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South Carolina House of Representatives

Legislative Update & Research Reports

Robert J. Sheheen, Speaker of the House

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House Week in Review

House members completed work on a number of significant bills this week, including the Comprehensive Health Education bill; made some important changes in the state's two reserve funds, and heard the farewell address of retiring S.C. Supreme Court Chief Justice Julius B. Ness.

More Third Readings

The House kept up its steady pace on pending legislation. Last week, final approval was given to S.546, the Comprehensive Health Education Act. The bill was sent back to the Senate, which refused to go along with the House amendments to the bill, opening the way for conference committee action. A summary of this important legislation, as amended by the House, is included in this week's edition of the *Legislative Update*.

The House also gave third reading approval to H.3771. This bill, sponsored by the House Education and Public Works Committee, would create separate boards of trustees for Lander College, the College of Charleston and Francis Marion College. All three colleges are now governed by the State College Board of Trustees.

Reserve Funds

Two significant bills changing the state's two reserve funds, H.3822 and H.3823, were given third reading approval on Friday. Under the bills, the two reserve funds, named the General Reserve Fund and the Capital Reserve Fund, would be capped at a total of 5 percent. A complete description of the two bills will be upcoming in the *Update*.

Appointments

With the departure of former Rep. Jean Toal to the Supreme Court bench, House Speaker Robert Sheheen filled two committee vacancies left by Mrs. Toal. District 32 Rep. J. Derham Cole was appointed to the House Judiciary Committee, and District 15 Rep. James W. Johnson was appointed to the Rules Committee.

Ness Address

Retiring Supreme Court Chief Justice Julius B. Ness made his farewell comments to a joint legislative assembly last week. Here are some selected quotes from the justice's address.

"Today, in the State of South Carolina, there is no discernible backlog in any court, in any county, in this state. Cases can be heard at the appellate level within three months after briefs have been filed. General Sessions cases are normally disposed of within four months after the defendant's arrest. If the case is filed in Common Pleas Court today in any county in the state, it can be brought to trial within six months. The average length of time needed to resolve a family court case is less than three months and nearly all cases filed in Magistrate and Municipal Courts are resolved in one to three months.

"There was, of course, no one factor that brought about this increased efficiency in the trial courts of our state. The key factor was harder work by everybody -- judges, lawyers and court staff.

"Delays in the judicial process are not an inevitable fact of life. The example of South Carolina has proven unequivocally that court systems can be fully responsive to the needs of the citizens in a timely fashion and it can be done without significantly increased costs in state appropriations.

"I urge you to exercise caution before making any change to the judicial selection process in this state. ...Invariably, each new proposal contains pitfalls not existing in the present process. It is my earnest belief that South Carolina's method for selecting judges, while not perfect, is better than any other method in place in other states in the nation. ...Election of judges by the General Assembly has insulated our judiciary from negative influences which are inherent in public election of judges.

"I have not been guided by the example of one single individual, but by the collective pursuits of excellence by many people, some of whom are present today. From them I have learned that the key to excellence is desire, and the key to friendship is loyalty. There are no more important lessons in life than these."

Comprehensive Health Education

Last week, House members gave final approval to S.546, the Comprehensive Health Education Act. While health education will be part of the curriculum from kindergarten through high school, the act specifies by grade what may and may not be taught in sex education instruction. Local school districts are given final say as to the content of sex education courses. Further, parents who find the course work offensive may withdraw their children without penalty or discrimination.

The bill was returned to the Senate last week where senators refused to go along with the House's amendments, paving the way for a conference committee.

Here is a summary of the bill as the House passed it last week. Thanks to Steve Elliott, staff counsel, House Education and Public Works Committee, for his assistance with this summary.

Comprehensive Health Education Act

The purpose of the act is to foster the development and dissemination of educational materials which will assist students, parents, teachers and administrators in the understanding of health principles and problems and responsible sexual behavior.

Types of Instruction Provided Under the Bill

1. "Comprehensive health education" would include age-appropriate, sequential instruction in health, either as a part of existing courses or as a special course. The purpose of the course work would be to promote wellness, health maintenance and disease prevention.

