7 allows for LLR to utilize agency earmarked and restricted accounts as state match for the OSHA federal grants when general fund appropriations are exhausted. In prior years, the agency has transferred appropriations from other divisions of the agency to OSHA for these purposes, but as the other divisions have grown, sufficient authorization may no longer exist. This request will align the Appropriations act with how the agency expends funds. This request will be funded with current cash balances

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.

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Agency Code:	R360	Section:	81

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	6
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Federal Funds
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$0 Federal: \$1,000,000 Other: \$0 Total: \$1,000,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

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

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input checked="" type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	1.1, 1.2, 1.3 2.1, 2.2, 3.1, 3.2, 3.3, 3.4 4.1, 4.2
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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 recipient of the funds will be the employees and vendors paid by federal grants.
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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**

Over the past several years, LLR's federal grant awards have increased both in number and funding amount. The three OSHA grants (23G, 21D and BLS) have all received funding increases. Salaries and employer benefit costs have risen due to general salary increases and contribution increases. State Fire is receiving new awards and has received increases in existing program awards. State Fire is anticipating applying for additional federal grant opportunities in the coming year. The agency plans to use existing budget authorizations and cash on hand for any required matching funds for new awards.

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:	Republic Of Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	8
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	PTSD Treatment – FAST Program
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$250,000 Federal: \$0 Other: \$0 Total: \$250,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

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

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input checked="" type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	3.1, 3.2, 3.3, 3.4
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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	Funds will be received by the South Carolina Firefighter Assistance Support Team (FAST) to reimburse firefighters and emergency medical technicians who incur mental injury as a result of a critical incident during the scope of employment for actual out-of-pocket expenses not covered through workers compensation claims and/or other insurance
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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**

Currently, Proviso 118.16 in the Appropriations Act directs that \$500,000 be directed to SLED for First Responder PTSD Treatment. Of that \$500,000, the proviso directs half to be distributed to the South Carolina Law Enforcement Assistance Program to reimburse law enforcement officers who incur mental injury during the scope of employment for actual out-of-pocket expenses not covered through workers compensation claims and/or other insurance. The remaining half is to be distributed to the South Carolina State Firefighters Association for the South Carolina Firefighter Assistance Support Team to reimburse firefighters and emergency medical technicians who incur mental injury as a result of a critical incident during the scope of employment for actual out-of-pocket expenses not covered through workers compensation and/or other insurance.

SC LLR has proposed a new proviso asking that the half of the funds designated for firefighters and emergency medical technicians be transferred to LLR as a recurring appropriation. The Agency's State Fire Division is uniquely suited to manage and distribute these funds.

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 Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	10
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Firefighter Cancer Health Care Benefit Plan – Program Implementation
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$3,500,000 Federal: \$0 Other: \$0 Total: \$3,500,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

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

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input checked="" type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	3.1, 3.2, 3.3, 3.4
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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	Prospective vendor selected through a competitive process pursuant to SC Consolidated Procurement Code (Section 1135) to administer the Firefighter Cancer Health Care Benefit Plan to provide a supplemental cancer insurance policy.
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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**

Act 168 of 2019-2020 (R165, S1071) amended the Code of Laws of South Carolina by adding Section 23-9-197 to establish Firefighter Cancer Health Care Benefit Plan to provide a supplemental insurance policy upon a firefighter being diagnosed with cancer. The program must be established by and administered through the Office of the State Fire Marshal (OSFM), which is under the administration of LLR's Division of Fire and Life Safety.

Based on the statement of estimated fiscal impact provided by the SC Revenue and Fiscal Affairs Office, the total additional cost of the program is projected to be \$3,784,000. As per the act, LLR must spend \$3,500,000 for the Firefighter Cancer Health Care Benefit Plan. The agency will use the remaining \$284,000 only for expenses of the division.

The agency is submitting an individual budget request for the remaining \$284,000 which is associated with this budget request.

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 Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	11
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Firefighter Cancer Health Care Benefit Plan – LLR Administration
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Provide a brief, descriptive title for this request.

AMOUNT	General: \$284,000 Federal: \$0 Other: \$0 Total: \$284,000
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What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

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

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input checked="" type="checkbox"/>	Healthy and Safe Families
	<input type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	3.1, 3.2, 3.3, 3.4
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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	These funds will be received by LLR's Division of Fire and Life Safety program employees for their salaries and benefits and by vendors that provide services and supplies to administer Firefighter Cancer Health Care Benefit Plan.
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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?

This budget request is associated with the agency's budget request priority # 10.

