



U.S. Department of Justice  
Federal Bureau of Prisons

Washington, D.C. 20534

MAR 10 2021

MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

FROM: M.D. Smith, Assistant Director  
Health Services Division

SUBJECT: Waiver to Pharmacy Policy P6360.01

This national policy waiver to Pharmacy Policy P6360.01 is in response to the COVID-19 response.

P6260.01 Pharmacy Policy states:

12. **RELEASE/TRANSFER MEDICATION.** When an inmate is transferred to a CCC, up to a 90 day supply of current medication will be provided pursuant to a new medication order. The number of days supplied will be determined on a case-by-case basis, dependent upon clinical justification and release planning for the inmate (i.e. insurance, Medicaid, Aids Drugs Assistance Programs (ADAP) availability).

- Unless properly justified, a minimum of 30 days supply of chronic medications will be provided.
- Inmates requiring DEA controlled substances may be considered for transfer to a CCC after institution staff consult with the Community Corrections Manager (CCM) to determine if the respective CCC can accommodate the inmate's special medication needs.

An inmate releasing from custody will be provided a 30 day supply of medication. The medication, with directions, will be given to the releasing officer as indicated by local procedure.

National policy waiver

Due to the COVID-19 pandemic, this national policy waiver is granted to allow:

- Institutions to routinely provide a 90-day supply of appropriate medications for inmates releasing to Residential Reentry Center (RRC), Home Confinement, Full Term Release, Good Conduct Time Release, Parole, or Civil Commitment Release.
- If an inmate is being transferred to home confinement or to an RRC, an initial 90-day supply of medications may be provided. The institution may provide a refill of this 90-day supply if the inmate or RRC staff contacts the institution pharmacy, while the inmate is on home confinement or at an RRC, respectively. If an inmate on home confinement must transfer back to an RRC, an additional refill of the 90-day supply of medications may be supplied by the institution for a maximum cumulative total including refills not to exceed 270 days for this specific situation. RRC staff would need to contact the institution to obtain this second refill.

This waiver is effective until June 30, 2021.

cc: Ken Hyle, Assistant Director/General Counsel, OGC  
Louis Milusnic, Assistant Director, PRD

(b)(6); (b)(7)(C)

Jeffery D. Allen, Medical Director, HSD

(b)(6); (b)(7)(C)

CAPT A. Martin Johnston, Chief Pharmacist, HSD  
Regional Medical Directors  
Regional Health Services Administrators





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MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

FROM:

*M. D. Smith*  
M. D. Smith, Assistant Director  
Health Services Division

SUBJECT:

Waiver to Health Care Provider Credential  
Verification, Privileges, and Practice Agreement  
Program Policy P6027.02

This is national policy waiver request to Health Services policies due to the COVID-19 Pandemic.

P6027.02 Health Care Provider Credential Verification, Privileges, and Practice Agreement Program Policy states:

**3. GRANTING OF CLINICAL PRIVILEGES, PRACTICE AGREEMENTS, AND PROTOCOLS** Only LIPs will apply for, and be granted, clinical privileges in the Bureau. All physicians, dentists, and other LIPs, including contract/consultants, and those who provide a diagnosis or recommend treatment using telehealth, must have approved clinical privileges before delivering health care inside the institution, or by use of telehealth.

**4. PEER REVIEW** Peer review is a routine function used to review the current knowledge and skills of health care providers. All Bureau health care providers who are privileged must have at least one external peer review conducted every two years. The contract LIPs who are working with privileges must have at least one external peer review conducted every two years. Those who are working under a practice agreement must have at least one routine peer review conducted every two years, which may be conducted by a peer at the institution.

The BOP Office of Quality Management (OQM) accepts the completion of the MLP/RN Clinical Skills Training program to meet the requirements of this peer review.

