

DRC General Medical Services

Correctional Institution Inspection Committee

May 8, 2013

DRC Medical Services

- A complete medical, dental, and mental health screening is performed on each inmate at the DRC's reception centers.
- Inmates are instructed concerning access to medical care, the grievance process, and mental health services.
- Following assessment at reception, each inmate is assigned a medical classification, which is taken into consideration in the assignment of a parent institution.
- A health screening is also conducted for each inmate within eight hours of arrival at the parent institution.
- Inmates are able to place requests for health services for Nurse Sick Call on a daily basis.
- A priority system is used to schedule clinical services, which are available to inmates at least five days a week.
- Inmates in segregation receive at least a daily visit from a nurse.
- The physician develops individualized treatment plans for all inmates diagnosed with chronic care illnesses, which involve regular follow-up appointments.
- Inmates have access to specialty services, including optometry, podiatry, dental, and OB-GYN services.
- Informed consent by the inmate is required prior to surgery or other invasive treatments, unless the inmate is determined to lack mental capacity to give informed consent, in which case the next of kin or person with power of attorney is contacted.

Medical Cost Controls

- All medical services initiated by inmate request carry a \$2.00 copay charge, unless the inmate is determined to be indigent (receiving less than \$12 per month).
- All recommendations for outside medical services, including specialty consults and surgery, must be pre-approved through the healthcare utilization review program facilitated by the DRC State Medical Director.
- In partnership with ODMH, the DRC converted to a mail-order drug delivery system and maintains strict formulary control for pharmaceuticals.
- In partnership with OSU, the DRC pays Medicaid rates for in-patient stays and reduced costs for medical supplies.

Key Statistics

Total DRC medical spending peaked in FY 2010, **decreasing by 15.5%** in FY 2012.

In FY 2012, the DRC spent **\$67.7 million** for state medical services payroll; \$32 million was spent on contractors and temporary workers, including \$11.8 million for dental staffing and services.

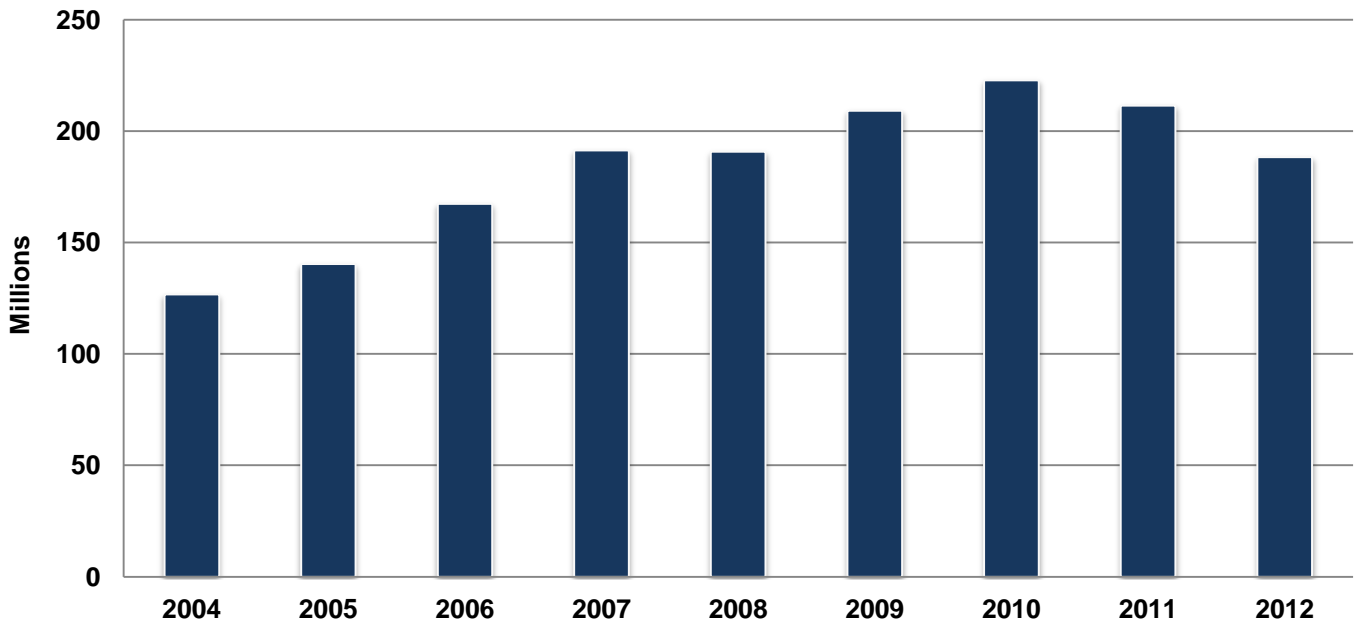
The number of inmates per health care worker has steadily decreased, from **65 in CY 2006 to 48 in CY 2012**.

