9044

IN ASSEMBLY

January 10, 2020

- Introduced by M. of A. GOTTFRIED, WEPRIN, L. ROSENTHAL, ORTIZ, SIMON, DICKENS, ARROYO, JAFFEE, D'URSO, DE LA ROSA, ABINANTI, LAVINE, PEOPLES-STOKES, MOSLEY, AUBRY, WRIGHT, PICHARDO, STECK, COOK, WALLACE, WILLIAMS, DAVILA, BICHOTTE, TAYLOR, NIOU, SEAWRIGHT, McDONOUGH, MONTESANO, BARRON, FERNANDEZ, SAYEGH, DARLING -- Multi-Sponsored by --M. of A. CRESPO, CROUCH, DESTEFANO -- read once and referred to the Committee on Health
- AN ACT to amend the public health law, in relation to expanding health department review of correctional health services

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Subdivision 26 of section 206 of the public health law, as 1 2 amended by section 127-t of subpart B of part C of chapter 62 of the 3 laws of 2011, is amended and a new subdivision 26-a is added to read as 4 follows: 5 26. (a) The commissioner [is hereby authorized and directed to], in б consultation with the commissioner of addiction services and supports in relation to subparagraph (viii) of this paragraph, shall review any 7 8 policy or practice instituted in facilities operated by the department of corrections and community supervision, and in all local correctional 9 10 facilities, as defined in subdivision sixteen of section two of the 11 correction law, regarding: 12 (i) human immunodeficiency virus (HIV)[7] and acquired immunodeficien-13 cy syndrome (AIDS), [and] including the prevention and transmission of 14 HIV and the treatment of AIDS; 15 (ii) hepatitis C (HCV) including the prevention of the transmission of [HIV and HCV and the treatment of AIDS, HIV and] HCV [among inmates]; 16 17 (iii) women's health; 18 (iv) transgender health; 19 (v) chronic health conditions including but not limited to asthma, 20 diabetes, and heart disease; 21 (vi) health care services for individuals fifty years of age or older;

EXPLANATION--Matter in <u>italics</u> (underscored) is new; matter in brackets [-] is old law to be omitted.

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A. 9044

| 1 | (vii) discharge planning of health care services including planning |
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| 2 | for discharges requiring residential placement or long-term care |
| 3 | services; and |
| 4 | (viii) substance use disorders. |
| 5 | (b) Such [review] reviews shall be performed annually and shall focus |
| 6 | on whether such [HIV, AIDS or HCV policy] policies or [practice is] |
| 7 | practices are consistent with current, generally accepted medical stand- |
| 8 | ards and procedures [used to prevent the transmission of HIV and HCV and |
| 9 | to treat AIDS, HIV and HCV among the general public]. In performing such |
| 10 | reviews, in order to determine the quality and adequacy of care and |
| 11 | treatment provided, department personnel are authorized to enter correc- |
| 12 | tional facilities and inspect policy and procedure manuals and medical |
| 13 | protocols, interview health services providers and inmate-patients, |
| 14 | review medical grievances, and inspect a representative sample of |
| 15 | medical records of inmates [known to be infected with HIV or HCV or have |
| 16 | AIDS]. Prior to initiating a review of a correctional system, the |
| 17 | commissioner shall inform the public, including patients, their families |
| 18 | and patient advocates, of the scheduled review and invite them to |
| 19 20 | provide the commissioner with relevant information. (c) Upon the completion of such review, the department shall, in writ- |
| 20 | ing, approve such policy or practice as instituted in facilities oper- |
| 22 | ated by the department of corrections and community supervision, and in |
| 23 | any local correctional facility, or, based on specific, written recom- |
| 24 | mendations, direct the department of corrections and community super- |
| 25 | vision, or the authority responsible for the provision of medical care |
| 26 | to inmates in local correctional facilities to prepare and implement a |
| 27 | corrective plan to address deficiencies in areas where such policy or |
| 28 | practice fails to conform to current, generally accepted medical stand- |
| 29 | ards and procedures. The commissioner shall monitor the implementation |
| 30 | of such corrective plans and shall conduct such further reviews as the |
| 31 | commissioner deems necessary to ensure that identified deficiencies in |
| 32 | [HIV, AIDS and HCV] policies and practices are corrected. All written |
| 33 | reports pertaining to reviews provided for in this subdivision shall not |
| 34 | contain individual patient identifying information and shall be [main- |
| 35 | tained, under such conditions as the commissioner shall prescribe, as] |
| 36 | public information [available for public inspection] and shall be posted |
| 37 | <u>on the department's website</u> . |
| 38 | <u>26-a. (a) The department, in consultation with the department of</u> |
| 39 | corrections and community supervision, shall biennially study health |
| 40 | care staffing in facilities operated by the department of corrections |
| 41 | and community supervision and in local correctional facilities as |
| 42 | defined in subdivision sixteen of section two of the correction law. The |
| 43 | study shall examine: |
| 44 | (i) adequacy of staffing, including in specialties such as women's, |
| 45 | transgender, and geriatric health care; |
| 46 | (ii) potential challenges such as salary adequacy or geographic |
| 47 | factors; and |
| 48 | (iii) impact of staffing levels on availability of services. |
| 49 | (b) The first such study shall be completed and submitted to the |
| 50 | governor, the temporary president of the senate, and the speaker of the |
| 51 52 | assembly no later than one year after the effective date of this subdi- |
| 52 52 | vision. |
| 53 | § 2. This act shall take effect immediately. |

2