

| VOLUME 1: GOVERNANCE AND ADMINISTRATION | Effective Date: 01/2002 |
|---|-------------------------|
| CHAPTER 10                              | Revision Date: 12/2015  |
| 1.10 COPAYMENT PROGRAM POLICY           | Attachments: Yes 🗌 No 🔀 |

## I. POLICY

Patients shall be charged a fee of five dollars for each patient-initiated health care visit in accordance with Title 15.

## **II. RESPONSIBILITY**

The Chief Executive Officer or designee of each institution are responsible for the implementation, monitoring, and evaluation of this policy.

## **III.PROCEDURE**

Medically necessary treatment that relates to the initial condition including the evaluation, assessment, and follow-up services shall be provided by licensed health care staff without regard to the patient's ability to pay.

The copayment shall not be charged if the health care service(s) is considered to be:

- An emergency.
- A diagnosis or treatment of communicable disease conditions.
- Mental health services.
- A follow-up health care service.
- A health care service necessary to comply with state law or regulations.
- A reception center health screening and evaluation.
- Treatment services relating to sexual abuse or assault.
- Any inpatient services, extended care, or skilled nursing services.
- Chronic Care Program visits.

## **IV. REFERENCES**

- Code of Federal Regulations, Title 28, Judicial Administration, Part 115-National Standards to Prevent, Detect, and Respond to Prison Rape, Final Rule, 115.82, Access to Emergency Medical and Mental Health Services, g
- Prison Rape Elimination Act of 2003, Public Law 108-79
- California Code of Regulations, Title 15, Division 3, Article 8, Section 3354.2