In CY 2012, there were **133,923 Nurse Sick Calls** and **115,505 Doctor Sick Calls** across the DRC, a 25.5% and 29.6% decrease from 2009.

Female institutions reported the greatest number of nurse sick calls in comparison to population (NEPRC), as well as the greatest increase in comparison to 2009 (DCI).

Total DRC Medical Services Spending

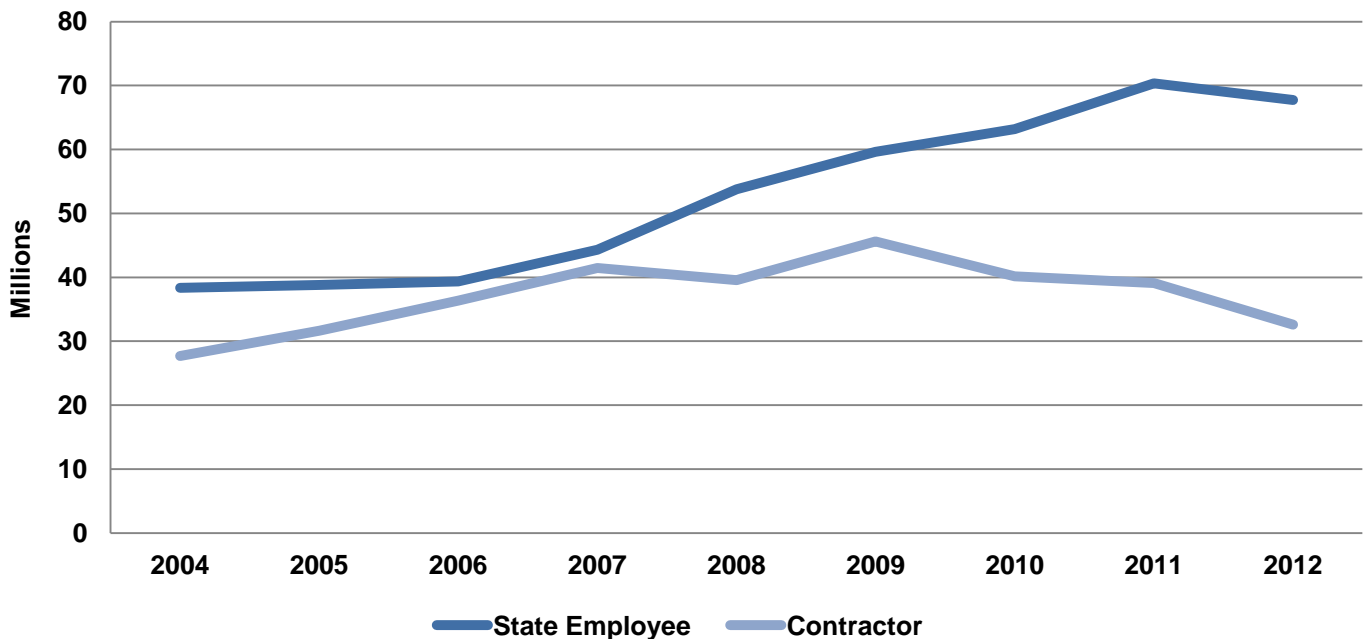
FY 2004 – 2012



*Data provided by the Ohio Department of Rehabilitation and Correction.

