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According to the 9/9/2020 Washington Examiner, Missouri Governor Parson is looking to settle on a four-year deal to provide prison health services with an option of four additional one-year renewals that could be worth \$1 billion to the private vendor awarded the contract.

Several companies have made bids, among them Corizon Health LLC, which has held the contract for more than 20 years. Corizon was paid more than \$147 million for its work in Missouri in 2019.

For decades, Corizon Health LLC has earned a sinister reputation of maximizing profits over providing adequate healthcare for MO prisoners. This violates RSMo 217.230, which requires “medical care equivalent to community standard” and explicitly stresses “healthcare education, disease prevention, immediate identification of health problems and early intervention to prevent more debilitating chronic health problems.” The declared goal “to return offenders to the community as medically stable as possible, so they may become productive citizens of the state.”

Corizon has also maximized its profits on the backs of its nurses, who claim untold millions in outstanding back pay in an active 2019 lawsuit.

For many years Missouri CURE has documented hundreds of cases of severe medical negligence and malpractice resulting in chronic suffering and deaths of state prisoners. It is time for a change.

However, we doubt that the choice of yet another for-profit company – no matter which one may emerge as winner from the vetting process currently underway – will solve the problem, because *any* provider focused on making (and maximizing) profits will necessarily neglect its consumers (prisoners) as well as its own staff.

Undercutting one another in the vetting process may even *exacerbate* the already extremely dire situation, as Gov. Parson will also be most concerned about expenses to the state that are anticipated to be \$1 billion over the time of the contract.

From long years of experience, we have identified a host of *systemic* issues of concern, which is why

any for-profit company will fail to provide appropriate medical care equivalent to community standard. The most prominent of these issues are:

- **MODOC's contract** with a provider stipulates that *all* services that the company cannot provide *itself and onsite* (such as specialist visits, external testing and treatments, and hospitalizations), have to be ***paid for by the provider***.
- **MODOC current contract** allows company administrators to ***override*** any community specialist's recommendations, without patient recourse.
- **Absent or insufficient "immediate identification"** of health issues exempts the provider from the legal requirement of adequate follow up, with "early intervention" measures. This has been seen in a broad spectrum of routine negligence, in particular coming into tragic and costly effect during the initial diagnostic process regarding transmittable diseases such as HEP A/B/C, HIV, etc.
- **Procrastination and Denial of adequate medical care** (tests, exams and treatments deemed "unnecessary" or "elective"). This practice results in *more* chronically ill prisoners in the long run, requiring *increased* Chronic Care monitoring, particularly of long-termers and the aging prison population. This in turn increases *any* private company's profits.

Therefore, Missouri CURE believes that ***under the current condition*** in which RSMo 217.230 stipulates that medical services for state prisoners are to be outsourced "on a contract basis", it is crucial that a new or renewed contract:

- Put a **cap on the profit margin**, as a disincentive to placing profit over patients; and
- Any provider's operations and spending be **accountable to independent public scrutiny**, in order to guarantee state prisoners' right to appropriate healthcare as guaranteed in Missouri statute RSMO 217.230 and in accordance with the 8th and 14th amendments of the U.S. Constitution.

However, since 2021 is expected to bring substantial changes in the expansion of Medicaid (MoHealthNet) coverage, which is anticipated to generally increase the number of health care facilities in the state, including in areas where MODOC prisons are located, we believe that ***stepping away from outsourced prisoner medical care in favor of a community-based system of medical care*** would finally allow compliance with the standard of care set forth in RSMo 217.230. It has been proven that community based healthcare is not only superior to privatized care, but is also more cost efficient.

Missouri CURE calls upon the state legislature to change the Missouri statute accordingly and enroll all prisoners in MoHealthNet. This measure would not only significantly improve prisoner health, but also provide relief for a strapped state budget, while improving work conditions for medical staff.

"Empower Missouri thanks Missouri CURE for their analysis of how profit-motive can stand in the way of high quality health care for our brothers and sisters who are in prisons," said Jeanette Mott Oxford, Director of Policy and Organizing for Empower Missouri. "The bidding process in Missouri does not presently include seeking feedback from people who will be personally impacted by the services to be provided through a contract, and that is a design flaw that needs to be changed within the Office of Administration. Prisoners and their families are the experts on how prison health care has been working in our state, and their voices ought to be heard before Missouri awards this large contract."