

Public Law 106-294
106th Congress

An Act

Oct. 12, 2000
[S. 704]

To amend title 18, United States Code, to combat the overutilization of prison health care services and control rising prisoner health care costs.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

Federal Prisoner Health Care Copayment Act of 2000.
18 USC 4001 note.

SECTION 1. SHORT TITLE.

This Act may be cited as the "Federal Prisoner Health Care Copayment Act of 2000".

SEC. 2. HEALTH CARE FEES FOR PRISONERS IN FEDERAL INSTITUTIONS.

(a) **IN GENERAL.**—Chapter 303 of title 18, United States Code, is amended by adding at the end the following:

"§ 4048. Fees for health care services for prisoners

"(a) **DEFINITIONS.**—In this section—

"(1) the term 'account' means the trust fund account (or institutional equivalent) of a prisoner;

"(2) the term 'Director' means the Director of the Bureau of Prisons;

"(3) the term 'health care provider' means any person who is—

"(A) authorized by the Director to provide health care services; and

"(B) operating within the scope of such authorization;

"(4) the term 'health care visit'—

"(A) means a visit, as determined by the Director, by a prisoner to an institutional or noninstitutional health care provider; and

"(B) does not include a visit initiated by a prisoner—

"(i) pursuant to a staff referral; or

"(ii) to obtain staff-approved follow-up treatment for a chronic condition; and

"(5) the term 'prisoner' means—

"(A) any individual who is incarcerated in an institution under the jurisdiction of the Bureau of Prisons; or

"(B) any other individual, as designated by the Director, who has been charged with or convicted of an offense against the United States.

"(b) **FEES FOR HEALTH CARE SERVICES.**—

"(1) **IN GENERAL.**—The Director, in accordance with this section and with such regulations as the Director shall promulgate to carry out this section, may assess and collect a fee

Regulations.

for health care services provided in connection with each health care visit requested by a prisoner.

“(2) EXCLUSION.—The Director may not assess or collect a fee under this section for preventative health care services, emergency services, prenatal care, diagnosis or treatment of chronic infectious diseases, mental health care, or substance abuse treatment, as determined by the Director.

“(c) PERSONS SUBJECT TO FEE.—Each fee assessed under this section shall be collected by the Director from the account of—

“(1) the prisoner receiving health care services in connection with a health care visit described in subsection (b)(1); or

“(2) in the case of health care services provided in connection with a health care visit described in subsection (b)(1) that results from an injury inflicted on a prisoner by another prisoner, the prisoner who inflicted the injury, as determined by the Director.

“(d) AMOUNT OF FEE.—Any fee assessed and collected under this section shall be in an amount of not less than \$1.

“(e) NO CONSENT REQUIRED.—Notwithstanding any other provision of law, the consent of a prisoner shall not be required for the collection of a fee from the account of the prisoner under this section. However, each such prisoner shall be given a reasonable opportunity to dispute the amount of the fee or whether the prisoner qualifies under an exclusion under this section.

“(f) NO REFUSAL OF TREATMENT FOR FINANCIAL REASONS.—Nothing in this section may be construed to permit any refusal of treatment to a prisoner on the basis that—

“(1) the account of the prisoner is insolvent; or

“(2) the prisoner is otherwise unable to pay a fee assessed under this section.

“(g) USE OF AMOUNTS.—

“(1) RESTITUTION OF SPECIFIC VICTIMS.—Amounts collected by the Director under this section from a prisoner subject to an order of restitution issued pursuant to section 3663 or 3663A shall be paid to victims in accordance with the order of restitution.

“(2) ALLOCATION OF OTHER AMOUNTS.—Of amounts collected by the Director under this section from prisoners not subject to an order of restitution issued pursuant to section 3663 or 3663A—

“(A) 75 percent shall be deposited in the Crime Victims Fund established under section 1402 of the Victims of Crime Act of 1984 (42 U.S.C. 10601); and

“(B) 25 percent shall be available to the Attorney General for administrative expenses incurred in carrying out this section.

“(h) NOTICE TO PRISONERS OF LAW.—Each person who is or becomes a prisoner shall be provided with written and oral notices of the provisions of this section and the applicability of this section to the prisoner. Notwithstanding any other provision of this section, a fee under this section may not be assessed against, or collected from, such person—

“(1) until the expiration of the 30-day period beginning on the date on which each prisoner in the prison system is provided with such notices; and

Expiration date.

“(2) for services provided before the expiration of such period.

Effective date.

“(i) NOTICE TO PRISONERS OF REGULATIONS.—The regulations promulgated by the Director under subsection (b)(1), and any amendments to those regulations, shall not take effect until the expiration of the 30-day period beginning on the date on which each prisoner in the prison system is provided with written and oral notices of the provisions of those regulations (or amendments, as the case may be). A fee under this section may not be assessed against, or collected from, a prisoner pursuant to such regulations (or amendments, as the case may be) for services provided before the expiration of such period.