Civil Service and Contractor Payroll Spending

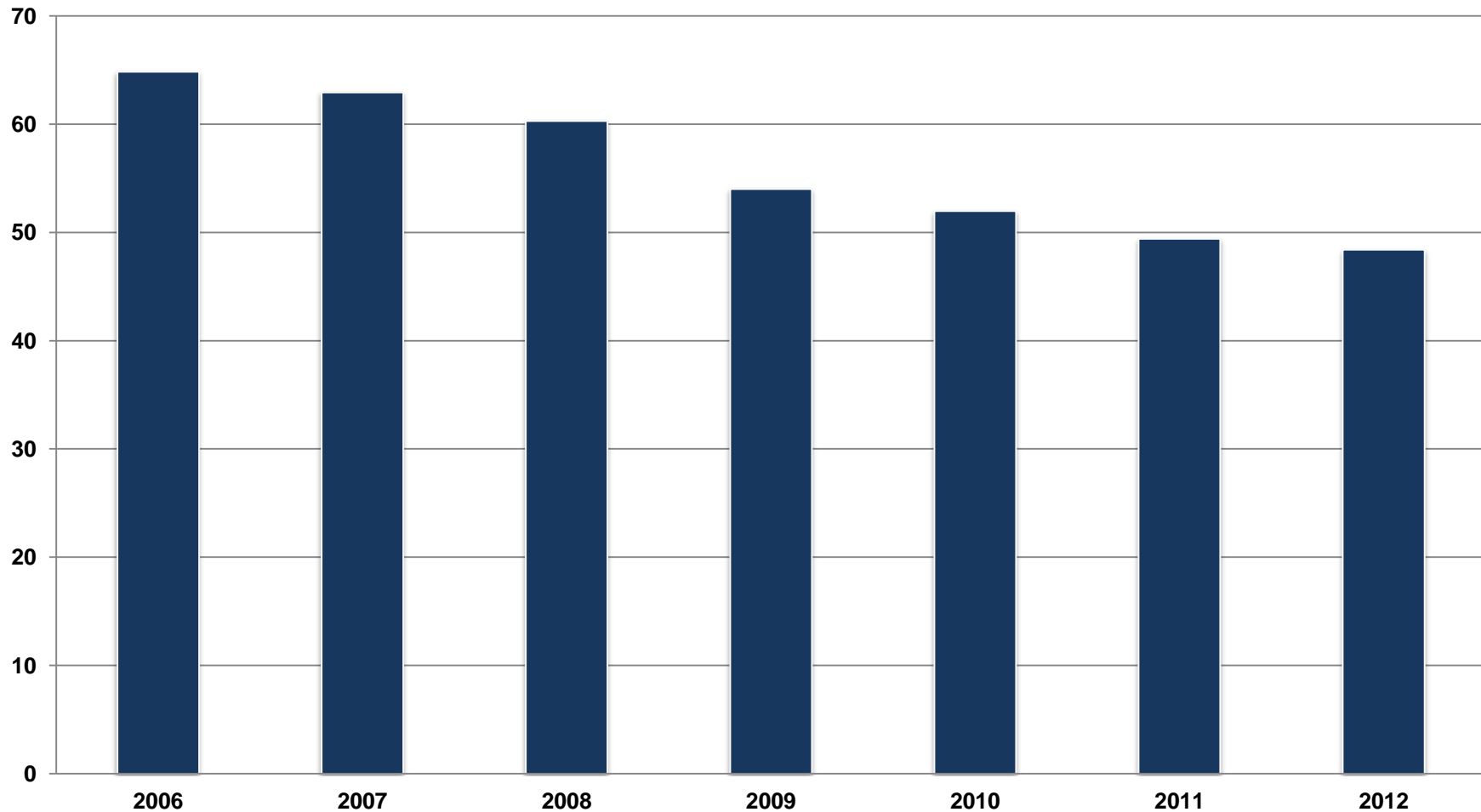
FY 2004 – 2012



**Data provided by the Ohio Department of Rehabilitation and Correction. Data includes payroll costs for medical staff in every DRC institution, as well as at the DRC Operation Support Center, including administrative staff.

