

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department of Public Safety
Prison

SECTION: Administrative - Managed
Care
POLICY # AD III-1

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SUBJECT: Offender Co-Pay

EFFECTIVE DATE: January 2016
SUPERCEDES DATE: September 2014

PURPOSE

To provide guidelines for charging offenders for specified health care and dental services provided within North Carolina Department of Public Safety. Offender co-payment is applicable after an assessment or treatment is completed.

GENERAL AUTHORITY

- A. North Carolina Department of Public Safety (NCDPS) has established the offender co-payment program for specified health care services.
- B. The Chief of Health Services/designee, in consultation with DPS Administration, shall determine which offender health services will require a co-payment and which services will be exempted.
- C. The Director of Administrative Services shall provide for collection activities and procedures as addressed in the Fiscal Policy and Procedures Manual.

DEFINITIONS

- A. **Chronic Disease** is an illnesses or condition that affects an individual's well being for an extended interval, usually at least 6 months and generally is not curable but can be managed to provide optimum functioning within any limitations the condition.
- B. **Dental Emergency** is a health condition for which immediate action and treatment, as determined by a health care provider, is necessary to prevent death or severe disability. Examples of dental emergent conditions are: uncontrolled bleeding, edema or swelling requiring maintenance of an airway or any trauma that would worsen and become difficult to resolve without intervention, including an avulsed tooth (teeth), profound swelling or jaw fracture/dislocation that is immobile with developing trismus.
- C. **Emergency** refers to a life/limb-threatening event. It means that immediate treatment is necessary to prevent death, severe or permanent disability, uncontrolled bleeding or to maintain an airway.
- D. **Follow-up** means any request or appointment made by a member of the health care staff (medical, dental and mental health) to provide subsequent health care services, specifically relating to the original chief complaint which occurs within fourteen (14) calendar days of the initial visit. The visit may be with the nurse providers.
- E. **Health care** is a broad term, which includes medical, mental health and dental services.
- F. **Health Care Provider** means a health professional which provides care to offender population to physicians, physician extenders, registered nurses, licensed practical nurses, dentists, optometrists, physical therapists, psychologists and psychiatrists. This term may refer to, but is not limited to.
- G. **Offender initiated** care refers to an offender seeking health care services by: 1) completing and forwarding a sick call request; 2) requesting department staff to assist them in getting routine health care services; 3) reporting to any health care staff member for consultation and/or treatment without having been contacted or scheduled by the health care staff; and 4) having requests made on behalf of the offender by those persons representing the interests of the offender, such as custody, family or attorney.

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- H. **Offender - declared emergency** means the offender seeks health care outside the sick call procedure. It means the offender decides he/she cannot wait for normal routine sick call to seek health care.
- I. **Work related incident** means a visible or reported traumatic injury received by an offender while performing his/her job duties under the supervision of DPS. This includes, but is not limited to lacerations, burns, sprains, fractures, and contusions.

POLICY

- A. DPS will provide the opportunity for all offenders to have access to healthcare services. All offenders shall be provided the opportunity to report an illness or any other health concern and receive evaluation and treatment as determined by licensed health care providers.
- B. A co-payment fee shall be charged for certain medical and dental services that are offender initiated.
- C. Applicable medical and dental services for which co-payments may be charged are offender initiated sick call, offender initiated emergency visit services and routine dental services.
- D. All offenders shall receive the same level of care regardless of their ability to pay. Offenders shall not be denied access to care, timeliness of care or equitable care for lack of funds to satisfy the co-payment fee.
- E. The following population groups shall be excluded from the co-payment policy:
 - 1. Private substance abuse treatment centers
 - 2. Offenders housed in county jails
 - 3. Safekeepers
 - 4. Offenders in out-of-state housing
 - 5. Center for Community Transitions
 - 6. DPS offenders assigned to:
 - Residential Mental Health
 - Inpatient Mental Health
 - Medical Infirmary
 - Medical Inpatient
- F. Certain services as identified herein are exempt from the co-payment policy.

ACTION REQUIRED

- A. Offender initiated health care require a co-payment of five dollars (\$5.00) and offender initiated emergency visits outside the normal sick call process shall be subject to a seven-dollar (\$7.00) co-payment. Offenders who are declaring an emergency accrue no co-pay if they are screened and determined to have an emergency.
- B. The health care provider shall be required to accurately indicate the co-payment fee if any.
- C. Co-payment charges may be viewed and voided by checking the OPUS HS90 screen (HS90_2_OPUS #). A dollar sign (4) to the right of the Type of visit indicates a co-payment was charged for the visit.

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PROCEDURES

A. Notification Requirements:

1. Every offender shall be provided a description of the co-payment plan at the time of processing orientation and upon initial transfer to a facility of residence.
2. At the processing centers, the information for how to access health care is first explained by a member of the Diagnostic Services staff such as the case analyst or behavior specialist. How to access health care is further reinforced by the nursing staff at the time of the offenders processing medical examination.
3. Notice shall also be provided to all offenders by means of posting this policy in dorms, health service areas and other locations deemed appropriate by Facility Administrator and Health Services staff.

