OCO Spotlight



Health Status Report (HSR) Protocol Updates

After extensive negotiations, DOC has agreed to and implemented OCO recommendations regarding Health Status Reports. Changes include incorporating the HSR Quick Index & Durable Medical Equipment (DME) protocol, updating criteria to match community standards of care, and clarifying guidelines for unique situations such as HSRs in restrictive housing and continuty of care after facility transfers.

Overview

Healthcare concerns are consistently one of the most common types of complaint filed with the Office of the Corrections Ombuds (OCO). Of those complaints, a significant percentage relate to Health Status Reports. Since 2019, this office has successfully negotiated with the Department of Corrections (DOC) to maintain, establish, and re-establish Health Status Reports (HSRs) for individual patients. Concurrent to working individual complaints, the OCO has discussed with the DOC the critical need to modify the policies and processes that control patients' access to these necessary accommodations.

Last updated in March 2017, the DOC HSR protocol does not include a clear appeal process. The OCO recommended the DOC review the protocol and update language, references, and processes. In addition to content updates, the OCO supported modification to the protocol format for ease of use by clinicians.

Recommendation #1: Update HSR Protocol & Quick Index.

- Criteria. Review and update current criteria for issuing specific HSRs. Criteria should meet community standards. Assessing criteria should not place an unnecessary burden on the patient.
- **User-Friendly Format.** Revise the Quick Index so that it is easy to navigate. This formulary should address the indications and establishment of medical necessity, security considerations, and clinical references.
 - Update broken, missing, and outdated links on the Quick Index.
 - Outline clear pathways for HSRs.
- **Onboarding/Training.** Providers should know how to determine medical necessity, clearly document HSRs, and explain pathways for HSRs unique to individual patient needs.

A publicly available DOC policy does not exist for HSRs, and current protocols can only be viewed by DOC staff. Patients do not always receive clear information about criteria or why an HSR was denied. The HSR review and approval process is not clear to patients, creating a barrier for individuals to advocate for their HSR needs. This lack of transparency likely contributes to the number of HSR-related resolution requests filed each year.

Recommendation #2: Increase availability of information and education for patients.

- **HSR Criteria & Decisions.** Share HSR protocols and/or criteria documents with patients and the public (via DOC public policy). Document HSR decisions to include the reason(s) for denial.
- **HSR Appeals.** Outline a clear process for patients to appeal HSR denials.

OCO Actions & Outcomes

In July 2023, the OCO recommended that DOC update the HSR Protocol and Quick Index and increase availability of information and education for patients. In August 2023, DOC responded to OCO's recommendations followed by a collaborative meeting in December 2023 with Health Services leadership at DOC Headquarters.

Throughout 2024 and 2025, the OCO continued to track HSR concerns and encouraged the DOC to move forward with protocol updates. **With direct input from OCO, the new DOC HSR Protocol was published in August 2025.** The HSR protocol, HSR quick index, and Durable Medical Equipment (DME) protocols were consolidated into one protocol document for ease of use by clinicians. These updates addressed OCO Recommendation #1.

While the DOC did not agree to tranform the internal HSR Protocol to a publicly available DOC policy, DOC did agree to improve HSR decision documentation and processes. OCO caseworkers will utitilize this new protocol when reviewing individual HSR concerns reported by patients. **The OCO also chose to highlight some of the protocol changes here in hopes of sharing information that may be useful to patients in DOC custody:**

- HSR denials can be appealed by submiting a DOC Resolution Request, discussing further with your provider, or sending a kite to the Facility Medical Director (FMD).
- Patients shall receive a printed copy of their HSR(s). There should always be copies printed for the chart, for the patient, and for the unit. If more copies are needed for work or school accommodations, they can be provided.
- If a patient does not meet criteria for a requested HSR, an exception may be granted via review by the FMD.
- Specialized HSRs such as those for gender affirming care are reviewed by the pertinent Care Review Committee (CRC).
- Unexpired HSRs will automatically transfer when patients move to other facilities. The receiving facility will review and renew them within 30 days of transfer. If there is a need for discussion, the patient's provider in the new facility will discuss with the patient prior to any changes.
- If an HSR is rescinded prior to the expiration date, the provider will notify the patient via verbal and/or written communication, including the reason why, and document this communication in the medical record.
- Indigent status must not be an impediment to a patient receiving support that is required and a covered benefit for their health needs.
- Denied HSRs must be communicated with the patient and rationale documented in the medical record.
- When a patient enters a restrictive housing unit, active HSRs and durable medical equipment (DME) must be reviewed by the unit or on-call medical provider. Approved items must be returned to the patient within 48 hours of admission to restrictive housing.
 - Patients should not be denied HSRs or DME solely based on restrictive housing placement. If the DME poses a security risk, the clinical team and custody will consider alternatives that meet the medical needs of the patient as well as the security needs of restrictive housing.
 - While security concerns will be considered in restrictive housing, custody staff cannot override clinical decisions.

The OCO is excited to share these outcomes after extensive negotiations with DOC. We anticipate the updated HSR protocol will result in more consistent application of HSRs and will prevent HSR concerns from arising in restrictive housing and facility transfers.