The agency will use these funds only for expenses of the LLR's Division of Fire and Life Safety to procure and administer Firefighter Cancer Health Care Benefit Plan enacted by the Act 168 of 2019-2020 (R165, S1071).

Based on the statement of estimated fiscal impact provided by the SC Revenue and Fiscal Affairs Office, procurement and administration of the supplemental cancer insurance policy for firefighters will increase LLR's expenditure by \$284,000.

**JUSTIFICATION OF
REQUEST**

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 Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81

FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	7
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Sumter Landfill Search
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Provide a brief, descriptive title for this request.

AMOUNT	\$200,760
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What is the net change in requested appropriations for FY 2021-2022? 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:	
	<input type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
<input checked="" type="checkbox"/>	Request for Non-Recurring Appropriations	
<input type="checkbox"/>	Request for Federal/Other Authorization to spend existing funding	
<input type="checkbox"/>	Related to a Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input checked="" type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	3.1, 3.2, 3.3, 3.4
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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	These funds will be used for the daily operations of the State Fire Marshal's Office.
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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**

LLR is requesting these funds to offset other fund expenditures realized in FY20 relating to the search efforts at the Sumter Landfill. These expenditures were originally paid for with existing budget authorization and cash that was originally intended for other purposes. This request will make the agency whole on the cash basis.

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 Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81

FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	9
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	Emergency Response Task Force - Urban Search and Rescue SC Task Force 1 (US&R SC-TF1) and Helicopter Aquatic Rescue Team (SC-HART) Equipment
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Provide a brief, descriptive title for this request.

AMOUNT	\$850,000
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What is the net change in requested appropriations for FY 2021-2022? 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:	
	<input type="checkbox"/>	Change in cost of providing current services to existing program audience
	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/>	Non-mandated program change in service levels or areas
	<input type="checkbox"/>	Proposed establishment of a new program or initiative
	<input type="checkbox"/>	Loss of federal or other external financial support for existing program
	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program
	<input type="checkbox"/>	IT Technology/Security related
	<input type="checkbox"/>	Consulted DTO during development
	<input checked="" type="checkbox"/>	Request for Non-Recurring Appropriations
<input type="checkbox"/>	Request for Federal/Other Authorization to spend existing funding	
<input type="checkbox"/>	Related to a Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:	
	<input type="checkbox"/>	Education, Training, and Human Development
	<input type="checkbox"/>	Healthy and Safe Families
	<input checked="" type="checkbox"/>	Maintaining Safety, Integrity, and Security
	<input type="checkbox"/>	Public Infrastructure and Economic Development
<input type="checkbox"/>	Government and Citizens	

ACCOUNTABILITY OF FUNDS	<p>2.4: Ensure the operational readiness of the Emergency Response Task Force (ERTF) and Firefighter Mobilization.</p> <p>The equipment and supplies purchased with these funds will support the mission of SC TF-1 and SC-HART when responding to an emergency. The use of these funds will be evaluated through the readiness and effectiveness of SC TF-1's and SC-HART's ability to respond during a natural or man-made disaster.</p>
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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	<p>Office of State Fire Marshal – Emergency Response Task Force – Urban Search and Rescue – SC Task Force 1 (SC TF-1) and SC Helicopter Aquatic Rescue Team (SC-HART).</p> <p>These funds will be used to purchase equipment and supplies from current state-approved vendors/contractors.</p>
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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

State Fire's Emergency Response Task Force responds to natural and man-made disasters by providing search and rescue, medical support, damage assessment and assistance in the coordination of search and rescue. SC TF-1 is the state's only comprehensive urban search and rescue team and provides a coordinated multi-discipline response to disasters. SC TF-1 responds with specialized equipment and rescue personnel capable of locating and extracting victims trapped in collapsed structures, conducting wide-area search and rescue, swift water and flood water rescue, high-level and confined space rescue, and response to incidents involving hazardous materials. SC TF-1 is capable of responding to disasters in South Carolina and other states, including floods, hurricanes, earthquakes, widespread tornadoes and terrorist events. SC TF-1 is heavily utilized during hurricane responses, conducting rescues in the resulting flood waters. SC TF-1 has also deployed to assist other states, including responses to Hurricanes Katrina and Sandy.

The South Carolina Helicopter Aquatic Rescue Team (SC-HART) exists through a partnership with State Fire and the SC National Guard. State Fire provides highly-trained civilian rescuers that perform high-risk, precision rescues, from SCNG helicopters. The SC-HART program is a nationally-recognized rescue unit and has performed hundreds of rescues in South Carolina in response to multiple hurricanes, flooding events, and injured citizens in the mountains. SC-HART has also deployed to assist other states, such as Texas, in response to Hurricane Harvey.

