

SUBJECT: INSTITUTION PROCESS FOR REFERRAL TO SPECIALTY
HEALTH SERVICES

EFFECTIVE DATE: 07/18/2021

I. PURPOSE:

The purpose of this Health Services Bulletin (HSB) is to establish procedures for referring inmates to the Reception and Medical Center (RMC), RMC Hospital or Staging Facility for medical services, therapeutic procedures or dental care and outside specialist services.

These standards and responsibilities apply to both Department staff and Comprehensive Health Care Contractor (CHCC) staff.

II. DEFINITIONS:

A. Staging Facility – Refers to an institution that accommodates specialty care services on site as well as schedules and /or coordinates off site care for various institutions.

B. Ancillary Service – Refers to a diagnostic or therapeutic health care service.

C. Consult Coordinator – The institutional staff designated to perform the duties of coordinating and scheduling requests for specialty medical services.

D. Utilization Management (UM) – Ongoing operational activities which are performed in managing inmate clinical care for outside medical services.

E. Business Day – Official working days of the week Monday to Friday, excluding weekends and official State of Florida holidays.

III. INSTITUTIONAL CONSULTATION AND PRE-APPROVAL OF HEALTH CARE SERVICES PROCESS:

A. The [DC4-702](#), *Consultation Request-Consultant's Report* form will be utilized for all specialty consultations. Information must be legible and sufficient to support medical necessity and allow the consultant to provide the requested service. For additional instructions refer to Appendix A *Guidelines for Submitting Specialty Medical Service Requests to Utilization Management*. The exceptions listed below do not require UM approval to be scheduled :

1. Routine eye examinations
2. Dental examinations

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3. Visual referrals to optometrist or ophthalmologist in accordance with criteria set in HSB 15.03.25.03, *Vision Care Services*
 4. Auditory referrals to an audiologist in accordance with criteria set in HSB 15.03.25.01, *Auditory Care Services*
- B. The [DC4-669, Request for Pre-Approval of Health Care Services](#) form will be utilized for surgery, procedures and ancillary services in excess of \$500. The form must be complete and sent to UM along with supporting documentation. For additional instructions refer to the Appendix A *Guidelines for Submitting Specialty Medical Service Requests to Utilization Management*.
- C. The urgent nature of requests shall be made clear in the documentation to ensure appropriate scheduling. The date request is written begins the scheduling time frame. Therefore, it is the institutional practitioner's responsibility to determine and document the acuity level of the medical request. Additional guidelines are located in [HSB 15.09.04](#). The institutional CHO/Medical Director or designee will review and approve all medical requests before being submitted to UM.
- D. Consult Coordinators shall submit medical requests to UM in the following identified time frames. The submission time is calculated by business days and based on the acuity level and the date the medical request is written. The submission time is as follows;
1. Emergent within 24 hours,
 2. Urgent within 2 days
 3. Routine within 3 days.
- E. Upon UM approval, the institutional Senior Health Services Administrator (SHSA), or designee, will schedule the request for medical services with the appropriate provider.
- F. For specialty consultations, the SHSA or designee is responsible for ensuring the medical record contains any pertinent information of procedures related to the consultation. Pertinent information will be sent with the patient in a sealed envelope for medical consultant review. (Note: All pre-op orders are to be coordinated with the scheduled date of surgery and addressed by the inmate's permanent camp.) When the inmate must transfer, the entire comprehensive medical record must be kept at the institution of the inmate's assigned housing location.
- G. Inmates will not be provided with appointment dates or times.

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- H. The institution shall maintain the mandatory medical logs, [DC4-797F](#) and [DC4-797G](#), which shall reflect completion of the consultations, procedures or surgeries. If necessary entries shall be carried over to the next month's log to reflect the timeline of completion.
- I. If an inmate is transferred to another institution with a pending consult or procedure, this must be reflected on the transfer record.

IV. DATA ENTRY:

- A. Data entry into OBIS is mandatory for the following health services provided to inmates by non-DC providers using the following codes:

Note: For OBIS assistance, see *Offender Based Information System - Health Services (OBIS-HS) Technical Reference and Procedure Manual*.

1. Emergent inpatient admissions (IPE)
2. Emergency room visits (EM)
3. Ambulatory surgical/outpatient procedures (AS)
4. Scheduled inpatient admissions/procedures (IPS)
5. Physician consults and referrals (SP-__)
6. Other ancillary procedures (IA-__)
7. All visits, even **no-charge** services

OBIS data entry for each consultant encounter shall be performed by staff at RMC, Staging Center or the scheduling institution.

V. ACTION:

- A. Transfers to RMC Hospital:
1. Transfers require prior authorization. Only the Utilization Management (UM) office can authorize such transfers.
 2. After the request for transfer is approved by UM, UM will use the OBIS SYSM e-form EF4-001 or email *Medical Transfer Request Form*. The form will be completed and sent to Population Management and the losing and gaining institutions. Once Population Management approves the *Medical Transfer Request*, they will send authority to transfer to the losing and gaining institutions. The inmate will then be removed from the losing institution's count and incorporated into the RMC count.
 3. The RMC Medical Director will resolve any discrepancies on placement.

