I. PURPOSE:
   To provide guidance for reimbursement to the State for services rendered to the residents of the Secure Psychiatric Unit (SPU).

II. APPLICABILITY:
   To the Director of Medical and Forensic Services, Director of Administration, and Bureau of Financial Services.

III. POLICY:
   It is the policy of the Department of Corrections to seek reimbursement for the State for services provided to residents of SPU.

IV. PROCEDURE:
   A. The Office of Reimbursements, Public Health, Department of Health and Human Services will review and investigate all records at SPU for the following purposes pursuant to RSA 126-A:43 (Attachment A):
      1. determining the daily rate to be charged for the care, treatment, and maintenance of residents;
      2. recommending to the Department of Corrections the appropriate payors; and
      3. attempting collection from non-payors.
   B. SPU will fax to the Office of Reimbursements the Admissions Profile Sheet of residents admitted there for the purposes of seeking reimbursement for the cost of services rendered.
   C. SPU will be responsible for notifying the Office of Reimbursement as to the number of days a patient is to be billed by transmitting via email a daily census report.
   D. It is the responsibility of the Department of Health and Human Services through the Office of Reimbursements to provide any and all collection effort as they so deem.
   E. Reimbursements received from the Office of Reimbursements will be deposited and credited to the Medical Expense class line.
REFERENCES:

Standards for the Administration of Correctional Agencies
Second Edition. Standards

Standards for Adult Correctional Institutions
Fourth Edition. Standards

Standards for Adult Community Residential Services
Fourth Edition. Standards

Standards for Adult Probation and Parole Field Services
Third Edition. Standards

Other

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Attachment
126-A:43 Regular Rate. –
   I. The commissioner shall establish for any patient, resident, or client of an institution, facility, or program named in RSA 126-A:34, a uniform rate to cover the expenses of the several categories of service provided to patients, residents, or clients such as but not necessarily limited to the following: intensive medical care, treatment, and maintenance; intensive psychiatric care, treatment, and maintenance; and custodial care, treatment, and maintenance. The commissioner is not required to establish such rate by rules adopted under RSA 541-A. The categories or classifications of service provided may be modified by the commissioner.
   II. After any person has been a resident or patient in any of the institutions named in RSA 126-A:34 for 10 years or has reached the age of majority, the liability of persons other than the patient or resident or such patient's or resident's spouse to provide payments to cover the expenses of care, treatment, and maintenance shall cease, except for recoveries from the estates of such persons which shall be limited as provided in RSA 126-A:42, II. The liability of a spouse under RSA 126-A:36 shall cease after the person has been a patient or resident of any of the institutions named in RSA 126-A:34 for 10 years. The liability of the patient or resident under this paragraph shall continue unless it is determined by the office of reimbursements, in consultation with the commissioner, that the patient or resident lacks sufficient income from any source including, but not limited to, social security, retirement, civil service or veterans administration income, trust fund, or other income to pay a full rate or a higher partial rate.
   III. The office of reimbursements shall, upon request, furnish to each estate from which, or to each person chargeable from whom, a recovery of expenses is sought pursuant to RSA 126-A:42, a record of the accumulated charges against said estate or said person.