In order to succeed in its stated missions, SC TF-1 and SC-HART should have needed equipment and supplies that are ready for deployment at a moment's notice. The Emergency Response Task Force recently completed a comprehensive inventory of all of its equipment. Through this inventory process, it has identified equipment that needs replacement or updating, as well as equipment that is missing to better fulfill the capabilities of the rescue teams. This equipment includes swift water and flood rescue equipment, medical equipment, wide area search and rescue equipment, critical rescue and personal protective equipment for the helicopter rescuers and equipment that supports the incident support team functions of the task force.

If the requested equipment and supplies are not funded, SC-TF1's and SC-HART's ability to respond during an emergency situation could be diminished resulting in harm to the public.

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.

FORM D – PROVISO REVISION REQUEST

NUMBER

NEW

*Cite the proviso according to the renumbered list (or mark "NEW").***TITLE**

First Responder PTSD Treatment

*Provide the title from the renumbered list or suggest a short title for any new request.***BUDGET PROGRAM**

II. D. Office of State Fire Marshal

*Identify the associated budget program(s) by name and budget section.***RELATED BUDGET REQUEST**

Agency Priority # 8; Recurring State Funds-\$250,000; PTSD Treatment – FAST Program

*Is this request associated with a budget request you have submitted for FY 2021-2022? If so, cite it here.***REQUESTED ACTION**

Add

*Choose from: Add, Delete, Amend, or Codify.***OTHER AGENCIES AFFECTED**

SLED; \$500,000 has been appropriated to SLED on an annual, non-recurring basis since FY16-17 through proviso 118.36 (36). This proviso will transfer the firefighter and emergency medical technician portion (\$250,000) to the Office of State Fire Marshal to administer.

*Which other agencies would be affected by the recommended action? How?***SUMMARY & EXPLANATION**

Currently, Proviso 118.15 in the Appropriations Act directs that \$500,000 be directed to SLED for First Responder PTSD Treatment. Of that \$500,000, the proviso directs half to be distributed to the South Carolina Law Enforcement Assistance Program to reimburse law enforcement officers who incur mental injury during the scope of employment for actual out-of-pocket expenses not covered through workers compensation claims and/or other insurance. The remaining half is to be distributed to the South Carolina State Firefighters Association for the South Carolina Firefighter Assistance Support Team to reimburse firefighters and emergency medical technicians who incur mental injury as a result of a critical incident during the scope of employment for actual out-of-pocket expenses not covered through workers compensation and/or other insurance.

SC LLR has proposed a new proviso asking that the half of the funds designated for firefighters and emergency medical technicians be transferred to LLR as a recurring appropriation. The Agency's State Fire Division is uniquely suited to manage and distribute these funds.

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

General Funds (State Funds) - \$250,000

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**

Of the funds appropriated to the South Carolina Department of Labor, Licensing and Regulation – State Fire Marshal’s Office (SCLLR) for first responder PTSD treatment, the department shall distribute funds to the South Carolina Firefighter Assistance Support Team (FAST) to reimburse firefighters and emergency medical technicians who incur mental injury as a result of a critical incident during the scope of employment for actual out-of-pocket expenses not covered through workers compensation claims and/or other insurance and can also be utilized to provide services through the South Carolina Firefighter Assistance Support Team. LLR shall promulgate any administrative regulations necessary to carry out the provisions of this section.

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

FORM D – PROVISO REVISION REQUEST

NUMBER

NEW

Cite the proviso according to the renumbered list (or mark "NEW").

TITLE

Compensatory Payment

Provide the title from the renumbered list or suggest a short title for any new request.

BUDGET PROGRAM

II. Programs & Services

Identify the associated budget program(s) by name and budget section.

RELATED BUDGET REQUEST

None

Is this request associated with a budget request you have submitted for FY 2021-2022? 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

This proviso would allow exempt employees to be paid for actual hours worked during a declared State of Emergency. The exempt employees of State Fire work exhaustive hours during disasters with no additional compensation.

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

Fiscal impact is dependent on the number of declared disasters within a given fiscal year. The impact will be only to Other Funds.

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**

In the event a State of Emergency is declared by the Governor or in the event of a situation requiring the use of mutual assistance under Section 25-1-450 of the 1976 Code, exempt employees of the SC Department of Labor, Licensing and Regulation's State Fire Division may be paid for actual hours worked, at the discretion of the Agency Director, and providing funds are available.