Number of Inmates per Health Care Worker

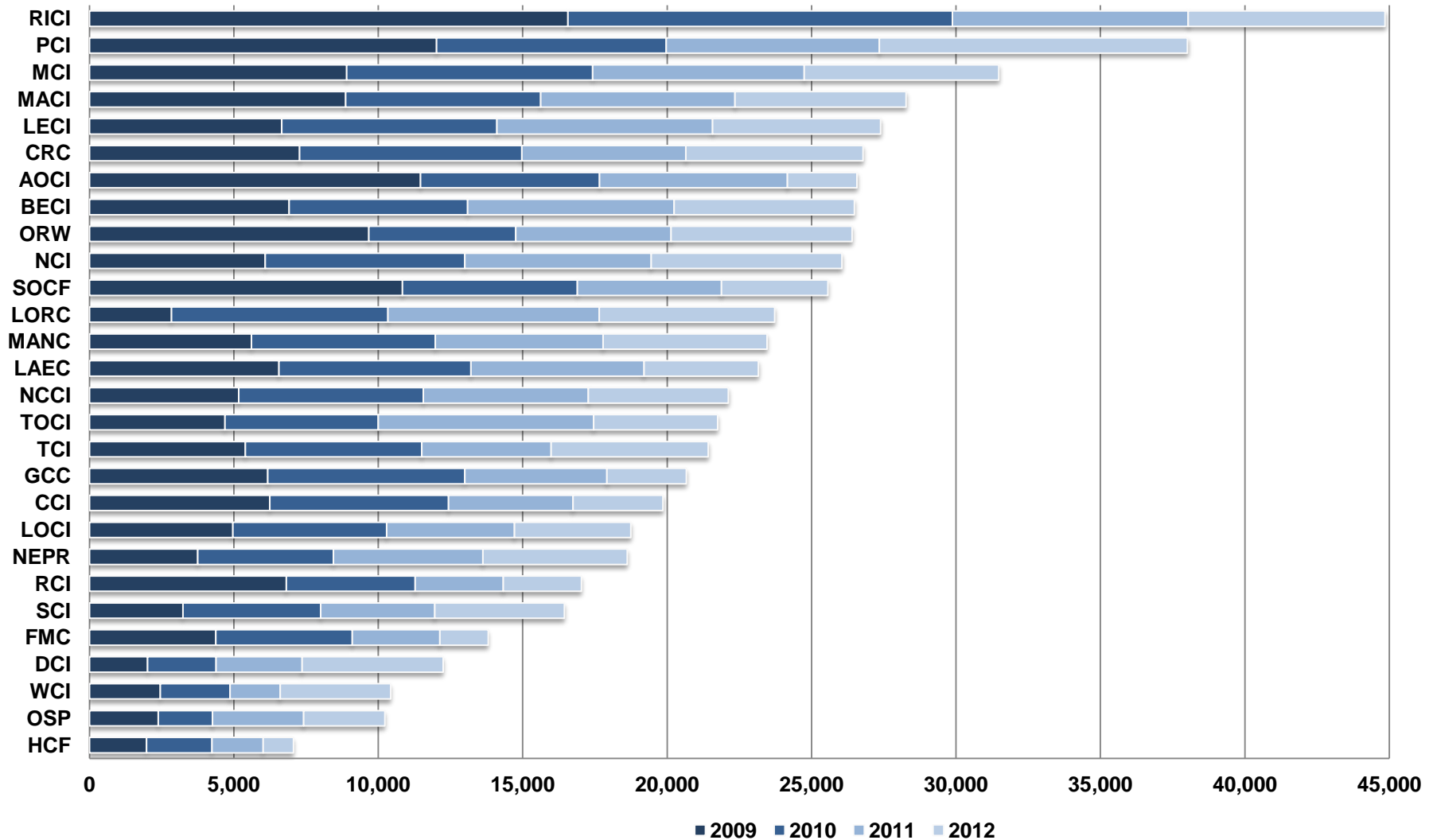
CY 2006 – 2012



*Data provided by the Ohio Department of Rehabilitation and Correction. Rates were calculated based on the total number of healthcare workers reported by the DRC compared to the total inmate population as reported on DRC's annual institutional census reports.

** "Health Care Worker" includes physicians and other advanced level providers, registered nurses, licensed practical nurses, and health information technicians. Chart does not include dental service providers.

