DEPARTMENT OF CORRECTIONS

Policy:500.100Title:Offender Co-Payment for Health ServicesEffective Date:3/6/18

PURPOSE: To promote offender self-reliance and participation in the offender's own health care decisions, and provide a disincentive for the inappropriate use of health resources.

APPLICABILITY: Adult facilities

DEFINITIONS:

<u>Chargeable visit</u> – an encounter with a health care practitioner provided at the request or initiation of an offender, either through sick call, an encounter outside of the emergency definition, or an unscheduled walk-in visit.

 $\underline{\text{Co-payment}}$ – a flat dollar amount set by the legislature that is charged to an offender every time a chargeable visit occurs.

<u>Emergency</u> – a condition considered to be life threatening or related to loss of limb or major body function requiring immediate attention as recognized or identified by a qualified staff person.

<u>Health care practitioner</u> – a health care professional who collects information on, assesses, delivers, or orders health treatment for an offender and/or provides health education to an offender, including such examples as physicians, dentists, physician assistants, nurse practitioners, registered and licensed practical nurses, and other ancillary health care professionals.

Health care services - medical and/or dental services provided by health care practitioners.

<u>Income contract</u> – a contract the department enters into to place federal offenders, Immigration and Customs Enforcement (ICE) detainees, or other offenders placed in a department facility from a county. It does not include the interstate compact contract.

<u>Reportable communicable disease</u> – a transmittable disease that must be reported, by law, to the Minnesota Department of Health.

PROCEDURES:

- A. An offender is assessed a \$5.00 co-payment whenever the offender initiates a chargeable visit, including routine medical, dental, eye, and physical examinations. Exceptions are listed in Procedure B.
- B. Co-payments are not assessed in the following instances:
 - 1. For care provided during a transitional care unit (TCU) stay at Minnesota Correctional Facility-Oak Park Heights if the offender was admitted for medical reasons.
 - 2. For annual Mantoux, initial HIV and HCV testing, and immunizations.
 - 3. For initial testing, treatment, and follow up for reportable communicable diseases.

- 4. For health care practitioner initiated clinic visits, including ordered or scheduled follow-up visits or visits part of chronic disease management protocol for asthma, seizure disorder, diabetes, hypertension, cardiac disease, or HIV.
- 5. For emergencies.
- 6. For work related injuries verified by an incident report and reported at the time of the injury.
- 7. For initial evaluation and treatment of injuries resulting from an assault.
- 8. For renewal of life-sustaining medications necessary for chronic disease management of conditions such as asthma, seizure disorders, diabetes, cardiac disease, hypertension, or HIV.
- 9. To review or obtain lab, x-ray, or other diagnostic test results.
- 10. Report of an alleged sexual assault, abuse, or harassment.
- 11. Offenders placed pursuant to an income contract.
- C. Offenders who believe an erroneous co-payment has been assessed may send a kite to health services with a copy of the offender account statement, requesting a review of the charges within 30 days of the charge. Kites received after that date do not receive a refund.
- D. Offenders with insufficient funds or classified as indigent are not denied health care. The co-pay charge is logged in the offender's spending account with a negative balance until the offender has available funds to cover partial or total cost of care.
- E. Health services maintains and forwards a log of offenders being assessed co-payments to the facility's financial services at least weekly. Records of co-payment deductions are retained in the financial services unit.

INTERNAL CONTROLS:

A. Documentation of offender co-payments is maintained in the financial services unit offender accounts.

ACA STANDARDS: 4-4345

REFERENCES:	Minn. Stat. §243.212 Policy 300.100, "Offender/Resident Accounts" Policy 500.055, "Dental Services"
	Division Directive 300.140, "Indigent Offenders" Prison Rape Elimination Act (PREA), 28 C.F.R. §115 (2012)
REPLACES:	Division Directive 500.100, "Offender Co-Payment for Health Services," 3/1/16. All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

ATTACHMENTS: None

APPROVED BY:

Deputy Commissioner, Facility Services Deputy Commissioner, Community Services Assistant Commissioner, Facility Services Assistant Commissioner, Operations Support