B. Sick Call:

1. Offenders shall be charged a sum of \$5.00 for each sick call by appointment visit that is offender initiated, unless an exclusion exists.
2. If the nurse does an assessment, the co-payment is charged at the nursing level. This co-payment includes any subsequent referrals to the primary care provider and/or specialists.
3. If an offender does not sign the sick call form but wishes to receive treatment, the health care provider shall sign, date, and note that the offender failed to sign the sick call form. If treatment is delivered, it shall be explained that any applicable co-payment shall be charged.

C. Telephone Triage:

1. The triage nurse shall charge a sum of \$7.00 for services rendered if appropriate.
2. The nurse at the facility housing the offender shall check the co-payment charge the next business day following the telephone triage encounter.

C. Emergency Situation:

1. Offenders seeking health services outside the sick call by appointment system, as a self-declared emergency, shall be charged a co-payment of \$7.00, unless an exclusion exists.
2. When an offender presents as a self-declared emergency, the nurse or other provider may instruct the offender to sign up for sick call if the complaint does not have the potential for imminent danger to the offender and would be better resolved through the sick call process. It must be explained, if further evaluation and/or treatment is delivered and the situation is not a valid emergency that the applicable co-payment (\$7.00) shall be charged.

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3. If emergency evaluation and/or treatment is provided and the condition is determined to be an emergency or there is an admission to an infirmary or hospital there will be no co-payment charged.

D. Work Release Situations:

All work release situations shall be assessed a co-payment if the offender seeks health services for work related situations within DPS when treatment should be the responsibility of their employer (Workers Compensation, e.g.).

EXCLUSIONS TO THE CO-PAYMENT FEE

- A. Initial processing healthcare examinations/screenings
- B. Dental examinations instituted by the DPS, Health Services staff, such as second opinions and consultations.
- B. One (1) offender initiated sick call visit for the same chief complaint, that offender has been seen for within last fourteen (14) calendar days.
- C. Emergency care to include offenders on outside job assignments who are directed by their NCDPS supervisors to an emergency room or urgent care provider for evaluation of a potentially life or limb threatening injury, allergy, or illness
- D. Offenders admitted to inpatient medical, medical infirmary and inpatient or residential mental health facilities.
- E. Mandated health care encounters: (e.g., periodic health assessments, TB testing, immunizations, Hepatitis B vaccine, other treatments instituted by the NCDPS for public health based reasons; medical examinations or treatment required following use of force, automobile accidents, fire and smoke incidences and others per standard operating procedure)
- F. Chronic disease treatment clinic visits initiated and scheduled by a health care provider Established chronic care disease clinics in the NCDPS are: cardiovascular/HTN, pulmonary disease (asthmas, COPD) diabetes, seizures, HIV/AIDS. However, the provider may initiate Chronic Care Clinics for other medical conditions. These evaluations would not be subject to co-payment.
- G. Up to two (2) visits initiated by a health care provider for routine follow-up care for the original chief complaint.
- H. Custody directed referrals given to health care staff when the custody officer deems a medical visit is critical and necessary (not in routine cases and not to take the place of the sick call process). If emergency evaluation and/or treatment is provided by the nurse and the condition is determined not to be an emergency there shall be a co-payment charged even if referred by custody.
- I. Work related incidents, provided Form Report of Accident to Offender (DC-193) is completed and submitted at the time of the visit.
- J. Health related education.

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- K. Health assessments to qualify offenders for educational programs and/or job assignments
- L. Medical examinations or treatment following extraordinary events such as a riot or natural disaster
- M. NCDPS initiated health measures necessary to prevent the spread of specific infectious or communicable diseases.

BILLING PROCEDURES

- A. Co-payment billing is an automated procedure that involves the electronic transfer of monies to recover co-payment charges.
- B. Based on the co-payment indicator, the fee will automatically transfer from OPUS to IBS (Offender Banking System) and be withdrawn from the offender's trust fund account. All co-payment withdrawals are transferred to the General Fund via an accounts payable process.
- C. All offenders, whether indigent or not, shall have the co-payment deducted from their trust fund account. Co-payment fees deducted shall never take the offenders trust fund account balance below two dollars (\$2.00). If there is not enough money in the account to satisfy the co-payment fee, the charge shall remain in suspense as a lien on the trust fund account. When deposits are made, no more than half (50%) of a deposit shall be taken to pay a co-payment balance.
- D. Co-payment charges remain as a lien against the account until the offender is released or is paroled.
- E. All of the above transactions to recover co-payment charges are done electronically. No action is required by the facility trust fund staff.

TRUST FUND INQUIRIES / SEE PRISONS FISCAL POLICY/PROCEDURES, OFFENDER TRUST FUND

QUESTIONS

Questions or issues not addressed specifically in this policy shall be referred to the Chief for Health Services.



1/31/2016

Paula Y. Smith, MD, Chief of Health Services Date

SOR: Chief of Health Services

Addendum

Form DC-193 Report of Accident to Offender See officer in Charge