Total Number of Nurse Sick Calls CY 2009 – 2012

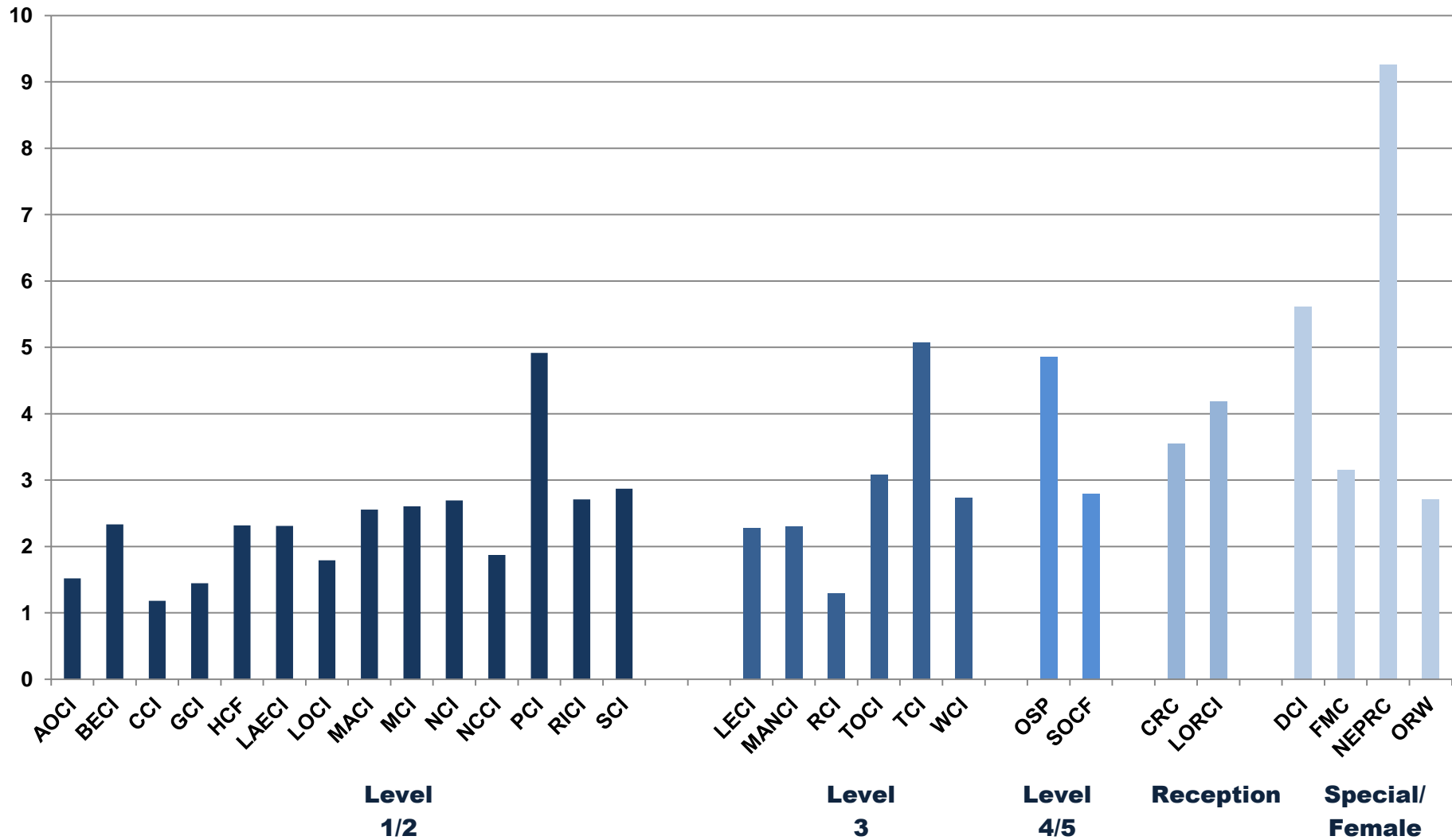


*Data provided by the Ohio Department of Rehabilitation and Correction.

**Note that AOCI includes both the former Allen Oakwood Correctional Institution and Oakwood Correctional Facility; GCC includes the former Grafton Correctional Institution and North Coast Correctional Treatment Facility. FMC includes the former Corrections Medical Center and Franklin Pre-Release Center. DCI includes the former Montgomery Education Pre-Release Center.