“(j) NOTICE BEFORE PUBLIC COMMENT PERIOD.—Before the beginning of any period a proposed regulation under this section is open to public comment, the Director shall provide written and oral notice of the provisions of that proposed regulation to groups that advocate on behalf of Federal prisoners and to each prisoner subject to such proposed regulation.

Deadline.

“(k) REPORTS TO CONGRESS.—Not later than 1 year after the date of the enactment of the Federal Prisoner Health Care Copayment Act of 2000, and annually thereafter, the Director shall transmit to Congress a report, which shall include—

“(1) a description of the amounts collected under this section during the preceding 12-month period;

“(2) an analysis of the effects of the implementation of this section, if any, on the nature and extent of health care visits by prisoners;

“(3) an itemization of the cost of implementing and administering the program;

“(4) a description of current inmate health status indicators as compared to the year prior to enactment; and

“(5) a description of the quality of health care services provided to inmates during the preceding 12-month period, as compared with the quality of those services provided during the 12-month period ending on the date of the enactment of such Act.

“(1) COMPREHENSIVE HIV/AIDS SERVICES REQUIRED.—The Bureau of Prisons shall provide comprehensive coverage for services relating to human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS) to each Federal prisoner in the custody of the Bureau of Prisons when medically appropriate. The Bureau of Prisons may not assess or collect a fee under this section for providing such coverage.”

(b) CLERICAL AMENDMENT.—The analysis for chapter 303 of title 18, United States Code, is amended by adding at the end the following:

“4048. Fees for health care services for prisoners.”

SEC. 3. HEALTH CARE FEES FOR FEDERAL PRISONERS IN NON-FEDERAL INSTITUTIONS.

Section 4013 of title 18, United States Code, is amended by adding at the end the following:

“(c) HEALTH CARE FEES FOR FEDERAL PRISONERS IN NON-FEDERAL INSTITUTIONS.—

“(1) IN GENERAL.—Notwithstanding amounts paid under subsection (a)(3), a State or local government may assess and

collect a reasonable fee from the trust fund account (or institutional equivalent) of a Federal prisoner for health care services, if—

“(A) the prisoner is confined in a non-Federal institution pursuant to an agreement between the Federal Government and the State or local government;

“(B) the fee—

“(i) is authorized under State law; and

“(ii) does not exceed the amount collected from State or local prisoners for the same services; and

“(C) the services—

“(i) are provided within or outside of the institution by a person who is licensed or certified under State law to provide health care services and who is operating within the scope of such license;

“(ii) constitute a health care visit within the meaning of section 4048(a)(4) of this title; and

“(iii) are not preventative health care services, emergency services, prenatal care, diagnosis or treatment of chronic infectious diseases, mental health care, or substance abuse treatment.

“(2) NO REFUSAL OF TREATMENT FOR FINANCIAL REASONS.—Nothing in this subsection may be construed to permit any refusal of treatment to a prisoner on the basis that—

“(A) the account of the prisoner is insolvent; or

“(B) the prisoner is otherwise unable to pay a fee assessed under this subsection.

“(3) NOTICE TO PRISONERS OF LAW.—Each person who is or becomes a prisoner shall be provided with written and oral notices of the provisions of this subsection and the applicability of this subsection to the prisoner. Notwithstanding any other provision of this subsection, a fee under this section may not be assessed against, or collected from, such person—

“(A) until the expiration of the 30-day period beginning on the date on which each prisoner in the prison system is provided with such notices; and

“(B) for services provided before the expiration of such period.

“(4) NOTICE TO PRISONERS OF STATE OR LOCAL IMPLEMENTATION.—The implementation of this subsection by the State or local government, and any amendment to that implementation, shall not take effect until the expiration of the 30-day period beginning on the date on which each prisoner in the prison system is provided with written and oral notices of the provisions of that implementation (or amendment, as the case may be). A fee under this subsection may not be assessed against, or collected from, a prisoner pursuant to such implementation (or amendments, as the case may be) for services provided before the expiration of such period.

“(5) NOTICE BEFORE PUBLIC COMMENT PERIOD.—Before the beginning of any period a proposed implementation under this subsection is open to public comment, written and oral notice of the provisions of that proposed implementation shall be provided to groups that advocate on behalf of Federal prisoners and to each prisoner subject to such proposed implementation.

“(6) COMPREHENSIVE HIV/AIDS SERVICES REQUIRED.—Any State or local government assessing or collecting a fee under

Effective date.

this subsection shall provide comprehensive coverage for services relating to human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS) to each Federal prisoner in the custody of such State or local government when medically appropriate. The State or local government may not assess or collect a fee under this subsection for providing such coverage.”.

Approved October 12, 2000.

LEGISLATIVE HISTORY—S. 704 (H.R. 1349):

HOUSE REPORTS: No. 106-851 accompanying H.R. 1349 (Comm. on the Judiciary).

CONGRESSIONAL RECORD:

Vol. 145 (1999): May 27, considered and passed Senate.

Vol. 146 (2000): Sept. 19, considered and passed House, amended, in lieu of H.R. 1349.

Sept. 28, Senate concurred in House amendment.