



Health Care Services in the Texas Department of Criminal Justice *Expand Access to Medical Care Through Less Expensive Co-Pay Fees*

THE PROBLEM: HIGH CO-PAY FEES DISCOURAGE PEOPLE FROM SEEKING NECESSARY MEDICAL TREATMENT

Prior to 2011, people incarcerated in the Texas Department of Criminal Justice (TDCJ) were required to pay a \$3 co-pay for certain visits to medical services.¹ In 2011, the Legislature replaced this fee with an annual **\$100 medical services fee that is triggered upon an individual's first qualifying visit.**² While TDCJ does not refuse care to individuals who are indigent, the \$100 fee is billed to the incarcerated person and deducted from half of any commissary money that he or she receives.³ High co-pay fees can discourage people from seeking medical treatment, in turn resulting in the spread of dangerous illnesses or leading to worsening medical conditions – which then become even more costly to treat.

AN EXAMPLE: THE IMPACT OF HIGH FEES ON INCARCERATED INDIVIDUALS AND THEIR LOVED ONES

Jane, a 72-year-old woman living on social security benefits, has a daughter, Sarah, who is incarcerated. Every month, Jane puts \$20 in Sarah's commissary account so she can purchase basic hygiene items and food. Sarah has asked her mother not to send her money, knowing she does not have much to spare, but Jane insists and sends the money every month. One day, Sarah gets sick and goes to see the doctor, triggering the \$100 fee. Now, each month when Jane sends \$20 to her daughter, \$10 goes toward the medical services fee until it is paid. **It will take Sarah's mother 10 months to pay off the \$100 fee.**

KEY FINDINGS

- Legislators made the fee change from \$3 to \$100 to generate more healthcare revenue from incarcerated people (and their loved ones). However, it has **failed to produce the anticipated financial results**. Instead of generating an estimated \$5-\$6 million per year, it has generated only around \$1.5 to \$2 million – barely more revenue than was generated by the original \$3 per visit co-pay.⁴
- **The \$100 fee dissuades people from seeking medical care.** This can lead to additional use of emergency care because preventable or manageable issues were not treated promptly and escalated. It can also lead to more overall visits to medical because infectious conditions have gone untreated and resulted in an outbreak.

COST-SAVING AND PUBLIC SAFETY-DRIVEN SOLUTION: SUPPORT HB 812 BY CHAIRMAN WHITE

People who are incarcerated – and largely unable to earn any income – should not be discouraged from seeking needed medical care because of an overly burdensome fee. **HB 812 addresses this by reverting back to the more manageable \$3 per visit co-pay fee.**

This change will **allow individuals to remain healthy and able to focus on their rehabilitation.**

This change will also generate close to the same amount of revenue for the State while **saving money in the broader sense** by avoiding more urgent care and by preventing infection.

Citations

¹ Maurice Chammah, "Some Inmates Forego Health Care to Avoid Fees," *Texas Tribune*, October 16, 2012, <https://www.texastribune.org/2012/10/16/tdcj-inmates-paying-100-fee-health-care/>.

² Section 501.063, Texas Government Code.

³ Max Rivlin-Nadler, "How Medical Copays Haunt Prisoners and Their Loved Ones," *Vice*, January 17, 2017, https://www.vice.com/en_us/article/kbba8n/how-medical-copays-haunt-prisoners-and-their-loved-ones.

⁴ Chammah, *Some Inmates Forego Health Care to Avoid Fees*.