GUIDANCE DOCUMENT CERTIFICATION

I have reviewed this guidance document or proposed guidance document and I certify that it complies with sections §227.10 and §227.11 of the Wisconsin Statutes.

I further certify that the guidance document or proposed guidance document contains no standard, requirement, or threshold that is not explicitly required or explicitly permitted by a statute or a rule that has been lawfully promulgated.

I further certify that the guidance document or proposed guidance document contains no standard, requirement, or threshold that is more restrictive than a standard, requirement, or threshold contained in the Wisconsin Statutes.

________________________
Wendy Monfils
Name of Individual Certifying this Document/Proposed Document

________________________
Office of Management + Budget Director
Title

________________________
Wendy Monfils
Signature

6/25/19
Date Signed
POLICY
The Division of Adult Institutions shall charge a copayment for inmate initiated requests for health services which require services by a health care provider. No inmate shall be refused health care for inability to pay a copayment.

REFERENCES
Standards for Health Services in Prisons, National Commission on Correctional Health Care, 2014, P-A-01 – Access to Care
Wisconsin State Statutes s. 227.11(2) – Administrative Procedure and Review
Wisconsin State Statutes ss. 302.386(3), (4) and (6) – Medical and dental services for prisoners and forensic patients
Wisconsin Administrative Code Ch. DOC 316 – Medical Dental and Nursing Copayment Charge
Attachment – Copayment Table

DEFINITIONS, ACRONYMS, AND FORMS
Copayment – The amount charged an inmate for patient-initiated health services.

DAI – Division of Adult Institutions

DOC – Department of Corrections

DOC-2468 – Acknowledgement of Receipt of/Access to/Information (WICS) – Form signed by inmate generated from WICS as part of admission process.

DOC-3035 – Health Service Request and Copayment Disbursement Authorization


DSU – Dental Services Unit

Health Care Provider – Physician, Physician Assistant, Advanced Practice Nurse Prescriber, Registered Nurse, Licensed Practical Nurse, Nursing Assistant, Dentist, Dental Assistant, Dental Hygienist, Physical Therapist, Optometrist, Optometrist Assistant, Phlebotomist, Medical Assistant, Medical Program Assistant Associate who provides health related services. This includes all on-site and off-site care providers utilized by the DOC to provide medical, dental, optical and any other health related services.
HSU – Health Services Unit

Inmate patient – Inmate under the care of a health care provider. This designation begins with the inmate’s admission to a correctional facility.

Inmate patient-initiated request – A request by an inmate patient through a Health Service Request, Psychological Services Request, Dental Services Request or other means (e.g., through non-health facility staff, relative of the inmate patient, attorney, or other person) for a face-to-face contact with a health care provider.

Protected Health Information (PHI) – Individually identifiable health information transmitted by electronic media; maintained in electronic media; or transmitted or maintained in any other form or medium.

WICS – Wisconsin Integrated Corrections System

PROCEDURE

I. Copayment General Information
   A. An inmate shall not be refused health care for inability to pay a copayment.

   B. Unless an exception applies, as designated in the Attachment to this policy, inmate patients shall be charged a $7.50 copayment for each instance where a face-to-face contact with a health care provider is the result of an inmate patient initiated request for services.

   C. A DOC-2468 generated in WICS shall be completed as part of the DAI admission process or at the facility where the inmate is a short-term admission.

   D. An inmate’s refusal to sign the DOC-2468 shall not avoid the copayment charge.

II. HSU and DSU Processing of Copayment Charges
   A. Unless it is a potentially life threatening emergency, an inmate patient shall complete a DOC-3035 or DOC-3392 to request healthcare.

   B. When a Health Care Provider sees an inmate patient, they shall determine whether a copayment shall be charged in accordance with the Attachment to this policy.

   C. Whether or not the inmate patient has signed the DOC-3035 or DOC-3392, HSU/DSU staff shall sign and date the HSU/DSU section indicating the type of visit and if a copayment shall be charged.

      1. If the inmate patient refuses to sign the DOC-3035 or DOC-3392, HSU/DSU shall write “refuses to sign”, but shall see the inmate patient. Refusal to sign shall not avoid the charging of the copayment.
2. When a copayment is charged, the HSU/DSU shall provide the inmate patient with the 3rd ply of the form and forward the 2nd ply to the Business Office.

