

	DEPARTMENT OF PUBLIC SAFETY	EFFECTIVE DATE: FEB 06 2014	POLICY NO.: COR.10.1G.11
	CORRECTIONS ADMINISTRATION POLICY AND PROCEDURES	SUPERSEDES (Policy No. & Date): COR.10.1G.11 (02/02/2009)	
	SUBJECT: MEDICAL RELEASES	Page 1 of 3	

1.0 PURPOSE

To establish guidelines for the requesting of a medical release recommendation for inmates experiencing terminal or severely disabling conditions.

2.0 REFERENCES, OBJECTIVES, AND CATEGORIES

.1 References

- a. Hawaii Revised Statutes; Section 26-14.6, Department of Public Safety; and Section 353C-2, Director of Public Safety, Powers and Duties; Section 353-13.5, Election of private medical or psychological care by prisoners.
- b. National Commission on Correctional Health Care, Standards for Health Services in Prisons and Jails, (2008).
- c. Williams, BA, Sudore RL, Greifinger R, Morrison, RS. "Balancing Punishment and Compassion for Seriously Ill Prisoners." *Ann Intern Med*. 2011. July 19: 155(2): 122-126: doi: 10.1059/0003-4819-155-2-201107190-00348.

.2 Objective

Inmates will be considered for release from prison before the date of their expected release date if their physical condition, due to illness or dementia, is such that they:

- a. Are too functionally compromised to pose a significant risk to public safety;
- b. Are too ill or too cognitively impaired to either participate in rehabilitation and/or to be aware of punishment; or
- c. Have conditions that cannot appropriately be treated and cared for in prison.

.3 Categories

- a. Inmates with a terminal illness with a predictably poor prognosis
- b. Inmates with Alzheimer's and other dementias; Inmates in a persisting vegetative state
- c. Inmates with serious progressive, nonreversible illnesses with profound functional and/or cognitive impairments

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- d. Inmates requiring lifesaving treatments that cannot be performed in the correctional facilities

3.0 POLICY

A medical release recommendation shall only be requested by a physician. A request for a medical release initiated by an inmate shall be reviewed in accordance with the procedures delineated in this policy.

4.0 PROCEDURES

- .1 The patient or his or her legal guardian shall be required to sign a Release of Medical Information form, DOC 404A
- .2 An inmate may submit a recommendation from a private licensed medical doctor, if the recommendation is obtained pursuant to Section 353.13.5 of the Hawaii Revised Statutes.
- .3 The patient's primary care physician shall draft a memorandum to the Health Care Division Medical Director requesting a medical release recommendation for a patient. At a minimum, the information supplied to the Medical Director shall include the patient's name, SID number, and date of birth. The physician shall indicate the category of the request and a description of the terminal or debilitating medical condition.
- .4 The Clinic Services Administrator shall request an abbreviated prescriptive plan (PPU) from the facility where the inmate is housed. At a minimum, the PPU shall include the inmate's prison behavior, participation in required programs, detention charges, sentences, and inmate custody status and conviction history. The PPU shall be attached to the request and forwarded to the Medical Director of the Healthcare Division, Department of Public Safety.
- .5 The Medical Director shall make a final recommendation on the inmate's physical condition. The memorandum with the Medical Director's recommendation shall be forwarded to the Corrections Health Care Administrator (CHCA).
- .6 The Corrections Health Care Administrator (CHCA) shall submit the packet with a cover memorandum requesting a medical release recommendation to the Director through the Deputy Director for Corrections (DEP-C). The cover

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memorandum shall have a signature line for the Director and the DEP-C to review the HCDA's recommendation request.

- .7 The DEP-C shall review the request and include a recommendation to the Director. The Director shall then forward a final Departmental recommendation to the Hawaii Paroling Authority.
- .8 The HCD may resubmit an updated recommendation request for a medical release should a previously denied inmate's condition or category of condition changes.

5.0 SCOPE

This policy and procedure applies to all correctional facilities and their assigned personnel.

APPROVAL RECOMMENDED:

Lori Karan MD 2/6/14
 Medical Director Date

[Signature] 2/6/14
 Corrections Health Care Administrator Date

[Signature] 2/6/2014
 Deputy Director for Corrections Date

APPROVED:

[Signature]
 Director

2/6/14
 Date

AUTHORIZATION TO RELEASE MEDICAL INFORMATION

TO: _____ FROM: _____

(Street Address)

(Street Address)

(City) (State) (Zip Code)

(City) (State) (Zip Code)

PATIENT'S NAME: _____
(Print Patient's Name)

(DOB)

HEALTH INFORMATION REQUESTED: _____

For the Purpose of Assessment, Follow Up Care and/or Continued Health Care Service to the Patient.

(Authorized Signature)

(Title)

(Date)

AUTHORITY

HIPAA: 45 CFR 164.512(k)(5). Protected Health Information may be disclosed to Correctional Institutions with custodial responsibility described by State law and Federal rule for the provision of health care to incarcerated individuals.

Hawaii Revised Statutes: Chapter 26-14.6, Department of Public Safety

Hawaii Revised Statutes: Chapter 353C-2, Director of Public Safety, Powers and Duties.

Hawaii Revised Statutes: Chapter 353-1 to 50, Prisons and Prisoners Generally

Original: Provider/Agency in possession of the PHI.

Copy: Medical Record

AUTHORIZATION TO RELEASE MEDICAL INFORMATION

CONDITIONS OF AUTHORIZATION

1. This authorization to request the protected health information is valid for one year from the date of the authorized signature.
2. The Authority has the right to revoke the authorization by submitting a revocation in writing to the person, or class of persons, authorized to release the information. The right to revoke the authorization to release the information is valid at anytime prior to the actual release of information.
3. Treatment, payment, continued enrollment in a health plan or eligibility benefits is not a condition of this authorization except as allowed by federal and state law.
4. The release of protected health information under this provision is no longer applicable once the individual has been released from the lawful custody of the Department of Public Safety, Office of Corrections.
5. The information released to the Authority may be subject to re-disclosure for:
 - A. The provisions of health care or continued health services to the patient.
 - B. The health and safety of such individuals and other inmates.
 - C. The health and safety of correctional officers and employees and others at the correctional institution.
 - D. The health and safety of the individual and correctional officers or other persons responsible for the transporting or transferring of the individual.
 - E. The administration and maintenance of the safety, security, and good order of the correctional institution.
 - F. To law enforcement on the premises of a correctional institution.
 - G. To the individual identified in the protected health information or to his or her personal representative.
 - H. To public health authorities and other agencies as required by the Health Information Accountability and Portability Act and Hawaii Revised Statutes.

The information released under this authorization may no longer be protected by the health information privacy act.