Students from kindergarten through high school would receive comprehensive health instruction under the bill.

2. "Reproductive Health Education" would include instruction in human physiology, conception, prenatal care and development, child birth and postnatal care. The bill specifies that this instruction must strongly emphasize sexual abstinence and the risks associated with sexual activity outside of marriage. It does not include instruction concerning sexual practice outside of marriage or sexual practices unrelated to reproduction, except in connection with discussion of the risk of disease.

Reproductive health education would be taught from grade 6 through high school. Local school boards would have the authority to decide if they wanted to include age-appropriate reproductive health education from grades K-5. However, the law strictly specifies that methods of contraception may not be taught before the 6th grade.

3. "Family Life Education" includes instruction that would emphasize the responsibilities of marriage; encourage the development of responsible personal values and behavior to aid in the development of a strong family life in the future; and promote an understanding of the physical, psychological and cultural foundations of human development. This instruction also would include information on state laws dealing with the sexual conduct of minors, including criminal sexual conduct.

Local school boards would have the authority to decide whether they would want family life education taught in grades 6-8. Family life education also could be taught to grades 9-12 as part of comprehensive health education instruction. The law strictly prohibits any information on the subject of homosexuality before the 8th grade. Any discussion of homosexuality could be only in the context of sexually transmitted diseases.

4. "Pregnancy Prevention Education" would stress the importance of abstaining from sexual activity until marriage and help students develop skills to resist peer pressure and abstain from sexual activity. This instruction also would explain the methods of contraception and the risks and benefits associated with each method. The bill specifies that abortion must not be included as a method of birth control. Contraceptive information would have to be given in the context of future family planning.

Pregnancy prevention would be taught to high school level students. Local school boards would have the authority to decide if they wanted pregnancy prevention taught in grades 6-8. All instruction in pregnancy prevention must be made to male and female students in separate classes.

Implementation

Health Education for Grade K-5:

Beginning with the 1989-90 school year, comprehensive health education must be taught in kindergarten through the 5th grade. Subjects included in the instruction would be community health, consumer health, environmental health, growth and development, nutritional health, personal health, dental health, mental and emotional health, prevention and control of disease and disorders, safety and accident prevention, and substance use and abuse.

The bill specifies that sexually transmitted diseases must be excluded from instruction on the prevention and control of disease in these grades. The bill does give the local school boards the authority to include age-appropriate reproductive health instruction. However, the law specifies that contraceptive methods may not be taught before the 6th grade, and that instruction on the subject of homosexuality may not be taught from kindergarten through the 7th grade.

Instruction for Grade 6-8.

Beginning next fall, instruction in comprehensive health for grades 6-8 must include instruction in community health, consumer health, environmental health, growth and development, nutritional health, personal health, dental health, mental and emotional health, prevention and control of disease and disorders, safety and accident prevention, substance use and abuse, and reproductive health education.

The bill specifies that in addition to reproductive health education, information on sexually transmitted diseases are to be included as part of instruction on the prevention and control of disease and disorders.

Local school boards are given the discretion to decide whether instruction in family life education and/or pregnancy prevention would be included for these grades. If the school board approved instruction in pregnancy prevention for these grades, the instruction must be taught to separate classes of male and female students.

Instruction for High School Level Students

Beginning with next year's high school freshmen (the Class of 1992), students in grades 9-12 would receive instruction at least one time in comprehensive health, including reproductive health education and pregnancy prevention.

Instruction in pregnancy prevention must be taught to separate classes of male and female students.

Specific Areas of Instruction

Contraception

- Contraceptive information must be given in the context of future family planning.
- No instruction in the methods of contraception may be made in grades K-5.
- No contraceptive device or contraceptive medication may be distributed in or on the school grounds of any public elementary or secondary school.
- No school district may contract with any contraceptive provider for distribution of contraceptives in or on school grounds.
- Instruction in pregnancy prevention must be presented separately to male and female students.