3. If a copayment is not charged, the HSU/DSU shall destroy the 2nd and 3rd plies of the form.

III. Business Office Processing of Copayments

A. Facilities shall deduct HSU/DSU copayments.

B. An entry shall be made in WICS in the comment section and shall include the date of service and specific type of service; i.e., Medical, Dental or Optical.

C. For inmate patients without funds, a copayment loan shall be established and the balance due shall remain until paid.

IV. Copayments Shall Not Be Charged For:

A. Health Care Record review appointment.

B. Copies of documents, but standard copying fees shall be charged.

C. Request to amend/correct PHI.

D. Request that communication of PHI be done in an alternate manner.

E. Request restriction on use and disclosure of PHI.

F. Request for an accounting of disclosures of PHI made without authorization.

Administrator’s Approval: _____________________________ Date Signed: ________________

Jim Schwochert, Administrator
**REFERENCES**

**DEFINITIONS, ACRONYMS, AND FORMS**

**FACILITY PROCEDURE**

I.

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B.

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II.

A.

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C.
<table>
<thead>
<tr>
<th>MEDICAL Category</th>
<th>Copayment</th>
<th>No Copayment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient Setting – Infirmary</td>
<td>• Any healthcare when an inmate patient resides in an inpatient setting.</td>
<td>• Treatment for an actual medical or dental emergency as determined by a physician, dentist or registered nurse.</td>
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<tr>
<td>Emergencies</td>
<td>• Appointment is scheduled at the inmate patient's insistence even though telephone assessment triage does not indicate the concern is emergent.</td>
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<td>• An inmate patient bringing their complaint to a staff member rather than submitting a request in writing. This is not a way around the copayment system. If an inmate patient goes to a staff member with a problem they are still requesting healthcare and a copayment is appropriate.</td>
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<td>• Injuries including those injuries incurred while participating in recreation regardless of whether care is provided on or off site.</td>
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<td>Additional issues raised during a</td>
<td>• Any additional issues brought forth by the inmate patient unrelated to the reason they are being seen is subject to copay.</td>
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<td>prescheduled appointment (HSU staff scheduled) or during a sick call visit (inmate patient initiated)</td>
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<td>Health related follow-up</td>
<td>• If an inmate patient has been treated for a specific medical condition in the past, it does not mean they have unlimited visits for that problem in the future.</td>
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<tr>
<td></td>
<td>• Medical staff member scheduled appointments.</td>
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<td></td>
<td>• Medical staff member scheduled chronic condition follow-up according to the chronic disease guidelines.</td>
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<td>• A written referral from a PREA Risk Assessment Screener.</td>
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<td>Work related injuries</td>
<td>• The work site must be aware of the injury and an injury/accident/incident report shall be filed.</td>
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<td>• Work related injury occurred while in pay status while on the job (e.g., washing dishes and slipped on water and hurt self or a splash into the eye of cleaning solution, cut).</td>
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<td></td>
<td>• The inmate patient was sent from the work site by staff to the HSU.</td>
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<tr>
<td>Infection control</td>
<td>• Requested immunizations that should have been scheduled but were overdue or those directed by Bureau of Health Services (BHS) such as influenza, pneumonia vaccine, HBV, HAV or tetanus boosters.</td>
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<td>• Annual Health Maintenance including Tuberculin Skin Test (TST) annual review of signs and symptoms.</td>
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<td>• HIV test may be requested by inmate patients every six months.</td>
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<td>• Copayments may be suspended for defined period of time as determined by HSU Mgr/designee for surveillance and screening to control the spread of communicable/infectious diseases at facilities with a confirmed outbreak. There shall be a specific start and stop date identified. Copayment waiver during defined outbreak is only related to specific symptoms identified at the time of the outbreak.</td>
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<tr>
<td>On-Call situations</td>
<td>• Copayment is charged when telephone triage results in a face to face visit with a health care provider and meets other copayment requirements.</td>
<td>• No copayment for telephone triage.</td>
</tr>
<tr>
<td>Facility Movement Medical Restriction/Special Needs-Intake or Transfer</td>
<td>• Repair or replacement of special needs items that have been lost or misused.</td>
<td>• Medical Restriction/Restrictions</td>
</tr>
<tr>
<td></td>
<td>• Special medical needs are to remain in effect until reviewed by the HSU/Special Needs Committee. That Committee may continue a Medical Restriction/Special Need without seeing the inmate patient based on the criteria in policy/procedure. If the Medical Restriction/ Special Need does not fall into the established criteria, the inmate patient shall be reevaluated by the HSU/Special Needs Committee.</td>
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<tr>
<td></td>
<td>• Repair or replacement of medical equipment and special needs items as deemed necessary through normal use or through recommended replacement schedules.</td>
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</tbody>
</table>
### OPTICAL