Nurse Sick Calls per Inmate

CY 2012

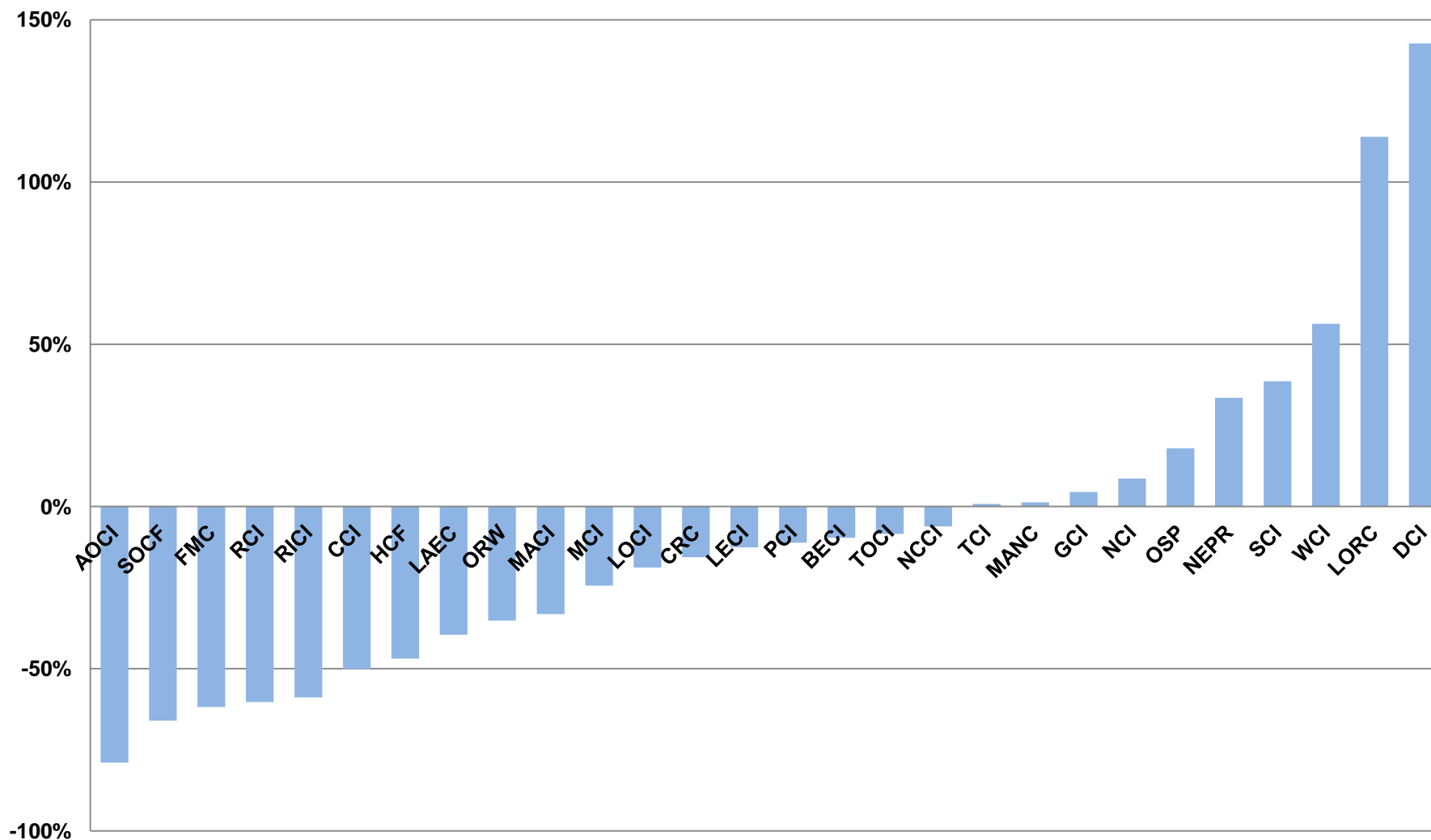


*Data provided by the Ohio Department of Rehabilitation and Correction. Data was calculated using the total number of Nurse Sick Calls reported at each institution in 2012 in comparison to the average monthly population for each institution in 2012 (using the last weekly population count for each month).

