

240-RICR-50-00-1

## TITLE 240 – DEPARTMENT OF CORRECTIONS

### CHAPTER 50 – Fees

#### SUBCHAPTER 00 – N/A

PART 1 – Offender Supervision and Interstate Transfer Application Fee, Community Confinement Program Fees and Medical Co-Payment Fees

#### 1.1 Fees Table

DESCRIPTION OF FEE	R.I. Gen. Laws	FEE
Community Confinement*		
Supervision Fees		
Program Participation Fee	§ 42-56-10(22)	\$6.00 per day
	§ 42-56-38	
Alcohol Monitoring Device	§ 42-56-10(22)	\$3.92 per day
	§ 42-56-38	
<p>*Additional Information for Community Confinement:</p> <p>Offender agrees to return all monitoring equipment to the Community Confinement Program in the same condition as received. Offender will pay for any lost or damaged equipment according the market value. If offender is returned to the ACI for any reason, s/he understands that is his/her responsibility to have someone return the equipment to the Community Confinement Unit.</p> <p>Hardship Waiver for indigent offenders are available.</p>		
Probation & Parole		
Supervision Fees		
Non-Electronic Monitoring	§ 42-56-10(22)	

DESCRIPTION OF FEE	R.I. Gen. Laws	FEE
	§ 42-56-38	\$20.00 per month
Electronic Monitoring**	§ 42-56-10(22)	\$6.00 per day
	§ 42-56-38	
<b>**Additional Information for Electronic Monitoring:</b>  Offenders on Electronic Monitoring are not required to also pay the \$20 monthly supervision fee.  Hardship Waiver for indigent offenders are available.		
<b>Interstate Transfer</b>		
Application Fee	§ 42-56-10(22)	\$60.00
	§ 13-9.1-1.3	
<b>Medical Co-Payment</b>		
<b>Medical Services</b>		
Inmate Initiated Visit / “Sick Call Visit”	§ 42-56-10 (22)	\$3.00 per visit
	§ 42-56-38	
<b>Specialty Care</b>		
On-Site Specialist (ENT, podiatrist, oral surgeon, etc)	§ 42-56-10 (22)	\$6.00 per visit
	§ 42-56-38	(or) \$125.00 per year
Off-Site Specialist	§ 42-56-10(22)	\$6.00 per visit
	§ 42-56-38	

DESCRIPTION OF FEE	R.I. Gen. Laws	FEE
Medication		
30-Day Supply (or less depending on the prescription)	§ 42-56-10(22)	\$3.00
	§ 42-56-38	
Dental Services***		
Dental Visit	§ 42-56-10(22)	\$3.00 per visit
	§ 42-56-38	
Oral Surgeon Visits (On-Site or Off-Site)	§ 42-56-10(22)	\$6.00 per visit
	§ 42-56-38	
Dentures	§ 42-56-10(22)	\$70.00
	§ 42-56-38	
Denture Laboratory Reline, per arch	§ 42-56-10(22)	\$35.00
	§ 42-56-38	
Night Guard	§ 42-56-10(22)	\$35.00
	§ 42-56-38	
***Additional Information for Dental Services:  100% of replacement cost of any dentures lost, damaged, or destroyed, if dentures are less than two (2) years old, except where it has been determined that RIDOC staff was negligent.*		
Prosthetic Limbs / Devices / Mechanical Aids****		
50% of Acquisition Cost of Limb	§ 42-56-10(22)	

DESCRIPTION OF FEE	R.I. Gen. Laws	FEE
	§ 42-56-38	not to exceed \$250.00
****Additional Information for Prosthetics:  100% of replacement cost of any dentures lost, damaged, or destroyed, if dentures are less than two (2) years old, except where it has been determined that RIDOC staff was negligent.*		
<b>Optical Services*****</b>		
Optician, Optometrist or Ophthalmologist Visit	§ 42-56-10(22)	\$6.00 per visit
	§ 42-56-38	
Eyeglasses, Lenses or Frames (per year)	§ 42-56-10(22)	\$15.00 co-payment
	§ 42-56-38	
50% of Acquisition Cost of “Specialty” Items	§ 42-56-10(22)	not to exceed \$125.00 per item
	§ 42-56-38	
*****Additional Information for Optical Services:  100% of replacement cost of any dentures lost, damaged, or destroyed, if dentures are less than two (2) years old, except where it has been determined that RIDOC staff was negligent.*  Tinted lenses may be deemed medically necessary by an appropriate medical specialist.  Inmates may not purchase eyeglasses directly from any vendor.		
<b>Missed Appointment</b>		
Missed Routine Medical or Dental Appointments	§ 42-56-10(22)	\$3.00
	§ 42-56-38	
Missed Specialty Consultation Appointments	§ 42-56-10(22)	\$6.00

DESCRIPTION OF FEE	R.I. Gen. Laws	FEE
	§ 42-56-38	
<p>*Staff negligence is determined by the appropriate administrator (i.e., Warden or designee if custody staff is involved; Associate Director of Health Services (Corrections) if Health Care Services staff is involved.</p>		

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**TITLE 240 - DEPARTMENT OF CORRECTIONS**

**CHAPTER 50 - FEES**

**SUBCHAPTER 00 - N/A**

**PART 1 - FEES (240-RICR-50-00-1)**

Type of Filing: Refile Capabilities

**Department of State**

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Regulation Effective Date

Original Signing Date

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Department of State Initials

Department of State Date