



North Carolina Department of Public Safety

Adult Correction and Juvenile Justice

Pat McCrory, Governor
Frank L. Perry, Secretary

W. David Guice, Commissioner

MEMORANDUM

TO: Chairs of the Joint Legislative Oversight Committee on Justice and Public Safety
Chairs of Senate Appropriations Committee on Justice and Public Safety
Chairs of House Appropriations Subcommittee on Justice and Public Safety

FROM: Frank L. Perry, Secretary
W. David Guice, Commissioner

RE: Inmate Medical Cost Containment

DATE: August 1, 2016

Pursuant to S.L. 2013-360, Section 16C.4.(c) The Department of Public Safety shall report to the Joint Legislative Oversight Committee on Justice and Public Safety and the Chairs of the House of Representative Appropriations Subcommittee on Justice and Public Safety and the Senate Appropriations Committee on Justice and Public Safety no later than November 1, 2013, and quarterly thereafter on:

- 1. The percentage of the total inmates requiring hospitalization or hospital services who receive that treatment at each hospital.*
- 2. The volume of services provided by community medical providers that can be scheduled in advance and, of that volume, the percentage of those services that are provided by contracted providers.*
- 3. The volume of services provided by community medical providers that cannot be scheduled in advance and, of that volume, the percentage of those services that are provided by contracted providers.*
- 4. The volume of services provided by community medical providers that are emergent cases requiring hospital admissions and emergent cases not requiring hospital admissions.*
- 5. The volume of inpatient medical services provided to Medicaid-eligible inmates, the cost of treatment, and the estimated savings of paying the nonfederal portion of Medicaid for the services.*
- 6. The status of the Division's efforts to contract with hospitals to provide secure wards in each of the State's five prison regions.*

MAILING ADDRESS:
4201 Mail Service Center
Raleigh NC 27699-4201

www.ncdps.gov



An Equal Opportunity employer

OFFICE LOCATION:
512 N. Salisbury St.
Raleigh, NC 27604
Telephone: (919) 733-2126
Fax: (919) 715-8477

Adult Correction:

2015 - 2016 4th Quarter Health Services Legislative Report

To ensure that correct information relative to Section 16C.4(c) is reported, the Department clarified with the Fiscal Research Division that the volumes of services referenced are for hospitalization and hospital services data.

This report is for hospitalizations or hospital services of inmates which occurred from April 1, 2016 – June 30, 2016.

The average prison census for this quarter was 36,947. Based upon utilization review data, an average of 0.0084 % of the population received hospital based services (i.e. they were an inpatient or they went to a community hospital for an outpatient procedure or consultation).

During this time period, there were 447 hospital admissions. Of these 447 admissions 92% (410) were emergent and 8% (37) were scheduled. Further analysis of the 410 emergent admissions, reveals that 63% (258) occurred at contracted hospitals, while 37% (152) were to non-contracted hospitals. With regards to the 37 scheduled admissions, 100% (37) were to contracted hospitals while 0% (0) were to non-contracted facilities. Overall, during this quarter, 66% (295) of admissions (both emergent and scheduled) went to contracted facilities while the remaining 34% (152) went to non-contracted facilities.

Figure 1 below shows the distribution of emergent and scheduled hospital admissions in contracted and non-contracted facilities from April 1, 2016 through June 30, 2016. Note: Figure 1 is based on data currently available which may be updated after the date of this report.

June 30, 2016

HOSPITAL ADMISSIONS	Emergent	Scheduled	Total	Percentage
CONTRACT HOSPITALS	258	37	295	66
NON-CONTRACT HOSPITALS	152	00	152	34
Grand Total	410	37	447	100%

It is important to note that during this quarter, the total volume of cases sent out to the community for emergent care was 2180. This represents 145 more cases than last quarter. Data also indicates that 81% (1771) of these emergency room visits did not result in an admission; only 19% (409) of all emergency room visits resulted in an admission to a community hospital.

From April 1, 2016 – June 30, 2016, 169 cases were identified as eligible for Medicaid. Based upon the *State Auditor's May 2012 Financial Related Audit Report*, the average savings of each case would be \$18,181.81. Using the methods applied in the audit, the estimated savings from April 1, 2016 through June 30, 2016 would be approximately \$ 3,072,725.89.

Statistics from the outpatient specialty clinics held at Central Prison Healthcare Complex (CPHC) reveal that 3,067 patients were evaluated during this quarter. Specialty clinics conducted at CPHC include cardiology, podiatry, orthopedics, general surgery, hepatology, infectious disease, ENT, gastroenterology, audiology, nephrology, ophthalmology, optometry, dermatology, and urology. Statistics from NCCIW reveal that 686 specialty encounters occurred during the same timeframe.

Further statistics from the surgical center at CPHC reveal that 289 outpatient surgical procedures were performed during this quarter. These procedures include ENT, general surgery, gastroenterology, orthopedics, and podiatry. In addition, 118 MRI studies were performed in the mobile MRI facility at CPHC.

Juvenile Justice:

2015 - 2016 4th Quarter Health Services Legislative Report

To ensure that relevant information pursuant to Section 16C.4(c) is reported, the Juvenile Justice data for the period of April 1, 2016 through June 30, 2016 is presented below for each of the two types of secure custody facilities: youth development centers and juvenile detention centers.

Youth Development Centers

- The average youth development center census for the quarter was 252 for the four centers. There were 2 hospitalizations of juveniles during this quarter.
- There were 157 healthcare service appointments provided by community medical providers; (22) of these were unscheduled/ urgent. All community-based services were provided by providers adhering to the required ACJJ medical rate.

Juvenile Detention Centers

- There were 1039 juveniles served in detention centers in the quarter. (1) juveniles required hospitalization.
- There were 72 off-site services/appointments provided by community providers; (3) of these were unscheduled/urgent. All community-based services were provided by contracted providers adhering to the required ACJJ medical rate