**Note that the above numbers are rates only; some inmates attend Nurse Sick Call frequently, while others may not access medical services at all during their incarceration, depending on need.

Change in Nurse Sick Calls

CY 2009 – 2012

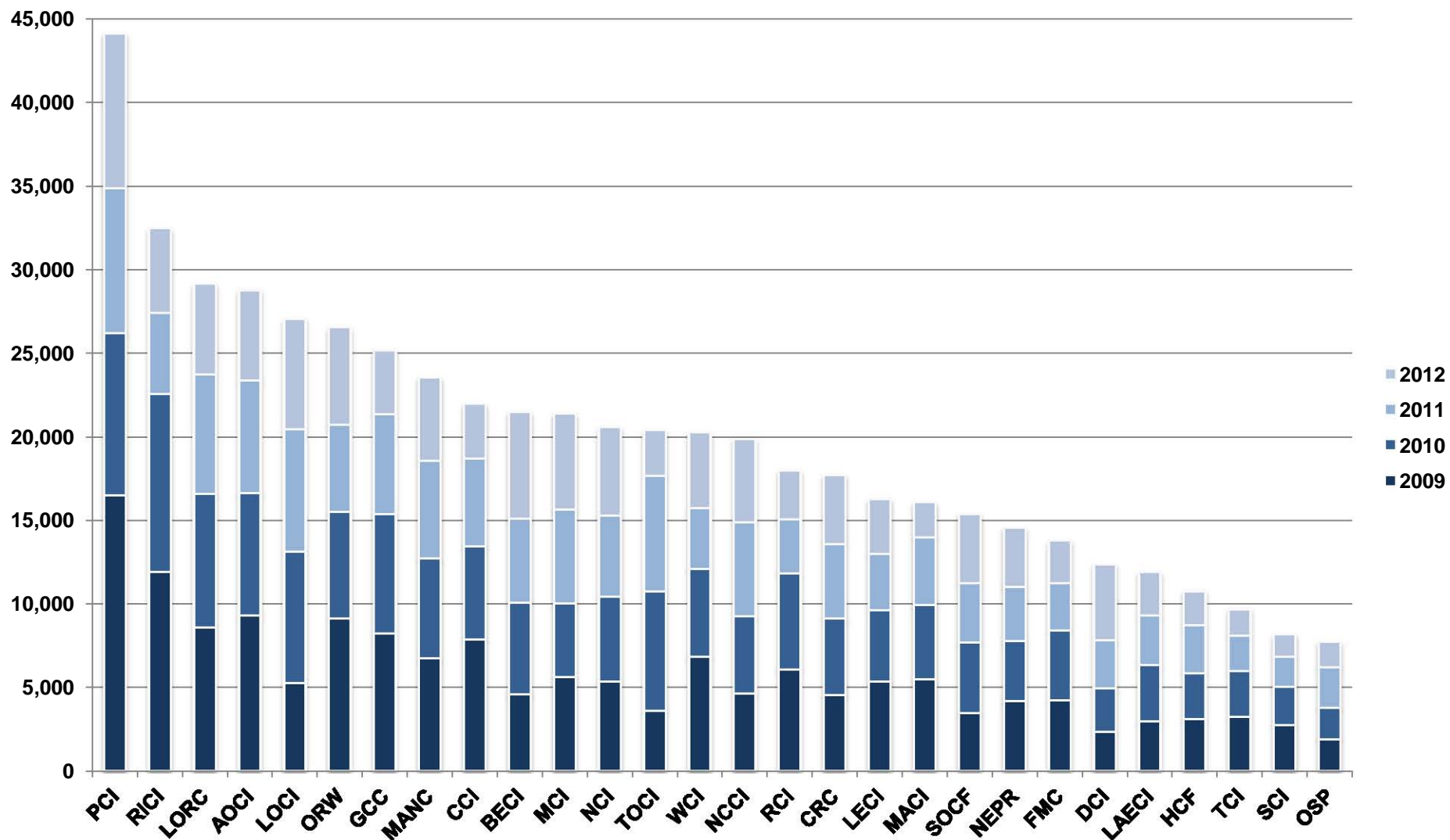


*Data provided by the Ohio Department of Rehabilitation and Correction. Data was calculated comparing the total number of nurse sick calls in CY 2009 and 2012.

