

# STATE OF NEW YORK

4062

2025-2026 Regular Sessions

## IN ASSEMBLY

January 31, 2025

Introduced by M. of A. GRAY, McDONOUGH, K. BROWN, BEEPHAN -- read once and referred to the Committee on Correction

AN ACT to amend the correction law and the mental hygiene law, in relation to providing medication assisted treatment for opioid use disorders to incarcerated individuals in county correctional facilities

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

1 Section 1. Subdivision 19 of section 45 of the correction law, as  
2 amended by chapter 486 of the laws of 2022, is amended to read as  
3 follows:

4 19. Establish standards and guidelines for a program of medication  
5 assisted treatment for incarcerated individuals in county jails and/or  
6 county correctional facilities [~~equivalent to the program established in  
7 state correctional facilities pursuant to section six hundred twenty six  
8 of this chapter and submit an annual report consistent with the require-  
9 ments of subdivision three of such section~~] pursuant to section 19.18-c  
10 of the mental hygiene law.

11 § 2. Subdivision 5 of section 505 of the correction law, as added by  
12 chapter 147 of the laws of 2022, is amended to read as follows:

13 5. Corrections-based substance use disorder treatment and transition  
14 services. Local correctional facilities shall operate a substance use  
15 disorder treatment and transition services program pursuant to a plan  
16 approved by the commissioner of the office of addiction services and  
17 supports in accordance with section 19.18-c of the mental hygiene law  
18 and section five hundred six of this article.

19 § 3. The correction law is amended by adding a new section 506 to read  
20 as follows:

21 § 506. Medical testing for opioid use. 1. All incarcerated individuals  
22 within county correctional facilities will be medically tested for  
23 opioid use upon incarceration.

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

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1 2. Such testing shall be done by an organization, agency or medical  
2 professional that is separate and independent from the providers of  
3 medication assisted treatment.

4 3. Incarcerated individuals who test positive for opioid use shall be  
5 informed of their eligibility for medication assisted treatment in  
6 accordance with section 19.18-c of the mental hygiene law.

7 § 4. Section 19.18-c of the mental hygiene law, as amended by chapter  
8 147 of the laws of 2022, is amended to read as follows:

9 § 19.18-c Corrections-based substance use disorder treatment and transi-  
10 tion services.

11 1. Notwithstanding any other provision of this chapter, the commis-  
12 sioner, in consultation with local governmental units, county sheriffs,  
13 the New York city department of corrections and other stakeholders,  
14 shall implement a jail-based substance use disorder treatment and tran-  
15 sition services program that supports the initiation, operation and  
16 enhancement of substance use disorder treatment and transition services  
17 for persons with substance use disorder who are incarcerated in jails.

18 2. The services to be provided by such program shall be in accordance  
19 with plans developed by participating local governmental units, in  
20 collaboration with county sheriffs, [~~taking into account local needs and~~  
21 ~~available resources~~] medical professionals and correctional administra-  
22 tors for the most effective, least costly methods. These plans must be  
23 approved by the commissioner and shall include, but not be limited to,  
24 the following:

25 (a) Alcohol, benzodiazepine, heroin and opioid withdrawal management;

26 (b) [~~At least one formulation of every form of~~] Such formulations of  
27 medication assisted treatments approved for the treatment of a substance  
28 use disorder by the Federal Food and Drug Administration necessary to  
29 ensure that each individual participating in the program receives the  
30 particular form found to be the most effective, least costly method at  
31 treating and meeting their individual needs while minimizing the diver-  
32 sion of medication within the facility. The commissioner may allow  
33 jails a limited exemption to providing opioid full agonist treatment  
34 medications where the commissioner determines that no providers that  
35 have received the required accreditation are located within a reasonable  
36 distance of the facility. Jails that do not have the resources avail-  
37 able to meet standards set forth herein may apply to the commissioner  
38 for a limited exception allowing such jail to enter into an agreement  
39 with a community- or jail-based program offering substance use disorder  
40 treatment and transition services to provide such services to individ-  
41 uals in such jails. Any such determination shall be reviewed on a regu-  
42 lar basis;

43 (c) Group and individual counseling and clinical support;

44 (d) Peer support;

45 (e) Discharge planning; [~~and~~]

46 (f) Behavioral therapies; and

47 (g) Re-entry and transitional supports.

48 3. (a) After [~~a~~] medical [~~screening~~] testing, incarcerated individuals  
49 who are determined to suffer from a substance use disorder for which  
50 medication assisted treatment exists shall be offered placement in the  
51 medication assisted treatment program. Placement in such program shall  
52 not be mandatory.

53 (b) Each participating incarcerated individual shall work with an  
54 authorized specialist to develop an individualized treatment plan,  
55 including an appropriate level of counseling and planning for continuity  
56 of care upon return to the community.

1 (c) Decisions regarding type, dosage, or duration of any medication  
2 regimen shall be made by a qualified health care professional licensed  
3 or certified under title eight of the education law who is authorized to  
4 administer such medication in conjunction with the incarcerated individ-  
5 ual and shall be done in consultation with correctional administrators  
6 for the most effective, least costly method.

7 (d) Participation in the medication assisted treatment program shall  
8 not be unreasonably withheld from a qualified incarcerated individual.  
9 An incarcerated individual using medication assisted treatment prior to  
10 such individual's incarceration shall be eligible to, upon request by  
11 such individual[~~, continue such treatment in the medication assisted~~  
12 ~~treatment program for any period of time during the duration of such~~  
13 ~~individual's incarceration]~~ within seventy-two hours of incarceration,  
14 receive such treatment and shall continue such treatment for any period  
15 of time during the duration of incarceration at the option of such indi-  
16 vidual.

17 (e) If not actively in medication assisted treatment throughout incar-  
18 ceration, the individual may, within four weeks prior to such incarcer-  
19 ated individual's scheduled release date, participate in medication  
20 assisted treatment, provided such incarcerated individual tested posi-  
21 tive for opioid use or was actively participating in a treatment plan  
22 prior to incarceration.

23 (f) No person shall be denied participation in the program on the  
24 basis of a positive drug screening upon entering custody or upon intake  
25 into the program; nor shall any person receive a disciplinary infraction  
26 for such positive drug screening. No person shall be removed from, or  
27 denied participation in the program on the basis of having received any  
28 disciplinary infraction: (1) before entry into the program; or (2)  
29 during participation in the program.

30 4. Within amounts appropriated therefor, funding shall be made avail-  
31 able pursuant to criteria established by the office of addiction  
32 services and supports in consultation with local governmental units,  
33 which shall take into consideration the local needs and resources as  
34 identified by local governmental units, the average daily jail popu-  
35 lation, the average number of persons incarcerated in the jail that  
36 require substance use disorder services and such other factors as may be  
37 deemed necessary.

38 5. The office of addiction services and supports shall develop and  
39 implement a training program for correctional staff and healthcare  
40 providers necessary for the implementation of medication assisted treat-  
41 ment.

42 6. Any jail-based substance use disorder treatment and transition  
43 services program that is already in operation at the time this act shall  
44 have become law and meets or exceeds the standards set forth in this  
45 section shall be deemed to have met the requirements of subdivisions one  
46 and two of this section. Such programs shall certify annually in writing  
47 to the commissioner that they have met or exceeded the standards set  
48 forth herein.

49 § 5. This act shall take effect on the ninetieth day after it shall  
50 have become a law. Effectively immediately, the addition, amendment  
51 and/or repeal of any rule or regulation necessary for the implementation  
52 of this act on its effective date are authorized to be made and  
53 completed on or before such date.