

HS-18.17, "Medical Copayment," June 1, 2007

## SCDC POLICY/PROCEDURE

Change 1 to "HS-18.17": 4.10. Change 2 to "HS-18.17":5

NUMBER:HS-18.17

TITLE: MEDICAL CO-PAYMENT

ISSUE DATE: June 1, 2007

RESPONSIBLE AUTHORITY: DIRECTOR OF HEALTH SERVICES

OPERATIONS MANUAL: HEALTH SERVICES

SUPERSEDES: HS-18.17 (March 1, 2004)

RELEVANT SCDC FORMS/SUPPLIES:

ACA/CAC STANDARDS: 4-ACRS-4C-01, 4-ACRS-4C-06, 4-ACRS-4C-08, 4-ACRS-4C-09, 4-ACRS-4C-10, 4-ACRS-4C-15, 4-ACRS-5A-02, 3-4331, 3-4336, 3-4343, 3-4344, 3-4345, 3-4349, 3-4365, 3-4366, 3-4380, 4-4344, 4-4345

STATE/FEDERAL STATUTES: South Carolina Proviso 37.16 authorized under Part 1B of the 2005-2006 South Carolina Appropriations Act

SCDC MEDICAL DIRECTIVES:

NOTE: This policy/procedure is not to be confused with SCDC Policy/Procedure ADM-15.01, "Repayment of Costs by Inmates," which requires charging medical and other expenses to an inmate when that inmate inflicts injuries on himself/herself or others.

PURPOSE: To provide guidelines for the establishment, management, and implementation of an inmate co-payment system for eligible medical care and consultation services initiated or requested by inmates, while at the same time ensuring that all inmates are provided the opportunity to receive necessary health care services regardless of their ability to pay.

POLICY STATEMENT: SCDC is authorized to charge inmates a co-payment fee for any routine or emergency medical care, medications, and consultation service initiated or requested by the inmate. Co-payment fees will not be charged for mental health or psychological care or consultation whether initiated or requested by the inmate or agency staff. SCDC recognizes that the establishment of a co-payment system

does not diminish its responsibility to provide inmates the opportunity to access necessary health care services regardless of their inability to pay.

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### SPECIFIC PROCEDURES:

#### 1. ESTABLISHMENT OF CO-PAYMENT FEES AND NOTIFICATIONS:

1.1 Responsibilities: The Director of Health Services will be responsible for recommending a co-payment fee to the Agency Director that conforms with average national trends. The Agency Director will have final approval of the co-payment fee to be established for designated medical care and consultation services. The Agency Director reserves the right to adjust the established co-payment fee at any time to conform with changes in national trends, or in state or federal statutes or legislation, or other applicable requirements. Changes to the established co-payment fee will be posted at least 30 days prior to the effective date. 1.2 Notification: Inmates will be notified of the established co-payment fee as follows:

1.2.1 Written notices will be posted in conspicuous locations throughout each SCDC facility. The notice will state the established co-payment fee and will explain the applicability of the fee to the inmate. The Director of Health Services will be responsible for the development and distribution of such notices. (4-ACRS-4C-01, 3-4331, 4-4345) 2. APPLICABILITY OF CO-PAYMENT FEES:

2.1 Established co-payment fees will be applicable to all inmates incarcerated in any SCDC facility regardless of his/her indigent status. Inmates who initiate visits to medical to include routine and emergency care, medications, and consultation services are considered by the Agency to have given implied consent for the assessment of the co-payment fee. See Paragraph 3., below, for a list of services for which the inmate will be charged a co-payment fee.

4.1 Initial assessments during the reception and evaluation process, classification physicals, and transfer evaluations; (4-ACRS-4C-06, 3-4343, 3-4344, 3-4345, 4-4344)

4.2 Diagnostic tests and dressing changes;

4.3 Immunizations, tuberculosis (TB) testing, and other selected treatments instituted/initiated by SCDC for public health reasons; (4-ACRS-4C-08, 4-ACRS-4C-09, 4-ACRS-4C-10, 3-4365, 3-4366)

4.4 Infirmary Care;

4.5 Psychological, mental health, and social work services, to include referrals to psychiatrists; (4-ACRS-4C-15, 4-ACRS-5A-01, 3-4336, 3-4349, 3-4380, 4-4345)

4.6 Lab work and x-rays;

4.7 Written referrals from one qualified health care provider to another related to the initial medical problem; (Note: In these cases, the co-payment will only be charged for the inmate's first initiated or requested medical visit.) An inmate who requests to be seen in Medical for a dental problem will be charged for a dental encounter when seen by dental for treatment of the same problem.

