



Program Statement

OPI: HSD/HSS
NUMBER: P6031.02
DATE: 8/15/2005
SUBJECT: Inmate Copayment
Program

RULES EFFECTIVE: 10/3/2005

1. **PURPOSE AND SCOPE.** [§ 549.70(a) The Bureau of Prisons (Bureau), may under certain circumstances, charge you, an inmate under our care and custody, a fee for providing you with health care services.]

The Federal Bureau of Prisons (Bureau) current health care system does not include incentives for appropriate use of health care services by inmates. Charging inmates for health care services will likely increase the inmate's respect for health care and will encourage inmates to be more responsible for their health care. This policy will be effective and implemented on October 3, 2005.

All inmates have access to Bureau health care services. The Bureau will charge a copay fee for inmate requested visits to health care providers. Inmates will not be denied access to necessary health care because of an inmate's inability to pay the copay fee.

2. **PROGRAM OBJECTIVES.** The expected outcomes of this program are:

a. Inmates will be encouraged to be more responsible for their own health care.

b. The Bureau will promote the appropriate use of health care services by inmates.

3. **DIRECTIVES REFERENCED**

P1330.13 Administrative Remedy Program (12/22/95)
P4500.04 Trust Fund/Warehouse/Laundry Manual (6/16/97)
P5290.14 Admission and Orientation Program (4/3/03)

[Bracketed Bold - Rules]

Regular Type - Implementing Information

Rules cited in this Program Statement are contained in
28 CFR §§ 549.70-549.74

4. STANDARD REFERENCED

American Correctional Association 4th Edition Standards
for Adult Correctional Institutions: 4-4345

5. PAYMENT FOR HEALTH CARE SERVICES. [§ 549.70(b)]

Generally, if you are an inmate as described in § 549.71, you must pay a fee for health care services of \$2.00 per health care visit if you

- a. receive health care services in connection with a health care visit that you requested, (except for services described in § 549.72); or
- b. are found responsible through the Disciplinary Hearing Process to have injured an inmate, who, as a result of the injury, requires a health care visit.]

28 CFR 549.71 refers to Section 6 of this PS; 28 CFR 549.72 refers to Section 7 of this PS.

If an inmate is evaluated by more than one provider during a health care visit, the inmate will only be charged for one visit.

Inmates will be charged a copay fee for a medical evaluation requested by non-clinical staff if the condition is not an emergency.

6. INMATES AFFECTED. [§ 549.71 This subpart applies to

- a. any individual incarcerated in an institution under the Bureau's jurisdiction; or
- b. any other individual, as designated by the Director, who has been charged with or convicted of an offense against the United States.]

Inmates assigned in-patient status at the Medical Referral Centers (MRC) are exempt from a copay fee.

Inmates designated to an MRC, who are assigned medical or psychiatric out-patient status, will be charged a copay fee for inmate requested visits not directly related to their primary diagnoses.

- ! Inmates designated to the general population/work cadre of an MRC will be charged a copay fee except for services described in § 549.72 (see Section 7 of this PS).

Inmates in Special Housing Units (SHU) will not be charged a copay fee for daily visits (rounds) by Health Services staff.

- ! Inmates housed in a SHU will be charged a copay fee except for services described in § 549.72 (see Section 7 of this PS).

7. HEALTH CARE SERVICES PROVIDED WITHOUT A COPAY FEE.

[§ 549.72 Services provided without fees. We will not charge a fee for

- a. Health care services based on staff referrals;
- b. Staff-approved follow-up treatment for a chronic condition;
- c. Preventive health care services;
- d. Emergency services;
- e. Prenatal care;
- f. Diagnosis or treatment of chronic infectious diseases;
- g. Mental health care; or
- h. Substance abuse treatment.]

Examples of health care services based on staff referrals, follow-up treatment for chronic conditions, and preventive health care include, but are not limited to:

- ! Blood pressure monitoring;
- ! Glucose monitoring;
- ! Insulin injections;
- ! Chronic Care Clinics;
- ! Testing for tuberculosis;
- ! Vaccinations;
- ! Wound care; and
- ! Patient education, etc.

8. APPEALING THE FEE. [§ 549.73 You may seek review of issues related to health service fees through the Bureau's

Administrative Remedy Program (see 28 CFR part 542).]

28 CFR 542 refers to Section 7 of this PS.

9. INMATES WITHOUT FUNDS. [§ 549.74 Inmates without funds. You will not be charged a health care service fee if you are considered indigent and unable to pay the health care service fee. The Warden may establish rules and processes to prevent abuses of this provision.]

An **inmate without funds** (indigent inmate) is an inmate who has not had a trust fund account balance of \$6.00 for the past 30 days.

Wardens may impose restrictions on an inmate to prevent abuse of this provision.

Example: An inmate shows a pattern of depleting his or her commissary funds before requesting health care services.

10. PROCEDURES TO COLLECT INMATE COPAY FEE. Based on the health care provider's clinical evaluation and diagnosis of the inmate, Health Services staff will determine whether a copay fee will be charged.

- ! All inmate health care visits will be entered into TRUFACS by registration number and pay status (i.e., paid, non-paid). The date, time, and inmate name will automatically appear on the screen.
- ! Institutions will establish implementation procedures for data entry. This procedure will be negotiated at the local level.
- ! The Health Services Administrator (HSA) will report the total number of inmate health care visits, by pay category, on a monthly basis. The HSA will maintain these reports for submission as part of the Bureau's Annual Report to Congress.

Staff will develop a system to manually capture the information required above if TRUFACS is unavailable.

- ! Inmate consent is not required for deduction of the copay fee.
- ! TRUFACS will automatically establish a debt for any non-

indigent inmate who is charged a copay fee and does not have sufficient available funds. Incoming funds will be applied against this debt until it is satisfied.

Financial Management staff will process inmate copay funds as required.

11. **NOTICE TO INMATES.** Notification of the Inmate Copayment Act will be provided both orally, and in writing, during Admission and Orientation.

/s/
Harley G. Lappin
Director