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B. Inmates may be sent to RMC or Staging Facility under the following conditions:

1. Transfer with overnight or permanent status
2. Transport with return to the originating institution the same day

Transport - same day: This instruction is intended for those appointments taking only a few hours and within reasonable driving distance. The inmate will be driven to RMC, Staging Facility or outside provider by the referring institution and, after the visit takes place, driven back to the originating institution the same day. It is imperative all returned consultations received at the originating institution or directly from the specialty consultant are immediately reviewed and documented in chart by the receiving nurse, then given priority screening by CHO/IMD to ensure a timely disposition and submission to UM if deemed appropriate. All decisions regarding inmate health care are the responsibility of the institutional providers. The institutional provider will review any recommendations from a specialty consultant, and document on a [DC4-701](#) the justification for accepting, or denying specific recommendations. Eyeglasses are exempt.

- C. Transfer – overnight: This instruction is intended for inmates assigned to institutions that exceed a reasonable driving distance or require an extended stay for specialty medical services. The inmate will be transferred to RMC or Staging Facility. A medical hold will be entered into OBIS and all returning specialty care recommendations and orders will be processed in the same manner as stated above for originating institutions. Medical holds shall be managed in accordance with HSB 15.02.02.

VI. DENTAL/ORAL SURGERY REFERRALS:**A. Transfers to RMC - Inpatient or Outpatient Dental Services:**

1. Authorization for Dental transfers for medical reasons shall be approved by the RMC Medical Director, or designee. After the transfer is approved, the dental department will send a DC SYSM Mail message to the referring institution. Examples of appropriate dental transfers are inmates arriving for specialty oral surgery or specialty endodontic procedures such as temporomandibular joint dysfunction (TMJ) surgery, facial bone fracture patients and inmates in need of complex dental prosthetics.

B. Mechanisms for Processing and Scheduling of Oral Surgery:

1. In general, patients requiring oral surgery will be evaluated by the RMC Dental Oral Surgeon, or designee, who will determine an appropriate oral

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surgery treatment plan. A prior approval ([DC4-669](#)) packet will be completed by RMC Dental and submitted to UM for processing. RMC Dental will then schedule the appointment and coordinate with Medical Scheduling and Security. The RMC dental department will prepare and send a surgery packet to RMC Medical Scheduling to include: films, medication history, copy of consult referral, and any other pertinent information. This information will be sent with inmate at the time of the scheduled appointment.

- C. Distinguishing Between Routine, Urgent and Emergency Conditions Involving the RMC Dental Department:
1. Routine requests shall be made using form [DC4-702](#), which shall be submitted via fax, secure email or internal mail to the RMC Dental Department.
 2. The label URGENT shall be used for services that should be evaluated by the appropriate RMC Dentist within 72 hours of date consult written.
 3. Emergency services are those that need to be performed right away. During business hours, these shall be discussed on the telephone with the RMC Chief Dentist or designee. Depending on the inmate's condition, the patient will either be sent to the local emergency room or processed as a transfer to RMC (see above section VI, A) with the referring institution providing transporting as soon as possible. The [DC4-669](#) shall be sent.
- D. Process for Day Trip Transport Only:
1. This procedure is intended for those appointments taking only a few hours and are scheduled by RMC Dental Department. The referring institution transfer officer will bring the inmate to RMC. After the appointment, the inmate will be driven back to the same institution that day. The procedure varies depending on the referring institution location.
 2. Transport only from beyond Region II: This process needs authorization from the RMC Dental Department. Authorization for Dental transfers done for medical reasons is contingent upon approval from the RMC Medical Director, and shall be based on whether driving the inmate both ways the same day is appropriate for this type of service. If approved, the dental department designee will send the following in a DC SYSM Mail message:

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The above named inmate has been scheduled for evaluation at RMC dental clinic on (date of appointment). This is to be a day trip only with (institution name) transporting.

VII. RELEVANT FORMS:

- A. [DC4-669, Request for Pre-Approval of Health Care Services](#)
- B. [DC4-701, Chronological Record of Health Care](#)
- C. [DC4-702, Consultation Request-Consultant's Report](#)
- D. [DC4-797F, Institutional Consult and Prior Approval Log](#)
- E. [DC4-797G, Optometry Log](#)
- F. *NEW* Appendix A, Guidelines for Submitting Specialty Medical Requests

Health Services Director

Date

This Health Services Bulletin Supersedes:

HSB 15.01.04 dated 8/5/93,
Pen Change to HSB 15.01.04 dated April 18, 2005,
HSB 15.01.02 dated 12/17/96,
HSB 15.06.01 dated 9/18/00, 01/24/11, 9/23/14, 05/04/17, 2/2/2018,
AND 07/31/2019
