

By: Representatives Currie, Hulum

To: Public Health and Human
Services

HOUSE BILL NO. 1474

1 AN ACT TO AMEND SECTION 41-3-15, MISSISSIPPI CODE OF 1972, TO
2 PROVIDE THE REQUIREMENTS FOR A MISSISSIPPI DEPARTMENT OF HEALTH
3 REVIEW OF HEALTH CARE PROVIDED TO INMATES OF THE MISSISSIPPI
4 DEPARTMENT OF CORRECTIONS; TO PROHIBIT THE DEPARTMENT OF
5 CORRECTIONS' COMPREHENSIVE CORRECTIONAL HEALTHCARE SERVICES
6 PROVIDER FROM CHARGING STATE INMATES FOR CERTAIN HEALTHCARE
7 SERVICES; TO REQUIRE THE DEPARTMENT OF CORRECTIONS TO PROVIDE
8 COMMUNAL KIOSKS AT CORRECTIONAL FACILITIES SO THAT INMATES CAN
9 MAKE REQUESTS FOR MEDICAL OR DENTAL APPOINTMENTS ELECTRONICALLY;
10 TO REQUIRE CERTAIN DISPENSATION OF MEDICATION FOR STATE INMATES TO
11 HELP ENSURE EFFECTIVE MEDICATION MANAGEMENT; TO REQUIRE THE
12 DEPARTMENT TO EMPLOY LICENSED OR REGISTERED DIETICIANS AT STATE
13 CORRECTIONAL FACILITIES; TO REQUIRE THAT CERTAIN ACCESS BE
14 PROVIDED TO STATE INMATES FOR MEDICAL CARE AT ALL TIMES; AND FOR
15 RELATED PURPOSES.

16 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

17 **SECTION 1.** Section 41-3-15, Mississippi Code of 1972, is
18 amended as follows:

19 41-3-15. (1) (a) There shall be a State Department of
20 Health.

21 (b) The State Board of Health shall have the following
22 powers and duties:



23 (i) To formulate the policy of the State
24 Department of Health regarding public health matters within the
25 jurisdiction of the department;

26 (ii) To adopt, modify, repeal and promulgate,
27 after due notice and hearing, and enforce rules and regulations
28 implementing or effectuating the powers and duties of the
29 department under any and all statutes within the department's
30 jurisdiction, and as the board may deem necessary;

31 (iii) To apply for, receive, accept and expend any
32 federal or state funds or contributions, gifts, trusts, devises,
33 bequests, grants, endowments or funds from any other source or
34 transfers of property of any kind;

35 (iv) To enter into, and to authorize the executive
36 officer to execute contracts, grants and cooperative agreements
37 with any federal or state agency or subdivision thereof, or any
38 public or private institution located inside or outside the State
39 of Mississippi, or any person, corporation or association in
40 connection with carrying out the provisions of this chapter, if it
41 finds those actions to be in the public interest and the contracts
42 or agreements do not have a financial cost that exceeds the
43 amounts appropriated for those purposes by the Legislature;

44 (v) To appoint, upon recommendation of the
45 Executive Officer of the State Department of Health, a Director of
46 Internal Audit who shall be either a Certified Public Accountant
47 or Certified Internal Auditor, and whose employment shall be



continued at the discretion of the board, and who shall report directly to the board, or its designee; and

(vi) To discharge such other duties, responsibilities and powers as are necessary to implement the provisions of this chapter.

(c) The Executive Officer of the State Department of Health shall have the following powers and duties:

(i) To administer the policies of the State Board of Health within the authority granted by the board;

(ii) To supervise and direct all administrative and technical activities of the department, except that the department's internal auditor shall be subject to the sole supervision and direction of the board;

(iii) To organize the administrative units of the department in accordance with the plan adopted by the board and, with board approval, alter the organizational plan and reassign responsibilities as he or she may deem necessary to carry out the policies of the board;

(iv) To coordinate the activities of the various offices of the department;

