

Standard Operating Procedures

Policy Name: Charges to Offender Accounts for Healthcare Provided

Policy Number: 507.04.05	Effective Date: 02/02/2022	Page Number: 1 of 7
Authority:	Originating Division:	Access Listing:
Commissioner	Health Services Division	Level II: Required Offender
	(Physical Health)	Access

I. <u>Introduction and Summary</u>:

- A. State, county, and private prisons may recover certain health care costs from state offenders housed in their custody.
- B. A reasonable amount of costs may be deducted from the offender's account for medical treatment and "medication" for injuries inflicted by the offender upon himself/herself or others:
 - 1. Each offender will be charged a fee of \$5.00 for requesting medical treatment except for services deemed necessary by the facility, visit related to chronic care, or medical emergencies. Each offender will be charged a fee of \$5.00 for each co-pay eligible medication. [See Section IV.E]

NOTE: Transitional Center offenders will be charged a \$10.00 co-pay in accordance with Standard Operating Procedure 507.04.02, Transitional Center Health Services.

- 2. Nothing in this policy will be construed to relieve the governing authority, governmental unit, subdivision, or agency having the physical custody of an offender from its responsibility to provide and pay for any needed medical and hospital care rendered to such offender.
- 3. Notwithstanding any other provisions of this policy, the deductions from money credited to the account of an offender as authorized will not be made whenever the balance in the offender's account is \$10.00 or less.
- C. This procedure is applicable to all facilities that house GDC offenders to include county and private prisons.

II. <u>Authority</u>:

- A. O.C.G.A. § 42-5-55;
- B. Georgia Department of Corrections (GDC) Board Rule: 125-4-4-01;



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- C. GDC SOPs: 201.04, Charges to Offender Accounts for Health Care and Willful Acts; 227.06, Offender Receipt of Mail; 507.04.03, Offender Health Concerns or Complaints; 507.04.02, Transitional Center Health Services; and 227.02, Statewide Grievance Procedure:
- D. NCCHC Adult Standard: P-A-01; and
- E. ACA Standards: 5-ACI-6A-01 (Mandatory), 5-ACI-6A-02, 4-ALDF-4C-02, 4-ALDF-6A-09, and 4-ACRS-3A-04.

III. Definitions:

- A. **Reasonable Deduction** A Reasonable Deduction to recover costs will be any amount up to, but not exceeding, the documented costs associated with a willful act on the part of an offender. The specific types of costs are enumerated in other sections of this policy.
- B. **Emergency** A medical, dental, or mental health care is care for an acute illness or unexpected health need that cannot be deferred until next scheduled sick call or clinic.
- C. **Medical Treatment and Medication** Each visit initiated by the offender to any licensed healthcare provider, including a facility physician; a physician's assistant or a nurse practitioner; registered nurse; licensed practical nurse; medical assistant; dentist; dental hygienist; optometrist; or psychiatrist for examination or treatment.
- D. **Chronic Illness** Any condition that requires periodic monitoring and treatment in order to prevent deterioration of health, minimize pain and maintain activities of daily living. In addition to the common diseases monitored in the Chronic Illness clinics (hypertension, cancer, diabetes, pulmonary, seizure disorders, HIV and TB infection) this may also include diseases such as Hepatitis C, Rheumatoid arthritis and other autoimmune disorders, renal disease, etc., Crohn's disease, joint disorders from an inflammatory process or trauma with objective data (x-ray evidence), etc.



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IV. Statement of Policy and Applicable Procedures:

Correctional facilities may use the following procedures to recover a portion of costs (up to limits as specified herein) from state offenders, resulting from self-initiated visits or treatment deemed necessary as a result of willful acts.

- A. Medical Deductions for Self-Initiated Visits: Medical Treatment and Medications, which are prescribed or requested by the offender, are subject to a \$5.00 charge per request. This includes sick call and non-emergent or routine "walk-ins" during the day. Additionally, any new co-pay eligible medication will be charged \$5.00 per medication when ordered by the provider or provided by the nurse per protocol. Verification of service(s) for medical treatment will be documented by the health care personnel on the Health Services Request Form (PI-2064) or comparable form Verification of eligible medication will be documented on the Medication Co-Pay form (Found on CAPTIVA).
 - 1. Copies of Health Service Request Form (PI-2064) and the Medication Co-Pay Forms will be distributed as follows (and included and managed in any vendor electronic health record):
 - a. Health Service Request Form (PI-2064) is a duplicate form with an original (white) copy and carbon (yellow) copy, perforated with a top and bottom section and included and managed in any vendor electronic health record.
 - i. The top section of the **white** copy is retained as a part of the permanent medical record. The **yellow** copy is provided to the offender after completing disposition and/or health services reply sections.
 - ii. The bottom section, including both **white** and **yellow** copies (below the perforated line) is forwarded to the Business Office. These copies should be stapled together. The Business Office will return the **yellow** copy to the offender as a means of documenting the transaction. When the copay is waived, the health care provider will note this by checking the appropriate box in the Bottom Section. The Bottom Section should



