

By: Representatives Currie, Hulum

To: Public Health and Human  
Services

COMMITTEE SUBSTITUTE  
FOR  
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 ONE LICENSED OR REGISTERED DIETICIAN FOR ALL  
13 OF ITS 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.



(7) [Deleted]

(8) 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 to issue a license to an existing home health agency for the transfer of a county from that agency to another existing home health agency, and to charge a fee for reviewing and making a determination on the application for such transfer not to exceed one-half (1/2) of the authorized fee assessed for the original application for the home health agency, with the revenue to be deposited by the State Department of Health into the special fund created under Section 41-7-188.

(9) [Deleted]

(10) 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 to extend and renew any certificate of need that has expired, and to charge a fee for reviewing and making a determination on the application for such action not to exceed one-half (1/2) of the authorized fee assessed for the original application for the certificate of need, with the revenue to be deposited by the State Department of Health into the special fund created under Section 41-7-188.

(11) 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 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           (16) The Department of Health and the Department of  
383 Corrections shall develop a plan for improving the health of  
384 female inmates.

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





393           (2)   (a)   There shall be made available in each housing unit  
394   of state correctional facilities a communal kiosk or self service  
395   terminal for state inmates. The communal kiosk or terminal shall  
396   be made available to state inmates to request medical or dental  
397   appointments from the Department of Corrections' comprehensive  
398   correctional healthcare services provider.

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

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

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

415           (4)   The Department of Corrections shall employ one (1)  
416   licensed or registered dietitian for all of its correctional  
417   facilities. The licensed or registered dietitian shall help



418 ensure that the dietary restrictions of state inmates are  
419 followed. The licensed or registered dietician shall be  
420 appropriately licensed to practice in the State of Mississippi as  
421 such.

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

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