Abortion

- The bill specifically states that abortion may not be included as a method of birth control.
- School districts may not offer programs, instruction or activities including abortion counseling, information about abortion services, or assist in obtaining an abortion. The bill also prohibits material containing this information from being distributed in the schools. The exception is instruction relating to complications which may develop from all types of abortions.
- The above prohibitions do not prevent school authorities from referring students to a doctor for medical reasons after making reasonable efforts to notify the student's parents or guardians or the appropriate court.
- In grades 9-12, instruction must be given that adoption is a positive alternative to a crisis or unwanted pregnancy.

Homosexuality

- Any discussion of homosexuality may only be made in the context of instruction dealing with sexually transmitted diseases. This stipulation also applies to any other sexual lifestyle alternative to heterosexual relationships.
- No discussion of homosexuality in any context may be made in grades K-7.

Sexually Transmitted Diseases

- Any course or instruction in sexually transmitted diseases must be taught within the reproductive health, family life or pregnancy prevention instruction, or it must be presented as a separate component.
- In grades K-5, sexually transmitted disease must be excluded from instruction in the prevention and control of disease and disorders.
- In grades 6-8, sexually transmitted diseases are to be included in instruction. The bill does not specifically require instruction on sexually transmitted diseases in grades 9-12.

Curriculum Development

Under the House amended bill, the state Department of Education would have until August 1 to select or develop a curriculum which addresses the topics of reproductive health education, family life education, pregnancy prevention and sexually transmitted diseases. This curriculum would be available to local school districts. If the local school district requests it, the board would also have available information on curriculum used by other states.

The bill also instructs South Carolina ETV to work with the Department of Education in developing instructional programs and material for the school districts.

While the bill permits films and other materials designed to explain bodily functions or the reproductive process, they may not contain actual or simulated portrayals of sexual activities or intercourse. The bill prohibits any textbook or any source of reading or viewing material, violating any provision of the act, to be used in any health education program, course, workshop or seminar in the public schools.

Local School Districts

Local school districts may use the materials developed by the department, or they may develop their own materials. To assist in the selection of curriculum and materials, local school boards would appoint a 13-member local advisory committee. This committee would be made up of two parents, three clergy, two health professionals, two teachers, two students, one being a high school student body president, and two other people not employed by the school district.

The bill specifies that the time required for health instruction in grades K-8 cannot be reduced below the 1986-87 requirements. Health instruction for high school students may be given as either a special course or as part of an existing course.

Parental Notification

Under the bill, all public school principals would be required to notify parents of the content of the instructional materials used in teaching reproductive health, family life, pregnancy prevention and sexually transmitted diseases (if the disease instruction is presented as a separate component) and that the parents have the option to exempt their child from this instruction.

The notice would have to be given far enough in advance to allow the parents or guardians to preview the materials before the child is enrolled in the class.

A student may be exempted from any portion, or all, of the reproductive health, family life or pregnancy prevention instruction when the school principal receives a signed statement from the student's parent or guardian stating that the program conflicts with the family's beliefs.

The bill specifically prohibits students from being penalized as a result of their exemption. Also the bill requires school districts to take measures to ensure these students will not be embarrassed by their exemption.

Average Auto Insurance Premiums by State

Automobile insurance continues to be a topic of great interest to the public and the General Assembly.

Last month, *Best's Insurance Management Reports* published its copyrighted state by state list of the 1986 Average Private Passenger Automobile Premiums. For the past several years, the A.M. Best Company has published an annual study of the average auto premiums.

Methodology and Qualifying Factors

According to the article, the company arrives at the average premium for each state by dividing the number of registered automobiles in each state into the total direct premiums written in the state. The number of registered automobiles by state was obtained by the company from the Federal Highway Administration. *Best's Executive Data Service* compiles the direct premium information, which includes private passenger auto liability, physical damage and no-fault premiums.

The *Best's* report notes that its average premium figures are "distorted on the low side" because the data from the Federal Highway Administration includes commercial passenger vehicles (not trucks or buses, however) and automobiles that are registered but not insured.

The *Best's* report also points out that "state-to-state comparisons can be skewed by factors such as different requirements for minimum limits to be carried. Also lack of mandatory auto insurance in 16 states contributes to the distortion of this study." However, the report concludes, "the study has proven to be useful as a guide to changes in the private passenger lines, especially for annual changes within any state."