(v) To employ, subject to regulations of the State Personnel Board, qualified professional personnel in the subject matter or fields of each office, and such other technical and clerical staff as may be required for the operation of the department. The executive officer shall be the appointing



73 authority for the department, and shall have the power to delegate
74 the authority to appoint or dismiss employees to appropriate
75 subordinates, subject to the rules and regulations of the State
76 Personnel Board;

77 (vi) To recommend to the board such studies and
78 investigations as he or she may deem appropriate, and to carry out
79 the approved recommendations in conjunction with the various
80 offices;

81 (vii) To prepare and deliver to the Legislature
82 and the Governor on or before January 1 of each year, and at such
83 other times as may be required by the Legislature or Governor, a
84 full report of the work of the department and the offices thereof,
85 including a detailed statement of expenditures of the department
86 and any recommendations the board may have;

87 (viii) To prepare and deliver to the Chairmen of
88 the Public Health and Welfare/Human Services Committees of the
89 Senate and House on or before January 1 of each year, a plan for
90 monitoring infant mortality in Mississippi and a full report of
91 the work of the department on reducing Mississippi's infant
92 mortality and morbidity rates and improving the status of maternal
93 and infant health; and

94 (ix) To enter into contracts, grants and
95 cooperative agreements with any federal or state agency or
96 subdivision thereof, or any public or private institution located
97 inside or outside the State of Mississippi, or any person,



98 corporation or association in connection with carrying out the
99 provisions of this chapter, if he or she finds those actions to be
100 in the public interest and the contracts or agreements do not have
101 a financial cost that exceeds the amounts appropriated for those
102 purposes by the Legislature. Each contract or agreement entered
103 into by the executive officer shall be submitted to the board
104 before its next meeting.

105 (2) The State Board of Health shall have the authority to
106 establish an Office of Rural Health within the department. The
107 duties and responsibilities of this office shall include the
108 following:

109 (a) To collect and evaluate data on rural health
110 conditions and needs;

111 (b) To engage in policy analysis, policy development
112 and economic impact studies with regard to rural health issues;

113 (c) To develop and implement plans and provide
114 technical assistance to enable community health systems to respond
115 to various changes in their circumstances;

116 (d) To plan and assist in professional recruitment and
117 retention of medical professionals and assistants; and

118 (e) To establish information clearinghouses to improve
119 access to and sharing of rural health care information.

120 (3) The State Board of Health shall have general supervision
121 of the health interests of the people of the state and to exercise



the rights, powers and duties of those acts which it is authorized by law to enforce.

(4) The State Board of Health shall have authority:

(a) To make investigations and inquiries with respect to the causes of disease and death, and to investigate the effect of environment, including conditions of employment and other conditions that may affect health, and to make such other investigations as it may deem necessary for the preservation and improvement of health.

(b) To make such sanitary investigations as it may, from time to time, deem necessary for the protection and improvement of health and to investigate nuisance questions that affect the security of life and health within the state.

(c) To direct and control sanitary and quarantine measures for dealing with all diseases within the state possible to suppress same and prevent their spread.

(d) To obtain, collect and preserve such information relative to mortality, morbidity, disease and health as may be useful in the discharge of its duties or may contribute to the prevention of disease or the promotion of health in this state.

(e) To charge and collect reasonable fees for health services, including immunizations, inspections and related activities, and the board shall charge fees for those services; however, if it is determined that a person receiving services is unable to pay the total fee, the board shall collect any amount



that the person is able to pay. Any increase in the fees charged by the board under this paragraph shall be in accordance with the provisions of Section 41-3-65.

(f) (i) To establish standards for, issue permits and exercise control over, any cafes, restaurants, food or drink stands, sandwich manufacturing establishments, and all other establishments, other than churches, church-related and private schools, and other nonprofit or charitable organizations, where food or drink is regularly prepared, handled and served for pay; and

(ii) To require that a permit be obtained from the Department of Health before those persons begin operation. If any such person fails to obtain the permit required in this subparagraph (ii), the State Board of Health, after due notice and opportunity for a hearing, may impose a monetary penalty not to exceed One Thousand Dollars (\$1,000.00) for each violation. However, the department is not authorized to impose a monetary penalty against any person whose gross annual prepared food sales are less than Five Thousand Dollars (\$5,000.00). Money collected by the board under this subparagraph (ii) shall be deposited to the credit of the State General Fund of the State Treasury.

