I. **AUTHORITY:**

The authority of the Board of Corrections to promulgate this Administrative Rule is vested in Act 50 of 1968, First Extraordinary Session, as amended; Act 549 of 1993, Regular Session, as amended; and Act 323 of 2001, Regular Session.

II. **PURPOSE:**

The purpose of this policy is to encourage responsible use of medical services by inmates to improve the quality of the services rendered. A broader purpose of providing an opportunity for inmates to learn increased responsibility for their own choices and actions is also intended.

III. **APPLICABILITY:**

This policy is applicable to all inmates in the physical custody of the Arkansas Department of Correction.

IV. **DEFINITIONS:**

*Inmate-initiated services* are those services requested by the inmate, typically through Sick Call Request. The definition specifically does not include emergency services, chronic care clinics necessary to track and treat diagnosed medical disorders, physical and dental examinations scheduled at intake and regular intervals thereafter, clinician scheduled follow-up for treatment of a medical or dental disorder, mental health contacts, or visits related to disease prevention such as tuberculosis testing and prevention.

*Co-pay* is an amount, not to exceed $5, set by the Board of Corrections for a period of time corresponding to the biennial budgeting of the State of Arkansas that shall be charged against an inmate’s account.
V. **POLICY:**

Inmates seeking *inmate-initiated* services shall be assessed, at the point of service, a preset amount of *Co-pay*. Inmates will be provided the services regardless of whether they have the means in their inmate accounts to satisfy the assessment. The amount of the assessment may not reduce the inmate’s account below $5. Any unpaid balance would remain as a lien on the account until it could be satisfied without reducing the balance below $5.

VI. **PROCEDURES:**

1. A list of *inmate-initiated* medical and dental procedures subject to *Co-pay* shall be recommended to the Board of Corrections for approval. The approved list shall be posted in housing areas and at the front of medical and dental examination and treatment areas. This list may be changed by approval of the Board of Corrections at any time, with thirty (30)-day prior notice being posted.

2. An amount of *Co-pay* shall be set by the Board of Corrections and similarly posted. This amount must be reviewed biannually by the Board, but may be changed any time the Board believes that it is in the best interest of the inmate population to do so.

3. The Director shall establish and review annually an Administrative Directive that implements this policy and provides the mechanisms for assessing and collecting *Co-pay*.

4. An oversight committee shall be appointed by the Director to see to the collection of data regarding the impact of this policy, and to ensure that this policy does not create a barrier to needed medical services for any inmate.

5. All monies collected shall be earmarked for expenditure for third party (independent quality assurance) review of the quality of medical services. This review is intended to assure that the quality of services delivered is comparable to those available in the community, and to assure that the effect of this Administrative Rule on the delivery of health care services is positive.

VII. **REFERENCES:**

- ACA 4-4345
- NCCHC Position Statement, 31 March 1996