Overall Results

According *Best's Insurance Management Reports*, the average direct written premiums for private passenger care insurance rose 61.6 percent between 1982 and 1986. Nationwide, the average

premiums rose from \$298.35 to \$440.58, a 48 percent increase. In this same period, however, the number of registered automobiles in the U.S. increased only 9.5 percent, the report noted.

States With the Highest and Lowest Increases

From 1985 to 1986, the following states had the largest percentage increase in private passenger car insurance premiums: Minnesota, 31 percent; Wyoming, 24.7 percent; Georgia, 20.9 percent; Wisconsin, 20.7 percent; Utah, 20.3 percent, and the District of Columbia, 20.2 percent.

From 1982-1986, states recording the largest five year increases in average premiums were Arizona, 83.7 percent; Georgia, 75.5 percent; District of Columbia, 75.4 percent; North Carolina, 72 percent and Alaska, 70.1 percent. Nationwide, the average five year increase in premiums was 47.7 percent.

According to *Best's*, the lowest premiums increases from 1985 to 1986 were in the following states: New Jersey, 4 percent; Montana, 3.5 percent; New Mexico, 2.6 percent, and Alaska, 1.2 percent. The lowest five year increases in average premiums (1982-1986) were Iowa, 6.5 percent; Hawaii, 24.3 percent; New Hampshire, 26.1 percent; South Dakota, 27.2 percent; North Dakota, 27.3 percent and Kansas, 29.8 percent.

The Rankings

Here is the *Best's Insurance Management Reports* list of the 1986 Average Private Passenger Automobile Premiums by State. The report was issued Feb. 8.

<u>Rank</u>	<u>State</u>	<u>'86 Aver. Premium</u>	<u>'85 Rank</u>	<u>5 yr. increase</u>
1.	New Jersey	\$603.55	2	32.4%
2.	Alaska	\$602.45	1	70.1%
3.	California	\$568.20	4	58.6%
4.	Massachusetts	\$555.55	3	45.5%
5.	Arizona	\$553.84	7	83.7%
6.	Nevada	\$549.55	5	42.9%

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<u>Rank</u>	<u>State</u>	<u>'86 Aver. Premium</u>	<u>'85 Rank</u>	<u>5 yr. increase</u>
7.	New York	\$522.06	6	35.7%
8.	Louisiana	\$514.97	9	39.7%
9.	Pennsylvania	\$512.09	8	43.1%
10.	Maryland	\$506.34	11	59.0%
11.	Michigan	\$481.07	16	56.7%
12.	Rhode Island*	\$476.60	15	58.3%
13.	Connecticut	\$466.09	13	52.4%
14.	Washington, D.C.	\$463.13	19	75.4%
15.	Delaware	\$462.49	14	56.0%
16.	West Virginia	\$454.65	10	31.9%
17.	Hawaii	\$453.60	12	24.3%
18.	Georgia	\$449.95	22	75.5%
19.	SOUTH CAROLINA	\$449.74	17	46.9
20.	Colorado	\$444.11	21	54.7%
21.	Arkansas*	\$433.75	18	66.1%
22.	Texas	\$425.96	20	37.3%
23.	Illinois*	\$418.67	25	43.6%
24.	Minnesota	\$416.98	34	46.0%
25.	Missouri*	\$403.49	26	53.1%
26.	Utah	\$396.78	31	58.1%
27.	Oregon	396.37	28	36.1%
28.	Washington*	\$393.86	27	39.3%
29.	Florida	\$386.93	29	46.5%