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remain attached to the top copy to be retained in the Medical Department for six (6) months and then destroyed.

b. Medication Co-Pay Form:

- i. This form will be completed and sent to the Business Office. Contract vendor will develop a process to notify the Business Office. The Business Office will make a copy for the offender as a means of documenting the transaction.
- 2. The Business Office will deduct the appropriate charge from the offender's account.
- 3. A co-pay to the following will apply:
 - a. Such deduction is limited to \$5.00 for each medical service/eligible medication, provided that the balance of the offender's account is not reduced below \$10.00.
- 4. Documentation will be made in the offender's account to indicate all charges. If the offender receives sufficient funds that bring the account balance to more than \$10.00, the deduction will be made at this time.
- 5. The offender's account will be frozen until the costs are paid from additional funds received.
- 6. At the time of transfer, all monies on the books in the offender's account will transfer with the offender as will any documentation on frozen accounts.
- 7. Administrative review of charges assessed (or waived) will be conducted to the extent deemed necessary to ensure compliance with this SOP.



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- B. Medical Confidentiality of the Accounting Notification: Notification of a charge to an offender for medical services rendered must preserve the confidentiality of medical information. Such notification must have all medical information blacked out or otherwise removed before leaving the control of the health care unit.
- C. Resolution of Disputes/Appeal: Offenders will have the opportunity to appeal charges assessed. This will be afforded each offender through the Concerns and Complaints System in accordance with SOP 507.04.03, Offender Health Concerns or Complaints, except that any appeal of charges assessed must be submitted within five (5) working days following the date service was rendered. Otherwise, charges assessed for self-initiated medical (or dental) treatment cannot be grieved. See SOP 227.02, Statewide Grievance Procedure.
- D. Guarantee of Access to Medical Care: Offenders will not be denied medical care regardless of the offenders' ability to pay for medical services or medications.
- E. Medical Services deemed necessary and exempt from the Fee:
 - 1. Medical services initiated by the facility, or required by GDC or by state law, will be exempt from the fee. Such services will continue to be provided at no cost to the offender. Examples include services such as the following:
 - a. Intake Screening and Diagnostic process.
 - b. Communicable disease screening and treatment Offenders will not be charged for any encounter in which tuberculosis, HIV or other serious infectious disease is suspected. This would not apply to minor infections such as a cold or influenza.
 - c. Physicals or other required periodic exams.
 - d. Services scheduled by a health care provider. (Follow-up care deemed to be medically necessary may not be charged).



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- e. Examination following use of force.
- f. Chronic care illness as defined in Section III.D. To be exempted from copay, the condition must be listed on the Problem List by a physician or advanced clinical provider as chronic and require, in the opinion of the provider, a clinical encounter a minimum of every six months. The offender should be enrolled in a Chronic Illness clinic for the purposes of monitoring (e.g., general medicine). On the other hand, services requested during a chronic care clinic deemed to be unrelated to the chronic care condition will be charged.
- g. Pre-natal and obstetrical visits.
- h. Emergencies as defined in Section III.B. Injuries sustained on a work detail will not be charged if they meet the definition of an Emergency.

Note: Sports-related injuries will be charged the \$5.00 copay (or \$10.00 copay for working residents of transitional centers) unless the injury can be shown to be the result of a "willful act" in which case other charges may be assessed in keeping with paragraph IV.F. In addition, self-inflicted injuries will be charged subject to review for appropriateness by mental health staff.

- i. Treatment for mental disorders and medical care directly related to symptoms associated with the mental disorder.
- j. Other services may be charged at the discretion of the health care provider; however, these would not include services requested, such as a request for laboratory test results or medication refill requests, that do not result in an actual health care encounter.
- k. Medications excluded from co-pay charges are HIV, Psychotropic, Hepatitis C, Antibiotics, and medications used to treat chronic illnesses.



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F. Medical Expenses from Willful Acts: A Reasonable Deduction, as defined in Section III.A., from an offender's account may be made for medical costs associated with injuries inflicted by an offender upon himself/herself or others. Documentation of costs associated with services provided, including copies of invoices for outside medical services will be furnished to the Business Office to support charges deducted from an offender's account. These charges may exceed the \$5.00 charge for self-initiated care and medications. Charges for willful acts will be handled in accordance with SOP 201.04, Charges to Offender Accounts for Health Care and Willful Acts.

V. <u>Attachments</u>:

None.

VI. Record Retention of Forms Relevant to this Policy:

The top section of the Health Service Request Form (PI-2064) (white copy) will be retained as a part of the permanent medical record.