Response to requests for policy waiver

Due to the COVID-19 pandemic and burden of the required medical response, the following requests for waiver are granted:

- All due dates for 2 year peer reviews due in the next 12 months may be postponed for 6 months after the original date.
- For providers that were already providing care to inmates at an outside healthcare facility but are now providing telehealth/WebEx services, completion of clinical privileges may be obtained within 6 months of delivering health care via telehealth/WebEx services.

National policy waiver is granted to extend time frame requirements as listed above.

This waiver is effective until June 30, 2021.

cc: Ken Hyle, Assistant Director/General Counsel, OGC  
Louis Milusnic, Assistant Director, PRD

(b)(6); (b)(7)(C)

Jeffery D. Allen, Medical Director, HSD

(b)(6); (b)(7)(C)

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HSD Branch Chiefs  
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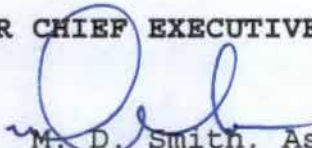


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MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

FROM:  M. D. Smith, Assistant Director  
Health Services Division

SUBJECT: Waiver to Health Services policy

Below are national policy waiver requests to Health Services policies due to the COVID-19 Pandemic:

P6340.04 Psychiatric Services Policy states:

10a **Psychiatric Medication.** Except in an emergency, informed consent will be obtained and documented prior to administering medication for psychiatric symptoms or conditions (refer to the Program Statement on Pharmacy Services). Ordinarily, the prescribing physician will be responsible for obtaining the informed consent.

P6360.01 Pharmacy Policy states:

9g. All medication orders for chronic care medications are valid for no more than 30 days with five refills totaling 180 days (**except for controlled substances unless used for seizure control and other medications specifically restricted by the BOP National Formulary**).

P6031.04 Patient Care

15. Prescribers may order chronic care medications for up to 365 days, except with the limitations outlined in the National Drug Formulary. Inmates chronically taking medications that cannot be prescribed for 365 days will be followed by a physician.

9i. Informed consent will be obtained and documented before dispensing or administering psychiatric medication. Ordinarily, the prescribing physician will be responsible for obtaining the informed consent.

Response to requests for policy waiver

Due to the COVID-19 pandemic and burden of the required medical response, the following requests for waiver are granted:

- For inmates in quarantine and medical isolation, written informed consent may be delayed for up to 14 days after the inmate is released from quarantine or isolation. In these cases, oral consent must be received and documented in the patient chart by the provider.
- Prescriptions may be filled for 90 days with 3 refills totaling up to 360 days (except for controlled substances unless used for seizure control and other medications specifically restricted by the BOP National Formulary).

National policy waiver is granted to extend time frame requirements as listed above.

This waiver is effective until June 30, 2021.

cc: Ken Hyle, Assistant Director/General Counsel, OGC  
Louis Milusnic, Assistant Director, PRD

(b)(6); (b)(7)(C)

Jeffery D. Allen, Medical Director, HSD

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MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

MAR 10 2021

FROM: *M. D. Smith*, Assistant Director  
Health Services Division

SUBJECT: Waiver to Health Services policy

This is national policy waiver request to Health Services policies due to the COVID-19 Pandemic.

6031.04 Patient care policy states:

**19a:** Short-Term Examination. For individuals in predictably short-term custody (FDCs/MCCs/ MDCs/Jails), an initial screening physical examination to determine medical needs will be done within 14 days of admission on the appropriate physical examination form.

**19b:** Long-Term Examination. For individuals in predictably long-term incarceration (sentenced/designated), an initial complete physical examination to determine medical needs will be done within 14 days of admission on the appropriate examination forms.

**15:** Initially examine all new arrivals from other institutions that have a CCC assignment, within 14 days of arrival, to establish a treatment plan and follow-up intervals appropriate for the inmate's medical needs.

**15:** Chronic Care Clinics (CCCs) are a means for inmates with ongoing medical needs to be tracked and seen by a health care provider at clinically appropriate intervals. A physician will see all inmates assigned to a CCC every 12 months, or more often if clinically indicated

6031.02 Inmate Copayment Program policy states:

The Bureau will charge a copay fee for inmate requested visits to health care providers.

