

# SENATE BILL REPORT

## SSB 5024

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As Passed Senate, March 7, 1995

**Title:** An act relating to health care services for offenders.

**Brief Description:** Requiring offenders to assist in paying for certain health care services.

**Sponsors:** Senate Committee on Human Services & Corrections (originally sponsored by Senators Hargrove, Long, Smith, Winsley, McCaslin, Rasmussen, Bauer, Schow and Oke; by request of Department of Corrections).

**Brief History:**

**Committee Activity:** Human Services & Corrections: 1/12/95, 2/1/95 [DPS].

Ways & Means: 2/15/95, 2/16/95 [DPS (HSC)].

Passed Senate, 3/7/95, 49-0.

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### SENATE COMMITTEE ON HUMAN SERVICES & CORRECTIONS

**Majority Report:** That Substitute Senate Bill No. 5024 be substituted therefor, and the substitute bill do pass.

Signed by Senators Hargrove, Chair; Franklin, Vice Chair; Fairley, Kohl, Long, Moyer, Palmer, Prentice, Schow, Smith and Strannigan.

**Staff:** Andrea McNamara (786-7483)

**Background:** A number of other states and some counties in Washington State have found that requiring offenders to make nominal co-payments toward the costs of their health care services has significantly reduced unwarranted, offender-initiated health care visits. The decrease in volume of unnecessary services allows health care providers more time to provide assistance to those offenders with the greatest health care needs.

**Summary of Bill:** The Department of Corrections is authorized to charge offenders nominal co-payments of at least \$3.00 per visit for offender-initiated, non-emergency health care services. Payments are collected directly from an offender's institution account by the superintendent. Services are not refused because of an offender's inability to pay.

The department may not collect a copayment if doing so would decrease an offender's institution account below the level of indigency defined by rule. The department must assess and track all copayments regardless of an offender's indigence so that payments may be collected at a later date if the offender receives sufficient funds into his or her account. All copayments collected are deposited into the general fund.

The department shall track and report to the Legislature on the results of the copayment program, including the total number of health care visits and copayments assessed, the total amount collected from copayments, and the total number of copayments not assessed or

collected due to indigence or the serious/emergent nature of the treatment or because the service was not initiated by the offender.

When the department prepares an offender's initial health profile, it shall also make a financial assessment of the offender's ability to pay for medical services from personal resources or private insurance.

The substitute also contains technical changes relating to the secretary's ability to delegate authority to superintendents to withdraw funds directly from offenders' institution accounts.

**Appropriation:** None.

**Fiscal Note:** Available.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Testimony For:** Requiring copayments would be one factor in a multitude of new approaches the department is implementing to discourage the unwarranted use of health care services and to reduce the costs of such services. No services would be refused because of an offender's inability to pay. A number of offenders use sick call as a way to get out of work or simply to relieve the boredom of incarceration. When IMU offenders use sick call, extra staff are required to transport and escort them, so the savings from deterring the unwarranted use of services could be even greater than the cost of the services alone.

**Testimony Against:** None.

**Testified:** Ruben Cedeño, Director, Division of Offender Programs (pro); Richard Root, Member, Washington Public Employees Association and employee, Department of Corrections (pro).

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## SENATE COMMITTEE ON WAYS & MEANS

**Majority Report:** That Substitute Senate Bill No. 5024 as recommended by Committee on Human Services & Corrections be substituted therefor, and the substitute bill do pass.

Signed by Senators Rinehart, Chair; Loveland, Vice Chair; Bauer, Cantu, Drew, Finkbeiner, Fraser, Gaspard, Hargrove, Hochstatter, Johnson, Long, Moyer, Roach, Sheldon, Snyder, Spanel, Strannigan, Sutherland, West and Winsley.

**Staff:** Linda Brownell (786-7913)

**Testimony For:** This bill would reduce the escalating costs of health care to offenders. The data system the Legislature provided last year is a useful tool to track inmate medical usage and will provide useful information to the department to help reduce costs.

**Testimony Against:** None.

**Testified:** Ruben Cedeño, Beth Anderson, DOC.

**House Amendment(s):** The striking amendment eliminates three main components of the bill: (1) it removes the prohibition on collecting copayments when collection would reduce an offender's inmate account below the indigence standard; (2) it removes the requirement that the department track and report to the Legislature on all copayment assessments and collections; and (3) it removes the requirement that the department prepare initial health profiles and financial assessments of offenders' ability to pay for medical services.

The striking amendment also requires inmates to pay a nominal fee for all over-the-counter medications and limits their distribution to individual unit doses.

Other technical changes are made.