

STATE OF NEW YORK

6386--A

2021-2022 Regular Sessions

IN ASSEMBLY

March 16, 2021

Introduced by M. of A. GOTTFRIED, WEPRIN, L. ROSENTHAL, SIMON, DICKENS, ABINANTI, LAVINE, PEOPLES-STOKES, AUBRY, STECK, COOK, WALLACE, WILLIAMS, DAVILA, BICHOTTE HERMELYN, TAYLOR, NIOU, SEAWRIGHT, McDONOUGH, MONTESANO, FERNANDEZ, SAYEGH, DARLING -- Multi-Sponsored by -- M. of A. DeSTEFANO -- read once and referred to the Committee on Health -- reported and referred to the Committee on Ways and Means -- recommitted to the Committee on Ways and Means in accordance with Assembly Rule 3, sec. 2 -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

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:

1 Section 1. Subdivision 26 of section 206 of the public health law, as
2 separately amended by chapters 45 and 322 of the laws of 2021, is
3 amended and a new subdivision 26-a is added to read as follows:

4 26. (a) The commissioner [~~is hereby authorized and directed to~~], in
5 consultation with the commissioner of addiction services and supports in
6 relation to subparagraph (x) of this paragraph, shall review any policy
7 or practice instituted in facilities operated by the department of
8 corrections and community supervision, and in all local correctional
9 facilities, as defined in subdivision sixteen of section two of the
10 correction law, regarding:

11 (i) human immunodeficiency virus (HIV)[~~7~~] and acquired immunodeficien-
12 cy syndrome (AIDS)[~~7~~];

13 (ii) hepatitis C (HCV)[~~7~~ and];

14 (iii) COVID-19[~~7~~ including the prevention of the transmission of and
15 the treatment of such infections and diseases among incarcerated indi-
16 viduals];

17 (iv) emerging infectious diseases;

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

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- 1 (v) women's health;
2 (vi) transgender health;
3 (vii) chronic health conditions including but not limited to asthma,
4 diabetes, and heart disease;
5 (viii) health care services for individuals fifty years of age or
6 older;
7 (ix) discharge planning of health care services including planning for
8 discharges requiring residential placement or long-term care services;
9 and
10 (x) substance use disorders.

11 (b) Such [~~review~~] reviews shall be performed at least annually, and
12 shall focus on whether such [~~policy or practice is~~] policies or prac-
13 tices are consistent with current, generally accepted medical standards
14 and procedures used to prevent the transmission of and to treat those
15 infections and diseases among the general public. In performing such
16 reviews, in order to determine the quality and adequacy of care and
17 treatment provided, department personnel are authorized to enter correc-
18 tional facilities and inspect policy and procedure manuals and medical
19 protocols, interview health services providers and incarcerated indivi-
20 dual-patients, review medical grievances, and inspect a representative
21 sample of medical records of incarcerated individuals known to be
22 infected with any such infections or diseases. Prior to initiating a
23 review of a correctional system, the commissioner shall inform the
24 public, including patients, their families and patient advocates, of the
25 scheduled review and invite them to provide the commissioner with rele-
26 vant information.

27 (c) Upon the completion of such review, the department shall, in writ-
28 ing, approve such policy or practice as instituted in facilities oper-
29 ated by the department of corrections and community supervision, and in
30 any local correctional facility, or, based on specific, written recom-
31 mendations, direct the department of corrections and community super-
32 vision, or the authority responsible for the provision of medical care
33 to incarcerated individuals in local correctional facilities to prepare
34 and implement a corrective plan to address deficiencies in areas where
35 such policy or practice fails to conform to current, generally accepted
36 medical standards and procedures. The commissioner shall monitor the
37 implementation of such corrective plans and shall conduct such further
38 reviews as the commissioner deems necessary to ensure that identified
39 deficiencies in those policies and practices are corrected. All written
40 reports pertaining to reviews provided for in this subdivision shall not
41 contain individual patient identifying information and shall be [~~main-~~
42 ~~tained, under such conditions as the commissioner shall prescribe, as~~]
43 public information [~~available for public inspection~~] and shall be posted
44 on the department's website.

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

48 26-a. (a) The department, in consultation with the department of
49 corrections and community supervision, shall biennially study health
50 care staffing in facilities operated by the department of corrections
51 and community supervision and in local correctional facilities as
52 defined in subdivision sixteen of section two of the correction law. The
53 study shall examine:

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

- 1 (ii) potential challenges such as salary adequacy or geographic
- 2 factors; and
- 3 (iii) impact of staffing levels on availability of services.
- 4 (b) The first such study shall be completed and submitted to the
- 5 governor, the temporary president of the senate, and the speaker of the
- 6 assembly no later than one year after the effective date of this subdi-
- 7 vision.
- 8 § 2. This act shall take effect immediately.