<table>
<thead>
<tr>
<th>Category</th>
<th>Copayment</th>
<th>No Copayment</th>
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</thead>
</table>
| Optical             | • Request for exams according to the optical guidelines in DAI Policy 500.30.35.  
• Any refraction exam except immediately following cataract surgery.  
• Repair for broken glasses.  
• Replacement of lost glasses. | • Referrals from health care providers according to chronic disease guidelines [e.g., Dilated Fundus Exam (DFE) annually for diabetics]. The DFE is not charged, however if the inmate patient also desires a refraction and new glasses, a copayment is charged for these services.  
• Adjustments and missing screws.  
• An inmate patient request within 30 days of getting new glasses and has problems with the new prescription.  
• A refraction within 60 days of cataract surgery. |

### MENTAL HEALTH

<table>
<thead>
<tr>
<th>Category</th>
<th>Copayment</th>
<th>No Copayment</th>
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</table>
| Mental Health       | • Psychologist/Psychiatrist, after review of the HSR or Psychological Service Request (PSR), decides it is not necessary, but the inmate patient still requests to be seen by the psychiatrist. | • A written referral by psychologist or health services staff.  
• Scheduled follow-up visits.  
• A written referral from a PREA Risk Assessment Screener  
• Crisis intervention evaluation and treatment related to sexual abuse in confinement. |

### DENTAL

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<tr>
<th>Category</th>
<th>Copayment</th>
<th>No Copayment</th>
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</thead>
<tbody>
<tr>
<td>Inmate patient initiated request</td>
<td>• Each inmate patient requested dental appointment during which a single dental treatment, prescription or x-ray is provided.</td>
<td>• An inmate patient requested dental appointment where no treatment is provided.</td>
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</tbody>
</table>
| Multiple visits for one procedure | • A single dental treatment procedure requiring more than one visit to complete is charged a single copayment only:  
✓ Root canal  
✓ Dentures  
✓ Scaling and root planning | • Appointments at the request of the dentist as a follow-up to a dental procedure already completed:  
✓ Post-op check on an oral surgery procedure.  
✓ Occlusion adjustment on a restoration adjustment less than six months old. |
| Follow-up appointments            |                                                                           | • Intake dental examinations and x-rays.  
• Periodic exams and x-rays for the purpose of scheduling a hygiene appointment. |
| Diagnostic                        | • Periodic exams and x-rays not related to a hygiene appointment.         |                                                                           |
| Preventive                        | • Copayment is charged when inmate patient requests a prophylaxis (teeth cleaning) appointment or treatment. |                                                                           |
| Off-site dental referral appointments |                                                                           | • Dental treatments necessary to improve a dental classification in order to expedite inmate movement at the request of RC. |
| Centers and Jails                 | • Dental appointments requested by DOC inmate patients housed in Centers, regardless of whether the dental care is provided by DOC or another dental provider.  
• Appointments requested by DOC inmate patients housed in Jails when care is provided at a DOC facility. |                                                                           |
| Reclassification Committee (RC) required movement |                                                                           |                                                                           |
| Multiple issues on one Dental Service Request (DSR) | • Copayment is charged per contact. Multiple appointments to treat multiple procedures each have a separate copayment.  
• Address the listed dental problems in order of clinical priority.  
• If all requested care cannot be provided in one visit, or if the dentist determines it is necessary to proceed with additional procedures not provided at the appointment, have the inmate patient complete a new DSR requesting additional chair time while he/she is still in the dental chair. Additional appointments require additional copayments. |                                                                           |