AN ACT to amend the public health law, in relation to expanding review of correctional health services and health care staffing at correctional facilities

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 amended by chapter 45 of the laws of 2021, is amended and a new subdivision 26-a is added to read as follows:

26. (a) The commissioner [is hereby authorized and directed to], in consultation with the commissioner of addiction services and supports, shall review any policy or practice instituted in facilities operated by the department of corrections and community supervision, and in all local correctional facilities, as defined in subdivision sixteen of section two of the correction law, regarding:

(i) human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS);
(ii) hepatitis C (HCV),
(iii) COVID-19, including the prevention of the transmission of and the treatment of such infections and diseases among inmates;
(iv) emerging infectious diseases;
(v) women's health;
(vi) transgender health;
(vii) chronic health conditions including but not limited to asthma, diabetes, and heart disease;
(viii) health care services for individuals fifty years of age or older;

EXPLANATION--Matter in italics (underscored) is new; matter in brackets [ ] is old law to be omitted.
(ix) discharge planning of health care services including planning for discharges requiring residential placement or long-term care services; and

(x) substance use disorders.

(b) Such reviews shall be performed at least annually, and shall focus on whether such policies or practices are consistent with current, generally accepted medical standards and procedures used to prevent the transmission of and to treat those infections and diseases among the general public. In performing such reviews, in order to determine the quality and adequacy of care and treatment provided, department personnel are authorized to enter correctional facilities and inspect policy and procedure manuals and medical protocols, interview health services providers and inmate-patients, review medical grievances, and inspect a representative sample of medical records of inmates known to be infected with any such infections or diseases. Prior to initiating a review of a correctional system, the commissioner shall inform the public, including patients, their families and patient advocates, of the scheduled review and invite them to provide the commissioner with relevant information.

(c) Upon the completion of such review, the department shall, in writing, approve such policy or practice as instituted in facilities operated by the department of corrections and community supervision, and in any local correctional facility, or, based on specific, written recommendations, direct the department of corrections and community supervision, or the authority responsible for the provision of medical care to inmates in local correctional facilities to prepare and implement a corrective plan to address deficiencies in areas where such policy or practice fails to conform to current, generally accepted medical standards and procedures. The commissioner shall monitor the implementation of such corrective plans and shall conduct such further reviews as the commissioner deems necessary to ensure that identified deficiencies in those policies and practices are corrected. All written reports pertaining to reviews provided for in this subdivision shall not contain individual patient identifying information and shall be maintained, under such conditions as the commissioner shall prescribe, as public information available for public inspection and shall be posted on the department’s website.

(d) As used in this subdivision, "emerging infectious disease" means an infection that has increased recently or is threatening to increase in the near future.

26-a. (a) The department, in consultation with the department of corrections and community supervision, shall biennially study health care staffing in facilities operated by the department of corrections and community supervision and in local correctional facilities as defined in subdivision sixteen of section two of the correction law. The study shall examine:

(i) adequacy of staffing, including in specialties such as women’s, transgender, and geriatric health care;

(ii) potential challenges such as salary adequacy or geographic factors; and

(iii) impact of staffing levels on availability of services.

(b) The first such study shall be completed and submitted to the governor, the temporary president of the senate, and the speaker of the assembly no later than one year after the effective date of this subdivision.

§ 2. This act shall take effect immediately.