4.8 Any clinical visits, to include chronic clinics, initiated by the SCDC to monitor the stated disease process on a routine basis as outlined in the Medical Directives;

4.9 Hospice care;

4.10 When an inmate is sent to medical by his/her supervisor as the result of an injury sustained on the job (e.g., institutional job, Prison Industries, etc.). This includes all follow up visits requested by Medical, and (amended by Change #1 dated July 1, 2008)

4.11 No co-payment will be charged for certain medications. A list of these medications will be developed and maintained by the Division of Health Services and will include:

- medications used exclusively for the treatment of mental disorders; unless the inmate fills the prescription and then refuses to take the medication
- selected medications which in SCDC are more frequently used to treat mental health disorders;
- medications/agents used in the treatment of Tuberculosis (TB-active or latent) (however, co-payments will be charged for medications used in the treatment of secondary illnesses/infections that may arise during the treatment of TB); and
- over the counter medications issued from the living units.

5. When the medical provider enters information into the automated system Encounter Screen, the entry will automatically assess a medical co-payment charge for the inmate based upon the code entered for the Type of Encounter. SCDC charges non-work release inmates ~~\$3.00~~\$5.00 per medical encounter and ~~\$3.00~~ \$5.00 per filled prescription. Work Release inmates are charged ~~\$10.00~~\$12.00 per medical encounter and ~~\$10.00~~\$12.00 per filled prescription, except as noted in paragraph 4 above. However, inmates will not be charged for more than three (3) prescriptions in any calendar month. (Amended by Change #2, dated January 13, 2009) Inmates who do not have sufficient funds to pay for their co-payment fees will have their inmate account debited.

6. INMATE GRIEVANCES: The only medical co-payment issues that will be considered grievable are:

6.1 An allegation that the inmate was improperly assessed a medical co-payment for a medical service or medication described in Paragraph 4., "List of Medical Services for Which the Inmate Will Not be Charged a Medical Co-Payment Fee(s)."; or

6.2 An allegation that the inmate was denied access to health care or medication due to his/her inability to pay for services.

## 7. DEFINITIONS:

Chronic Clinics: Any clinical visit initiated by the SCDC to monitor the stated disease process on a routine basis as outlined in the medical directives.

Co-payment Fee refers to a uniform fee approved by the Agency Director and charged to an inmate for routine and emergency medical care, medications, and consultation services either initiated or requested by the inmate.

Implied Consent refers to inmate initiated visits to medical to include routine and emergency care, medications, and consultation services.

Medical Care and/or Consultation refers to medical services initiated or requested by an inmate and provided to the inmate by a qualified health care provider.

Qualified Health Care Provider refers to any SCDC employed or contracted physician, physician's extender or assistant, dentist, nurse practitioner, registered nurse (RN), licensed practical nurse (LPN), and optometrist. For the purposes of this policy/procedure, mental health, psychological, and social work providers are excluded from this definition.

—

s/Jon E. Ozmint, Director ORIGINAL SIGNED COPY MAINTAINED IN THE DIVISION OF POLICY DEVELOPMENT.

|                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| <p>1.2.2 Inmates will be informed of the procedures necessary to be followed to access health care services and of co-payment fees during inmate orientation provided during the reception and evaluation process. Institutions will provide the same information to inmates during institutional orientation.</p> | <p>2.2 Inmates should not be denied or refused access to health care services because s/he has insufficient funds to pay the medical co-payment fee. (4-ACRS-4C-01, 3-4331, 4-4435)</p> <p>3. LIST OF MEDICAL SERVICES FOR WHICH THE INMATE WILL BE CHARGED A MEDICAL CO-PAYMENT FEE(S):</p> <p>3.1 Dental Services: Co-payment fees will be charged for any dental treatment initiated or requested by an inmate to include, but not limited to, each restoration, extraction, examination, cleaning, root canal, surgical removal of an extracted tooth,</p> |
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other minor surgery, and adjunctive procedure(s) such as occlusal adjustments, denture adjustments, or in-house denture repair/alignment.

Inmates will be charged a co-payment fee for any medications prescribed by the dentist.

3.2 Medical and Optometrist Services/Consultation: Co-payment fees will be charged in any instance in which the inmate initiates or requests any routine or emergency medical care or consultation, to include, but not be limited to sick call requests.

3.3 All inmates incarcerated in any SCDC facility will be charged a co-payment fee for prescribed

medications.  
(See Paragraph  
4.11 for an  
exception to  
medication co-  
payment  
charges.) The  
approval for the  
initiation of a  
prescription co-  
pay was granted  
during the 2003  
legislative  
session of the  
South Carolina  
General  
Assembly. The  
South Carolina  
Department of  
Corrections  
recognizes that  
the  
implementation  
of a prescription  
co-pay will not  
diminish the  
Agency's  
responsibility to  
provide inmates  
necessary  
medication. The  
Agency will  
continue to  
provide all  
chronic  
medications  
regardless of the  
inmate's  
financial ability.  
Under no  
circumstances  
will an inmate

who does not have sufficient funds to pay the co-payment be denied medications, but the inmate's account will be debited.

3.4 A co-payment fee will be charged for security initiated visits as a result of inmate initiated behavior.

4. LIST OF MEDICAL SERVICES FOR WHICH THE INMATE WILL NOT BE CHARGED A MEDICAL CO-PAYMENT FEE(S):