




Department of
Rehabilitation & Correction

SUBJECT: Bureau of Medical Services Co-Payment Procedures	PAGE <u> 1 </u> OF <u> 4 </u>
	NUMBER: 68-MED-15
RULE/CODE REFERENCE: OAC 5120-9-31; ORC 5120.56	SUPERSEDES: 68-MED-15 dated 04/15/10
RELATED ACA STANDARDS: 4-4344M, 4-4345; HC-1A-02	EFFECTIVE DATE: September 10, 2018
	APPROVED: 

I. AUTHORITY

Ohio Revised Code 5120.01 authorizes the Director of the Department of Rehabilitation and Correction, as the executive head of the department, to direct the total operations and management of the department by establishing procedures as set forth in this policy.

II. PURPOSE

The purpose of this policy is to establish consistent procedures and guidelines for the Bureau of Medical Services (BOMS) co-payment program in accordance with ORC section 5120.56 (Health Care Co-Payment).

III. APPLICABILITY

This policy applies to all persons employed by or under contract with the Ohio Department of Rehabilitation and Correction (DRC) who may be involved in the Bureau of Medical Services (BOMS) co-pay system and inmates who may be required to pay such a co-pay.

IV. DEFINITIONS

Health Care Co-Payment Charge - Co-pay fee charged to inmates who receive defined health care services.

Indigent Inmate - An inmate is considered indigent if during the thirty (30) days immediately preceding the request the inmate has earned or received less than \$12.00; and, if the inmate's account balance has not exceeded \$12.00 at any time during the thirty (30) days immediately preceding the request.

Medical Emergency - For the purposes of this policy, a medical emergency requires an emergency trip outside of the institution or an admission to the infirmary.

Refill - A current, active prescription with remaining doses of medication available; to fill a prescription a second or subsequent time.

V. POLICY

It is the policy of the Ohio Department of Rehabilitation and Correction (DRC) that inmates with medical needs shall have appropriate and reasonable access to health care services while instilling inmate accountability and responsibility through the implementation of a medical co-pay system.

VI. PROCEDURES**A. Inmate Notification of Co-Pay Procedures**

1. During the reception process, all inmates shall be advised of the co-pay guidelines.
 - a. This information is communicated orally and in writing and is conveyed in a language that is easily understood by each inmate.
 - b. When a literacy or language problem prevents an inmate from understanding written information, a staff member or translator shall assist the inmate.
2. Each institution's inmate handbook shall include co-pay guideline information.
3. Each institution's inmate library shall maintain current copies of AR 5120-5-13, Correctional Healthcare Services Co-Payment, and this policy.

B. Co-Pay Charges

1. All medical services initiated by an inmate through a Health Services Request form (DRC5373) shall carry a \$2.00 co-pay charge.
2. All medical services initiated by an inmate through emergency procedures shall be free if an actual emergency exists.
 - a. A \$3.00 co-pay charge shall be administered if it is determined no emergency existed.
 - b. The medical staff shall determine if the situation was an actual emergency or non-emergency.

C. Co-Pay Charge Exemptions

1. Inmates who are indigent, as defined by this policy, shall not be charged a co-pay fee. All inmates shall receive appropriate health care based on their present medical needs without regard to financial status. No inmate shall be denied needed health care or treatment because of inability to pay.
2. Inmates shall not be charged a co-pay for medication refills, regardless of an inmate-initiated Health Services Request form (DRC5373). If a Health Services Request form (DRC5373) for a refill also contains requests for other non-exempted services, the appropriate fee shall be charged.

3. Inmates shall not be charged a co-pay for medical services provided in an in-patient setting including, but not limited to Dementia Unit, Frazier Health Center, FMC non-cadre inmates, RTUs, AOCI Assisted Living patients, and institutional infirmaries.
4. Inmates shall not be charged a co-pay for dental services.
5. Inmates shall not be charged a co-pay for medical services initiated by policy-defined staff reporting requirements such as, but not limited to, sexual assaults, use of force, and accidents that occur while performing job duties.
6. Inmates shall not be charged a co-pay for medical services initiated by medical staff (e.g., chronic care-related visits, medical staff initiated follow-up visits, treatments, blood pressure checks, etc.).

D. Health Care Debit Process

1. At the close of the business day, medical staff shall designate on the Nurses Screening form (DRC5069) whether or not an inmate is to be charged a co-pay for the medical services they received.
2. The medical staff shall utilize the information on the Nurses Screening form (DRC5069) to complete the Healthcare Debit form (DRC5203).
 - a. A copy of the Healthcare Debit form (DRC5203) shall be scanned into the patient's electronic health record.
 - b. The original three-part Healthcare Debit form (DRC5203) shall be forwarded to the Cashier's Office the next business day.
3. The Cashier's Office shall determine if any reported inmates are eligible for a co-pay waiver due to indigent status.
 - a. If the inmate is not indigent, the Cashier's Office shall process the co-pay and mail the pink copy of the completed Healthcare Debit form (DRC5203) through the institutional mail to the inmate as written notice of the charge.
 - b. If the inmate is indigent, the Cashier's Office shall note the inmate is "indigent" on the Healthcare Debit form (DRC5203) and mail the pink copy through institutional mail to the inmate as written notice that the assessed co-pay was not deducted.
 - c. The Cashier's Office shall retain both the white and canary copies of the Healthcare Debit form (DRC5203).
4. If there are insufficient funds available in the inmate's account and the reported inmate is not determined indigent, the Cashier's Office shall charge the account of the inmate for the appropriate co-pay fee.

5. The Cashier's Office shall complete the Medical Services Co-Payment report (DRC5204) and forward it to Operation Support Center (OSC) by the 10th of the following month with a check from the Inmate Trust Fund account for the fees collected.

E. Co-Pay Grievance Procedures

Inmates may contest a co-pay charge by utilizing the inmate grievance procedures as provided in Administrative Rule 5120-9-31, Inmate Grievance Procedure. Pursuant to this rule, the inmate's first step is to send an Informal Complaint (DRC4151) to the appropriate health care administrator (HCA).

F. Co-Pay Refund Process

If it is determined a co-pay charge was inappropriate, the HCA or the inspector of institutional services (IIS) shall initiate the refund process.

1. If initiated by the HCA: The HCA shall print a copy of the Healthcare Debit Form (DRC5203) saved in the patient's electronic health record, fill out the refund section of the Healthcare Debit form (DRC5203) and forward it to the Cashier's Office.
2. If initiated by the IIS: The IIS shall obtain the canary copy of the Healthcare Debit Form (DRC5203) from the Cashier's Office, fill out the refund section of the Healthcare Debit form (DRC5203) and return it to the Cashier's Office.
3. The Cashier's Office shall complete the refund section of the Healthcare Debit form (DRC5203) and appropriately credit the inmate's account.
4. The Cashier's Office shall keep the original copy of the amended Healthcare Debit form (DRC5203) completed refund section for its records and make two (2) copies:
 - a. One (1) copy shall be forwarded to the HCA for record keeping purposes within the medical department. A copy of the amended Healthcare Debit form (DRC5203) shall be scanned into the patient's electronic health record.
 - b. One (1) copy shall be forwarded to the inmate through institutional mail as written notice that the assessed co-pay was refunded to the inmate's account.

Related Department Forms:

Informal Complaint	DRC4151
Nurses Screening	DRC5069
Healthcare Debit Form	DRC5203
Medical Services Co-Payment Report	DRC5204
Health Services Request	DRC5373