



PARTNERSHIP FOR THE
PUBLIC GOOD

Statement on requiring inmates to make medical co-payments

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The Partnership for the Public Good unites over 180 community organizations working to build a better Buffalo. Our partners run the gamut from smaller grassroots organizations like block clubs and prisoners' rights groups like Prisoners are People Too, to legal services providers such as the Legal Aid Bureau, arts and cultural organizations like the Burchfield Penney and Hallwalls, to large social service agencies including Catholic Charities and the United Way.

PPG strongly believes that access to health care services is at the foundation of any acceptable correctional health services program. Such access should not be obstructed, because without ready access to necessary health care services—as determined by qualified health staff—the health of the inmate population, as well as that of the staff and the public, may be jeopardized.

There are a number of arguments against charging inmates a fee for health care services:

- Access is impeded. A fee-for-service or co-pay ignores the significance of full and unimpeded access to sick call and the importance of preventive care.
- Inmates are almost always in an "indigent" mode. They seldom have outside resources and most have no source of income while incarcerated. They most often rely on a spouse, mother, or other family member to provide funds they can use for toiletries, over-the-counter medications, telephone calls, writing paper and pens, sanitary napkins, candy, etc. These "extras" become extremely important to one who is locked up 24 hours per day. The inmate may well choose to forgo treatment of a medical problem in order to be able to buy shampoo or toothpaste.
- The program sets up two tiers of inmates: Those who have funds to get medical care and commissary privileges, and those who have to choose between the two.
- Avoiding medical care for "minor" situations can lead to serious consequences for the inmate or inmate population, since the minor situation can deteriorate to serious status or lead to the infection of others.
- Crowded conditions increase the risk of spreading infections, and effective measures need to be taken to reduce this risk. Health care should be encouraged rather than discouraged.

- A properly administered health care program keeps costs down through a good triage system, which has a lower level of qualified staff see the complaining inmate first, with referral to higher levels of staff only as medically indicated.
- Charging health service fees as a management tool does not recoup costs; rather, when looking at the increased administrative work involved or the long-term effect of the program, charging health service fees can cost more to implement than what is recovered.
- Inmates frequently have low health literacy and may not understand the concept of being seen regardless of their ability to pay. Their perspective is such that fee-for-service is a disincentive to seek care.

PPG recognizes that lack of access to health care remains among the most significant characteristics of prison, jail, and juvenile correctional systems in the United States. Because of their disproportionate poverty and incidence of drug use, inmates have higher morbidity and mortality from treatable serious medical problems. Therefore, PPG is opposed to the establishment of a co-payment program that restricts patient access to care.