

CORRECTIONAL MANAGED HEALTH CARE POLICY MANUAL	Effective Date: 05/20/2016	NUMBER: A-05.1 Page 1 of 2
	Replaces: 04/07	
	Formulated: 3/85 Reviewed: 04/18	
HEALTH SERVICES POLICIES		

PURPOSE: To provide a framework for the delivery of health services and serve as the division's official position on issues.

POLICY:

- I. Written statements of policy necessary for the administration and operation of the Correctional Managed Health Care Committee, its agents, and the TDCJ Health Services Division are developed by appropriate authorities, approved by the TDCJ Division Director for Health Services and placed in the Health Services Policy Manual.
- II. The CMHC Health Services Policy manual contains:
 - A. Statements of policy that guide the delivery of health services to meet accreditation standards, relevant laws and regulations, and judicial mandates.
 - B. Statements of policy and associated procedures from TDCJ administration applicable to all or selected departments and personnel.
- III. Authority for approval of all policies in the manual rests with the Division Director of Health Services in coordination with the medical directors of the contracted agencies.
- IV. Departmental policies and/or procedures requiring department specific processes are developed at the department level and approved by the department head and the appropriate management teams. Copies of all approved departmental policies are forwarded to the Office of Professional Standards, TDCJ Health Services Division and the Policy Coordinator. The department manuals are reviewed annually and an annual review sheet is sent to the Policy Coordinator.
- V. Facility policies and/or procedures requiring facility specific processes that describe in detail their implementation are developed at the facility level and approved by the facility medical director (TTUHSC)/management team (UTMB) and the regional management team.

These manuals are reviewed annually by the appropriate management team to insure compliance with Texas Department of Criminal Justice Administrative Directives and Health Services policies. Copies of all approved processes are forwarded by facility staff to the Office of Professional Standards, TDCJ Health Services Division and the Policy Coordinator.
- VI. Copies of all policy and procedure manuals are distributed to the facility medical director (TTUHSC) /management team (UTMB) and the facility security staff in a manner that makes them readily accessible to the Health Services staff.
- VII. The policies for the statewide CMHC Health Services manual are reviewed at least annually and revised as necessary. A policy review committee is appointed annually by the Division Director of Health Services in coordination with the medical directors of the contracted agencies. The committee is represented by members of each discipline and is responsible for the annual review of policies and for the review of new policies and proposed policy revisions.

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- A. New policies and revisions to existing policies may be proposed by any health services employee. The proposed new or revised policy is reviewed and approved by the appropriate supervisory chain prior to review by the Policy Review Committee.
- B. The proposed policy or revision is submitted by the appropriate executive management team to the Policy Coordinator who is responsible for distributing the policy to the Policy Review Committee with instructions to review, provide concurrence/non-concurrence and comments.
- C. Members of the Policy Review Committee submit their comments to the Policy Coordinator who consolidates the comments and, if there is a lack of concurrence, the Policy Review Committee will reconvene to reach resolution.
- D. After consensus is reached by the Policy Review Committee (either concurrence or written justification by executive management team), the Policy Coordinator sends the proposed new or revised policy and appropriate documentation to the UTMB and TTUHSC Medical Directors.
- E. If approval is obtained, the Policy Coordinator sends the policy to the TDCJ Division Director for Health Services for final approval.
- F. The Policy Coordinator notifies all holders of the statewide policy manual of approved policies in a timely manner.
- G. The annual review of existing policies is completed no later than October of each year. During each year, 25% of the policies will be reviewed each quarter.
- H. The Policy Coordinator distributes the annual revision signature page to all holders of the TDCJ policy manual in January of each year.

Reference: ACA Standard 4-4380 (Ref. 3-4326) Mandatory
ACA Standard 4-4424 (Ref. 3-4329)