6013.01 Health Services Quality Improvement

**11.c. Multi-Level Mortality Review Report (BP-S563).** The Mortality Review Committee will complete the Mortality Review Report in its entirety, and send it, accompanied by the original health record, to the Central Office, OQM **within 30 days**. Only a copy of the Mortality Review Report is to be sent to the appropriate Regional Director.

Response to requests for policy waiver

Due to the COVID-19 pandemic and burden of the required medical response, the following requests for waiver are granted:

- All 14 day intake physicals will be extend to 21 days.
- All required 14 day chronic care visits will be extended to 30 days.
- Extend 12 month chronic care clinic beyond the 12 month requirement based on care level as follows: Care Level 1 (180 days), Care level 2 (90 days), Care Level 3 (30 days), Care Level 4 (no extension).
- No sick call co-pay for COVID-like symptoms
- Extend the time for multilevel mortality reviews to 90 days for general population institutions, 120 days for MRCs, and 180 days for Central Office / external mortality reviews.

National policy waiver is granted to extend time frame requirements as listed above.

This waiver is effective until June 30, 2021.

cc: Ken Hyle, Assistant Director/General Counsel, OGC  
Louis Milusnic, Assistant Director, PRD

(b)(6); (b)(7)(C)

Jeffery D. Allen, Medical Director, HSD

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MAR 10 2021

MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

FROM: M.D. Smith, Assistant Director  
Health Services Division

SUBJECT: Waiver to Health Services Administration Policy  
P6010.05

Below are national policy waiver requests to Health Services policies due to the COVID-19 Pandemic:

P6010.05 Health Services Administration Policy states:

15. **EMERGENCY CARE**

The HSU will conduct two emergency disaster drills per year. All drills will be critiqued to identify deficiencies and opportunities to improve.

National policy waiver

Due to the COVID-19 pandemic, this national policy waiver is granted to allow:

- Institutions may use the COVID-19 Compliance Review Team (CCRT) Audit as one of the two required annual emergency disaster drills.

This waiver is effective until June 30, 2021.

cc: Ken Hyle, Assistant Director/General Counsel, OGC  
Louis Milusnic, Assistant Director, PRD

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MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

FROM: *M. D. Smith*, Assistant Director  
Health Services Division

SUBJECT: Waiver renewal to Dental Services Policy P6400.03

The Health Services Division is seeking a renewal of the previous policy waiver to Dental Services Policy P6400.03 which states:

*b. Admission and Orientation (A&O) Examination. Medical records staff will determine the admission and release status of the inmate and schedule inmates for an A&O examination.*

*The A&O examination is performed upon admission for an inmate's current incarceration within 30 calendar days of arrival. An A&O exam must be performed on inmates who have been released from BOP custody but have been readmitted on a new commitment or violation. Inmates returning from a halfway house placement or writ do not require a new A&O examination if they have had one for their current commitment.*

Policy waiver rationale:

Due to the continued COVID-19 pandemic, there is still a need to quarantine or medically isolate inmates entering our institutions. It is not recommended that dentists perform A&O examinations on quarantined or medically isolated inmates. An A&O examination should be scheduled promptly once the inmate has been cleared from quarantine. The request for waiver is granted to allow institutions 90 days from date of incarceration to perform Dental A&O exams if the additional time is needed.

BEMR documentation instructions:

If you are unable to perform an A&O examination on an inmate due to the inmate being in quarantine or as the result of a lockdown, document it in an A&O encounter with the "Reason Not



Done" as "Unavailable." The circumstances should be specified in the Comments field. Continue to follow up and perform the A&O examination as soon as the inmate is available.