<u>Rank</u>	<u>State</u>	<u>'86 Aver. Premium</u>	<u>'85 Rank</u>	<u>5 yr. increase</u>
30.	Wyoming	\$383.57	40	45.1%
31.	Virginia*	\$381.02	32	50.2%
32.	New Mexico	\$378.17	23	64.5%
33.	Montana	\$372.96	24	47.8%
34.	Wisconsin*	\$372.76	39	62.3%
35.	Kentucky	\$369.37	33	63.3%
36.	Oklahoma	\$368.85	30	46.6%
37.	Vermont	\$363.97	38	39.2%
38.	North Carolina	\$362.36	35	72.0%
39.	Kansas	\$345.19	36	29.8%
40.	Idaho	\$344.30	41	48.9%
41.	Indiana	\$337.60	42	49.0%
42.	Maine*	\$332.83	43	36.7%
43.	New Hampshire*	\$330.47	37	26.1%
44.	Ohio	\$327.10	45	44.5%
45.	Nebraska*	\$323.98	44	31.0%
46.	North Dakota	\$307.13	46	27.3%
47.	Mississippi*	\$297.25	47	37.6%
48.	Tennessee*	\$292.49	48	48.1%
49.	Alabama*	\$278.46	49	46.1%
50.	South Dakota*	\$255.77	50	27.2%
51.	Iowa	\$243.95	51	6.5%
National Average		\$440.58		47.7%

Note: * Indicates state which did not have compulsory auto insurance in 1986.

Bills Introduced

Here is a sampling of bills introduced in the House during the previous week. Not all House bills introduced last week are featured here. The bills are organized by the standing committees to which they were referred.

Education and Public Works Committee

Election Day School Closings (H.3845, Rep. Davenport). This bill would repeal the state law that now requires all public colleges and universities, TEC schools and public schools to be closed on general election day.

Repeal of Teacher Incentive Program (H.3844, Rep. Davenport). This bill would repeal the establishment of the teacher incentive program, its purpose and funding, and guidelines for the program.

Interscholastic Activity Requirements (H.3839, Rep. L. Phillips). Under this bill, high school students who want to participate in interscholastic activities during both semesters of the school year would have to have a passing average in at least four academic courses in the semester preceding the two consecutive semesters. This requirement would include passing courses that are a graduation requirement. Currently, the law states that passing at least four courses each semester would determine whether the student participates in interscholastic activities the following semester.

Judiciary Committee

Rate Increase Under Bond (H.3841, Rep. Rudnick). If this bill is enacted, public utilities would be prohibited from putting any requested rate increase into effect under bond while the utility is appealing any portion of the increase to the Public Service Commission.

Marital Rape (S.47, Sen. Fielding). This bill states that a spouse can be guilty of criminal sexual conduct if the couple is living apart and the incident constitutes first or second degree criminal sexual conduct. The incident must be reported within 60 days to law enforcement and a charge brought against the offending spouse. The bill defines spousal sexual battery as sexual battery accomplished through aggravated coercion by one spouse against another if they are living together. The incident must be reported within 60 days and a charge brought.

Labor, Commerce and Industry Committee

Mental Health Coverage (H.3836, Rep. J. Bradley). Under this bill, every individual or group health insurance policy would have to contain a mental health coverage provision.

Medical, Military, Public and Municipal Affairs Committee

Department of Probation, Parole and Pardon Services (S.1196, Senate Corrections and Penology Committee). This bill would change all references in the law from the current Department of Parole and Community Corrections to a new name, the Department of Probation, Parole and Pardon Services. This bill would change outdated terms like "supervisor of parole" to executive director and "chain gangs" to "work details." Obsolete language is also deleted.

Ways and Means Committee

Child's Education Savings Act (H.3825, Rep. Kirsh). This bill would create the "Child's Education Savings Account." This account would be free from state taxation as long as it is used to pay for college education expenses. Any taxpayer contributing to such an account could take up to a \$3,000 state income tax deduction for contributions made to each account established. The child for whom the account is created must be a South Carolina resident and under 16-years-old. Disbursements from the account must be made to a college or university. Unqualified disbursements would be penalized.

End of the Line (H.3834, Rep. J. Rogers). For each mile of track removed from service, a railroad company would have to pay a \$10,000 fee to the Public Service Commission, if this bill is enacted into law.

Long Term Care Insurance for State Employees (S.1079, Sen. Doar). The State Retirement System would develop an optional long term care insurance program for state employees under this bill. There is no anticipated cost to the state for the program since the bill stipulates that employees would pay the full insurance premium.

State Grand Jury Funding and Impaneling (S.1195, Sen. Williams). Under this bill, funding for the state grand jury would be appropriated to the state Attorney General's Office rather than the Judicial Department. The bill also states that the Attorney General, rather than the impaneling judge, would provide suitable space for the grand jury to meet.