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

Agency Name:	Department Of Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81

FORM E – AGENCY COST SAVINGS AND GENERAL FUND REDUCTION CONTINGENCY PLAN

TITLE	Agency Cost Savings and General Fund Reduction Contingency Plan
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AMOUNT	\$44,480
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What is the General Fund 3% reduction amount? This amount should correspond to the reduction spreadsheet prepared by EBO.

ASSOCIATED FTE REDUCTIONS	zero
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How many FTEs would be reduced in association with this General Fund reduction?

PROGRAM / ACTIVITY IMPACT	<p>II.B. Occupational Safety & Health Program – General Funds are used as required match for federal funds received for the SC OSHA Program.</p>
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What programs or activities are supported by the General Funds identified?

SUMMARY	<p>Our General Fund appropriation is used as matching funds for the Occupational Safety and Health Administration (OSHA) State Fund Grant. The purpose of SC OSHA is to ensure our citizens a safe and healthful working environment. SC OSHA is required by law to issue a citation and proposed penalty within six months of a violation's occurrence. The reduction amount was calculated as 3% of the total General Funds received by the Agency. The reduction would impact operating expenditures, supplies and travel, specifically.</p>
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Please provide a detailed summary of service delivery impact caused by a reduction in General Fund Appropriations and provide the method of calculation for anticipated reductions. Agencies should prioritize reduction in expenditures that have the least significant impact on service delivery.

**AGENCY COST
SAVINGS PLANS**

LLR is traditionally sends renewal notices to occupational licensees via traditional mail. The agency is changing this process to send all renewal correspondence electronically. With over 125,000 renewals being sent out electronically and not physically, the agency expects to save \$75,000 in copying charges/supplies and postage.

What measures does the agency plan to implement to reduce its costs and operating expenses by more than \$50,000? Provide a summary of the measures taken and the estimated amount of savings. How does the agency plan to repurpose the savings?

Agency Name:	Department Of Labor, Licensing & Regulation		
Agency Code:	R360	Section:	81

FORM F – REDUCING COST AND BURDEN TO BUSINESSES AND CITIZENS

TITLE	Propose License Fee Reductions for POL Boards
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Provide a brief, descriptive title for this request.

EXPECTED SAVINGS TO BUSINESSES AND CITIZENS	The expected net savings to licensees that fall under the purview of SCLLR is around \$900,000
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What is the expected savings to South Carolina's businesses and citizens that is generated by this proposal? The savings could be related to time or money.

FACTORS ASSOCIATED WITH THE REQUEST	<p>Mark "X" for all that apply:</p> <table border="1"> <tr> <td><input type="checkbox"/></td> <td>Repeal or revision of regulations.</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Reduction of agency fees or fines to businesses or citizens.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Greater efficiency in agency services or reduction in compliance burden.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other</td> </tr> </table>	<input type="checkbox"/>	Repeal or revision of regulations.	<input checked="" type="checkbox"/>	Reduction of agency fees or fines to businesses or citizens.	<input type="checkbox"/>	Greater efficiency in agency services or reduction in compliance burden.	<input type="checkbox"/>	Other
<input type="checkbox"/>	Repeal or revision of regulations.								
<input checked="" type="checkbox"/>	Reduction of agency fees or fines to businesses or citizens.								
<input type="checkbox"/>	Greater efficiency in agency services or reduction in compliance burden.								
<input type="checkbox"/>	Other								

METHOD OF CALCULATION	Agency Finance staff conducts continuous license fee analysis to ensure that the licensing boards are neither charging its licensees excessive or insufficient fees. Staff reviews historical data to identify trends in revenue and expense and creates projections based on this historical data.
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Describe the method of calculation for determining the expected cost or time savings to businesses or citizens.


REDUCTION OF FEES OR FINES	The agency intends to have a net decrease in fees charges for licensure covered in Chapter 10 of the SC Code of Regulations. The analysis to determine these reductions is ongoing and may be affected by current economic issues and trends.
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Which fees or fines does the agency intend to reduce? What was the fine or fee revenue for the previous fiscal year? What was the associated program expenditure for the previous fiscal year? What is the enabling authority for the issuance of the fee or fine?

REDUCTION OF REGULATION	Chapter 10 of the SC Code of Regulations
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Which regulations does the agency intend to amend or delete? What is the enabling authority for the regulation?

SUMMARY	LLR plans to propose a decrease in licensure fees for several license types covered in Chapter 10 of the SC Code of Regulations. The analysis to determine these reductions is ongoing and the final changes to the fee amount have yet be calculated.
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Provide an explanation of the proposal and its positive results on businesses or citizens. How will the request affect agency operations?