(g) To promulgate rules and regulations and exercise control over the production and sale of milk pursuant to the provisions of Sections 75-31-41 through 75-31-49.



171 (h) On presentation of proper authority, to enter into
172 and inspect any public place or building where the State Health
173 Officer or his representative deems it necessary and proper to
174 enter for the discovery and suppression of disease and for the
175 enforcement of any health or sanitary laws and regulations in the
176 state.

177 (i) To conduct investigations, inquiries and hearings,
178 and to issue subpoenas for the attendance of witnesses and the
179 production of books and records at any hearing when authorized and
180 required by statute to be conducted by the State Health Officer or
181 the State Board of Health.

182 (j) To promulgate rules and regulations, and to collect
183 data and information, on (i) the delivery of services through the
184 practice of telemedicine; and (ii) the use of electronic records
185 for the delivery of telemedicine services.

186 (k) To enforce and regulate domestic and imported fish
187 as authorized under Section 69-7-601 et seq.

188 (5) (a) The State Board of Health shall have the authority,
189 in its discretion, to establish programs to promote the public
190 health, to be administered by the State Department of Health.
191 Specifically, those programs may include, but shall not be limited
192 to, programs in the following areas:

- 193 (i) Maternal and child health;
- 194 (ii) Family planning;
- 195 (iii) Pediatric services;



196 (iv) Services to crippled and disabled children;
197 (v) Control of communicable and noncommunicable
198 disease;
199 (vi) Chronic disease;
200 (vii) Accidental deaths and injuries;
201 (viii) Child care licensure;
202 (ix) Radiological health;
203 (x) Dental health;
204 (xi) Milk sanitation;
205 (xii) Occupational safety and health;
206 (xiii) Food, vector control and general
207 sanitation;
208 (xiv) Protection of drinking water;
209 (xv) Sanitation in food handling establishments
210 open to the public;
211 (xvi) Registration of births and deaths and other
212 vital events;
213 (xvii) Such public health programs and services as
214 may be assigned to the State Board of Health by the Legislature or
215 by executive order; and
216 (xviii) Regulation of domestic and imported fish
217 for human consumption.
218 (b) [Deleted]
219 (c) The State Department of Health may undertake such
220 technical programs and activities as may be required for the



221 support and operation of those programs, including maintaining
222 physical, chemical, bacteriological and radiological laboratories,
223 and may make such diagnostic tests for diseases and tests for the
224 evaluation of health hazards as may be deemed necessary for the
225 protection of the people of the state.

226 (6) (a) The State Board of Health shall administer the
227 local governments and rural water systems improvements loan
228 program in accordance with the provisions of Section 41-3-16.

229 (b) The State Board of Health shall have authority:

230 (i) To enter into capitalization grant agreements
231 with the United States Environmental Protection Agency, or any
232 successor agency thereto;

233 (ii) To accept capitalization grant awards made
234 under the federal Safe Drinking Water Act, as amended;

235 (iii) To provide annual reports and audits to the
236 United States Environmental Protection Agency, as may be required
237 by federal capitalization grant agreements; and

238 (iv) To establish and collect fees to defray the
239 reasonable costs of administering the revolving fund or emergency
240 fund if the State Board of Health determines that those costs will
241 exceed the limitations established in the federal Safe Drinking
242 Water Act, as amended. The administration fees may be included in
243 loan amounts to loan recipients for the purpose of facilitating
244 payment to the board; however, those fees may not exceed five
245 percent (5%) of the loan amount.



246 (7) [Deleted]

247 (8) Notwithstanding any other provision to the contrary, the
248 State Department of Health shall have the following specific
249 powers: The State Department of Health is authorized to issue a
250 license to an existing home health agency for the transfer of a
251 county from that agency to another existing home health agency,
252 and to charge a fee for reviewing and making a determination on
253 the application for such transfer not to exceed one-half (1/2) of
254 the authorized fee assessed for the original application for the
255 home health agency, with the revenue to be deposited by the State
256 Department of Health into the special fund created under Section
257 41-7-188.