Policy waiver response:

This national policy waiver is granted to extend time frame requirements as listed above and is effective through June 30, 2021.

cc: Ken Hyle, Assistant Director/General Counsel, OGC  
Louis Milusnic, Assistant Director, PRD

(b)(6); (b)(7)(C)

Jeffery D. Allen, Medical Director, HSD

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Michael W. Johnson, DDS, MPH, National Chief Dentist, HSD  
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MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

FROM: M. D. Smith, Assistant Director  
Health Services Division

SUBJECT: Waiver to Health Services Administration  
PS 6010.05

This is national policy waiver request to Health Services policies due to the COVID-19 Pandemic:

6010.05 Health Services Administration

10. **Health Care Standards** MRCs will maintain appropriate accreditations with the Joint Commission (formerly the Joint Commission on Accreditation of Healthcare Organizations [JCAHO]).

All other institutions will maintain accreditation with Joint Commission Ambulatory Care Standards.

Per [http://sallyport.bop.gov/co/hsd/quality management/AAAHC.jsp](http://sallyport.bop.gov/co/hsd/quality_management/AAAHC.jsp)  
The Accreditation Association for Ambulatory Healthcare (AAAHC)

Care Level 2 and Care Level 3 facilities maintain health care accreditation through the Accreditation Association for Ambulatory Healthcare (AAAHC)  
(<http://www.aaahc.org/>). AAAHC accreditation means that the organization participates in ongoing self-evaluation, peer review, and education to continuously improve its care and services.

Response to requests for policy waiver

Due to the COVID-19 pandemic and burden of the required medical response, the following requests for waiver are granted:

- Non-MRCs health care accreditation survey dates are postponed for 6 months beyond their due date for the next year.



National policy waiver is granted to extend time frame requirements as listed above.

This waiver is effective until June 30, 2021.

cc: Ken Hyle, Assistant Director/General Counsel, OGC  
Louis Milusnic, Assistant Director, PRD

(b)(6); (b)(7)(C)

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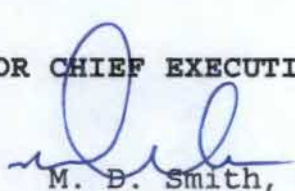
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MEMORANDUM FOR CHIEF EXECUTIVE OFFICERS

FROM:

  
M. D. Smith, Assistant Director  
Health Services Division

SUBJECT:

Waiver to Health Services Policies

This national policy waiver to 6030.01, 6190.04 and 6013.01 is in response to the COVID-19 epidemic and upcoming vaccination efforts.

P6360.01 Pharmacy Services Policy states:

a. **Pharmacy and Therapeutics (P&T) Committee.** The Clinical Director (CD) will establish a Pharmacy and Therapeutics (P&T) Committee that will meet at least quarterly.

P6190.04 Infectious Disease Management policy states:

- The CD, HSA, ICO, and other appropriate institution staff will meet at least quarterly to review the implementation of the institution's infection control and surveillance program.
- Evidence of, at a minimum, quarterly Infection Control meetings (minutes) and review of surveillance activities that are documented and included as part of the institution's Quality Improvement Program (QIP).

P6013.01 Health Services Quality Improvement states:

5. **QUALITY IMPROVEMENT (QI) METHODOLOGY.** The HSA will appoint a committee to systematically assess the QI at that institution. This committee should be interdisciplinary and include health care staff and staff from other departments and will meet at least quarterly.

8. **HEALTH SERVICES GOVERNING BODY.** The local Governing Body will meet at least quarterly but meetings may occur more frequently if deemed necessary.



National policy waiver

Due to the COVID-19 pandemic and vaccination efforts, this national policy waiver is granted to allow:

- All quarterly Governing Body, Quality Improvement, Infection Control, and Pharmacy & Therapeutics meetings due during the period of this waiver are waived.

This waiver is effective through June 30, 2021.

cc: Ken Hyle, Assistant Director/General Counsel, OGC  
Louis Milusnic, Assistant Director, PRD

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CAPT A. Martin Johnston, Chief Pharmacist, HSD

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