CERTIFICATION OF ENROLLMENT

ENGROSSED SUBSTITUTE SENATE BILL 6063

Chapter 58, Laws of 2020

66th Legislature 2020 Regular Session

DEPARTMENT OF CORRECTIONS--HEALTH CARE ADMINISTRATION

EFFECTIVE DATE: June 11, 2020

Passed by the Senate February 17, 2020 CERTIFICATE Yeas 48 Nays 0 I, Brad Hendrickson, Secretary of the Senate of the State of CYRUS HABIB Washington, do hereby certify that President of the Senate the attached is **ENGROSSED** SUBSTITUTE SENATE BILL 6063 as passed by the Senate and the House of Representatives on the dates Passed by the House March 3, 2020 hereon set forth. Yeas 96 Nays 0 BRAD HENDRICKSON LAURIE JINKINS Secretary Speaker of the House of Representatives Approved March 18, 2020 11:01 AM FILED March 18, 2020

Secretary of State

JAY INSLEE State of Washington

Governor of the State of Washington

ENGROSSED SUBSTITUTE SENATE BILL 6063

Passed Legislature - 2020 Regular Session

State of Washington 66th Legislature 2020 Regular Session

By Senate Human Services, Reentry & Rehabilitation (originally sponsored by Senators Wagoner, Kuderer, and Padden)

READ FIRST TIME 02/03/20.

- 1 AN ACT Relating to improving department of corrections health
- 2 care administration; amending RCW 72.10.020; and adding a new section
- 3 to chapter 72.10 RCW.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 <u>NEW SECTION.</u> **Sec. 1.** A new section is added to chapter 72.10 6 RCW to read as follows:
- 7 (1) The department shall establish minimum job qualifications for 8 the position of prison medical director in accordance with best
- 9 practices.
- 10 (2) A candidate for prison medical director must meet the 11 established minimum qualifications to be considered for the position.
- 12 (3) The established minimum qualifications shall be reviewed by 13 the department every five years or more frequently as the department
- 14 deems necessary.
- 15 (4) By December 1, 2020, and in compliance with RCW 43.01.036,
- 16 the department shall report to the appropriate committees of the
- 17 legislature the minimum job qualifications established and the status
- 18 of implementing the minimum job qualifications throughout the
- 19 department's correctional facilities.

Sec. 2. RCW 72.10.020 and 2016 c 197 s 8 are each amended to read as follows:

- (1) Upon entry into the correctional system, offenders shall receive an initial medical examination. The department shall prepare a health profile for each offender that includes at least the following information: (a) An identification of the offender's serious medical and dental needs; (b) an evaluation of the offender's capacity for work and recreation; and (c) a financial assessment of the offender's ability to pay for all or a portion of his or her health care services from personal resources or private insurance.
- (2) (a) The department may develop and implement a plan for the delivery of health care services and personal hygiene items to offenders in the department's correctional facilities, at the discretion of the secretary, and in conformity with federal law.
- (b) To discourage unwarranted use of health care services caused by unnecessary visits to health care providers, offenders shall participate in the costs of their health care services by paying an amount that is commensurate with their resources as determined by the department, or a nominal amount of no less than four dollars per visit, as determined by the secretary. Under the authority granted in RCW 72.01.050(2), the secretary may authorize the superintendent to collect this amount directly from an offender's institution account. All copayments collected from offenders' institution accounts shall be a reduction in the expenditures for offender health care at the department.
- (c) Offenders are required to make copayments for initial health care visits that are offender initiated and, by rule adopted by the department, may be charged a copayment for subsequent visits related to the medical condition which caused the initial visit.
- 30 (d) No offender may be refused any health care service because of 31 indigence.
 - (e) At no time shall the withdrawal of funds for the payment of a medical service copayment result in reducing an offender's institution account to an amount less than the level of indigency as defined in chapter 72.09 RCW.
 - (3) (a) The secretary shall adopt, by rule, a uniform policy relating to the distribution and replenishment of personal hygiene items for inmates incarcerated in all department institutions. The policy shall provide for the initial distribution of adequate

1 personal hygiene items to inmates upon their arrival at an 2 institution.

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- (b) The acquisition of replenishment personal hygiene items is the responsibility of inmates, except that indigent inmates shall not be denied adequate personal hygiene items based on their inability to pay for them.
- (c) The policy shall provide that the replenishment personal hygiene items be distributed to inmates only in authorized quantities and at intervals that reflect prudent use and customary wear and consumption of the items.
- (4) To the extent that federal law allows and federal financial participation is available, for the limited purpose of implementing this section, the department, or the department's designee, is authorized to act on behalf of an inmate for purposes of applying for medicaid eligibility.
 - (5) The following become a debt and are subject to RCW 72.09.450:
- 17 (a) All copayments under subsection (2) of this section that are 18 not collected when the visit occurs; and
 - (b) All charges for replenishment personal hygiene items that are not collected when the item is distributed.
 - (6) The department, in accordance with medically accepted best practices and in consultation with the health care authority, shall develop and implement uniform standards across all of the department's correctional facilities for determining when a patient's current health status requires a referral for consultation or treatment outside the department. These standards must be based on the health care community standard of care to ensure medical referrals for consultation or treatment are timely and promote optimal patient outcomes.

Passed by the Senate February 17, 2020. Passed by the House March 3, 2020. Approved by the Governor March 18, 2020. Filed in Office of Secretary of State March 18, 2020.

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