258 (9) [Deleted]

259 (10) Notwithstanding any other provision to the contrary,
260 the State Department of Health shall have the following specific
261 powers: The State Department of Health is authorized to extend
262 and renew any certificate of need that has expired, and to charge
263 a fee for reviewing and making a determination on the application
264 for such action not to exceed one-half (1/2) of the authorized fee
265 assessed for the original application for the certificate of need,
266 with the revenue to be deposited by the State Department of Health
267 into the special fund created under Section 41-7-188.

268 (11) Notwithstanding any other provision to the contrary,
269 the State Department of Health shall have the following specific
270 powers: The State Department of Health is authorized and



empowered, to revoke, immediately, the license and require closure of any institution for the aged or infirm, including any other remedy less than closure to protect the health and safety of the residents of said institution or the health and safety of the general public.

(12) Notwithstanding any other provision to the contrary, the State Department of Health shall have the following specific powers: The State Department of Health is authorized and empowered, to require the temporary detainment of individuals for disease control purposes based upon violation of any order of the State Health Officer, as provided in Section 41-23-5. For the purpose of enforcing such orders of the State Health Officer, persons employed by the department as investigators shall have general arrest powers. All law enforcement officers are authorized and directed to assist in the enforcement of such orders of the State Health Officer.

(13) Additionally, the State Board of Health and the State Health Officer each are authorized and directed to study the status of health care, in its broadest sense, throughout the state. The study should include challenges such as access to care; the cost of care; indigent care; providing health care to the incarcerated; the availability of health care workers, paraprofessionals, and professionals; the effects of unhealthy lifestyle choices; the consequences of health care facilities locating in affluent and urban areas to the detriment of less



affluent areas, small towns, and rural areas; and negative trends which may cause ill effects if they continue. The study shall also include opportunities to improve health care, such as greater coordination among state agencies, local governments, and other entities which provide various types of health care; methods of increasing the health care workforce; and methods to increase the location of health care facilities in distressed areas, rural areas, and small towns. All state agencies, the Legislative Budget Office and the Joint Legislative Committee on Performance Evaluation and Expenditure Review (PEER) are directed to assist the department in developing this study. This provision does not by itself grant any additional power to the State Board of Health or the State Health Officer to require any entity to operate differently. It does, however, empower and direct them to obtain information and make recommendations, and it does require all entities to cooperate with the board and health officer as they seek information.

(14) (a) The Department of Health shall have the authority to conduct a comprehensive review of the medical care provided to inmates of the Mississippi Department of Corrections by the department or its comprehensive correctional health care services provider.

(b) In performing such review, the Department of Health shall have access to:



320 (i) All files and records of the Department of
321 Corrections and any contractor who is providing or has provided
322 medical care to state inmates.

323 (ii) Any facilities where the Department of
324 Corrections renders medical care to inmates including state
325 penitentiaries, state correctional institutions, privately managed
326 prisons, regional jails, hospitals, clinics and county jails where
327 state inmates are held in custody.

328 (iii) All inmates housed in any type of facility
329 set out in subparagraph (ii) above.

330 (iv) All physicians, nurses or other persons who
331 are involved in providing medical care to inmates of the
332 Department of Corrections.

333 (c) In performing this review, the Department of Health
334 shall have the authority to use existing staff of the Department
335 of Health and to engage any contractor necessary to complete the
336 review including, but not limited to, physicians, nurses and other
337 medical and nonmedical staff as required by the State Health
338 Officer.

339 (d) The review shall focus on the quality of medical
340 care rendered to inmates including, but not limited to, patient
341 outcomes, inmate access to medical staff and shall further address
342 the adequacy and fitness of any facilities wherein services are
343 rendered.