**Note that DCI transitioned from a male to a female facility in 2011; female inmates typically utilize health services more frequently than males do. GCI's data in CY 2012 includes the inmates housed in the facility formerly privately operated as NCCTF. AOCI's data includes the former OCF, previously the state's correctional mental health hospital, which transitioned to housing the state's Protective Control unit and minimum security inmates.

Total Number of Doctor Sick Calls

CY 2009 – 2012



*Data provided by the Ohio Department of Rehabilitation and Correction.

**Note that AOCI includes both the former Allen Oakwood Correctional Institution and Oakwood Correctional Facility; GCC includes the former Grafton Correctional Institution and North Coast Correctional Treatment Facility. FMC includes the former Corrections Medical Center and Franklin Pre-Release Center. DCI includes the former Montgomery Education Pre-Release Center.

DRC Nurse and Doctor Sick Call CY 2009 - 2012

Institution	NSC 2009	DSC 2009	NSC 2010	DSC 2010	NSC 2011	DSC 2011	NSC 2012	DSC 2012	TOTAL
AOCI	11,459	9,304	6,201	7,322	6,500	6,744	2,412	5,412	55,354
BECI	6,911	4,587	6,178	5,468	7,149	5,051	6,244	6,385	47,973
CCI	6,240	7,878	6,189	5,563	4,308	5,282	3,117	3,250	41,827
CRC	7,272	4,556	7,694	4,582	5,677	4,462	6,137	4,106	44,486
DCI	2,010	2,356	2,374	2,618	2,982	2,856	4,878	4,540	24,614
FMC	4,378	4,257	4,719	4,161	3,034	2,839	1,671	2,554	27,613
GCC	6,169	8,240	6,824	7,152	4,924	5,975	2,745	3,804	45,833
HCF	1,975	3,103	2,270	2,763	1,771	2,883	1,049	2,015	17,829
LAECI	6,560	2,975	6,645	3,393	5,991	2,937	3,966	2,600	35,067
LECI	6,661	5,351	7,441	4,296	7,471	3,337	5,819	3,304	43,680
LOCI	4,964	5,289	5,324	7,832	4,424	7,338	4,031	6,618	45,820
LORCI	2,839	8,577	7,498	8,014	7,310	7,159	6,074	5,418	52,889
MACI	8,867	5,472	6,758	4,458	6,725	4,077	5,924	2,071	44,352
MANCI	5,604	6,733	6,367	5,978	5,812	5,865	5,673	4,962	46,994
MCI	8,907	5,640	8,517	4,382	7,323	5,645	6,734	5,730	52,878
NCCI	5,167	4,647	6,395	4,633	5,709	5,607	4,850	5,006	42,014
NCI	6,083	5,371	6,908	5,078	6,452	4,841	6,604	5,284	46,621
NEPRC	3,748	4,183	4,695	3,603	5,177	3,232	5,002	3,535	33,175
ORW	9,672	9,129	5,089	6,364	5,371	5,222	6,267	5,833	52,947
OSP	2,382	1,903	1,874	1,892	3,163	2,426	2,810	1,499	17,949
PCI	12,015	16,486	7,954	9,738	7,373	8,646	10,673	9,279	82,164
RCI	6,812	6,078	4,464	5,758	3,046	3,238	2,707	2,898	35,001
RICI	16,562	11,925	13,314	10,626	8,157	4,881	6,815	5,048	77,328
SCI	3,235	2,768	4,768	2,268	3,954	1,794	4,483	1,347	24,617
SOCF	10,839	3,486	6,054	4,225	4,989	3,520	3,683	4,149	40,945
TCI	5,397	3,231	6,109	2,760	4,479	2,096	5,440	1,606	31,118
TOCI	4,688	3,592	5,313	7,145	7,454	6,933	4,290	2,738	42,153
WCI	2,448	6,861	2,416	5,249	1,739	3,644	3,825	4,514	30,696
Totals	179,864	163,978	166,352	147,321	148,464	128,530	133,923	115,505	1,183,937

Correctional Institution Inspection Committee

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