344 (e) The review shall be completed by July 1, 2026, and
345 shall include recommendations to the Department of Corrections and
346 the Legislature for the improvement of correctional health care
347 including, but not limited to, the model of service delivery, the
348 adequacy of facilities where medical services are rendered, inmate
349 access to health care and any other matter the Department of
350 Health considers relevant to the improvement of inmate health
351 care.

352 (f) In conducting any review authorized under this
353 section, the Department of Corrections, its contractors, and the
354 Department of Health shall comply with all pertinent provisions of
355 the Health Care Insurance Portability and Accountability Act, (PL
356 104-191) as amended and regulations promulgated pursuant thereto.

357 (g) The Department of Corrections, its staff, sheriffs
358 of counties housing state inmates, regional jail wardens,
359 personnel of private prisons and all staff and contractors
360 involved in providing health care to state inmates shall cooperate
361 with the Department of Health in conducting this review. Upon
362 completion of the review, the Department of Health shall provide
363 copies of its review to and report to the Speaker of the House of
364 Representatives, the Lieutenant Governor, the Governor, the House
365 and Senate Chairs of Corrections Committees, the Chair of the
366 Senate Public Health and Welfare Committee, the Chair of the House
367 Public Health and Human Service Committee, the PEER Committee and
368 the Commissioner of the Department of Corrections.



369 (h) Following the release of the report on July 1,
370 2026, the Department of Health shall plan and conduct a one-year
371 follow-up review to determine the extent to which recommendations
372 made in the initial report have been addressed and shall include
373 any necessary follow-up recommendations.

374 (i) This subsection (14) shall stand repealed from and
375 after July 1, 2027.

376 (15) The Department of Health and the Department of
377 Corrections' comprehensive correctional healthcare services
378 provider shall establish a Hepatitis C Program for state inmates.
379 The Department of Health shall assist the Department of
380 Corrections in obtaining Hepatitis C medications for inmates at
381 340B drug pricing.

382 **SECTION 2.** (1) No inmate shall pay for any fees for
383 healthcare services that are provided by the Department of
384 Corrections' comprehensive correctional healthcare services
385 provider. From and after the effective date of this act, any such
386 unpaid fees that have been previously assessed for an inmate for
387 healthcare and have not been collected, shall be a charge-off for
388 the comprehensive correctional healthcare services provider and
389 the fees shall not be paid by the inmates.

390 (2) (a) There shall be made available in each housing unit
391 of state correctional facilities a communal kiosk or self service
392 terminal for state inmates. The communal kiosk or terminal shall
393 be made available to state inmates to request medical or dental



394 appointments from the Department of Corrections' comprehensive
395 correctional healthcare services provider.

396 (b) When a state inmate makes a request for a medical
397 or dental appointment, pursuant to this subsection, the request
398 shall become a part the inmate's electronic medical records. The
399 Department of Corrections' comprehensive correctional healthcare
400 services provider shall, within twenty-four (24) hours of an
401 inmate's electronic request being made, provide triage service for
402 the inmate to assess his or her medical condition.

403 (3) (a) If a state inmate is disabled or has difficulty
404 walking, the Department of Corrections shall ensure that such
405 inmate shall have his or her medication or medications, as the
406 case may be, dispensed to the inmate as provided under this
407 subsection.

408 (b) Every state inmate who is on any medication or
409 medications, as the case may be, shall receive the medication or
410 medications at the times prescribed for effective medication
411 management for the inmate.

412 (4) The Department of Corrections shall employ a licensed or
413 registered dietician at each of its correctional facilities. The
414 licensed or registered dietician shall help ensure that the
415 dietary restrictions of state inmates are followed. The licensed
416 or registered dietician shall be appropriately licensed to
417 practice in the State of Mississippi as such.



418 (5) There shall be a nurse on staff twenty-four (24) hours a
419 day at each state correctional facility and there shall be a
420 physician on call for each facility. The nurse shall have the
421 ability to contact the physician to assess an inmate's medical
422 condition and to determine the appropriate level of care needed.

423 **SECTION 3.** This act shall take effect and be in force from
424 and after its passage.

