

STATE OF NEW YORK

5317

2025-2026 Regular Sessions

IN SENATE

February 20, 2025

Introduced by Sen. BAILEY -- read twice and ordered printed, and when printed to be committed to the Committee on Crime Victims, Crime and Correction

AN ACT to amend the correction law and the mental hygiene law, in relation to data collected for medication assisted treatment programs at correctional facilities

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

1 Section 1. Subdivision 3 of section 626 of the correction law, as
2 separately amended by chapters 147 and 486 of the laws of 2022, is
3 amended to read as follows:

4 3. The commissioner shall [~~submit within one year of the effective~~
5 ~~date of this section and annually thereafter, a report to the governor,~~
6 ~~the temporary president of the senate and the speaker of the assembly on~~
7 ~~the effectiveness of the program established pursuant to this section.~~
8 ~~Such reports shall include an analysis of the impact of such program on~~
9 ~~the participating incarcerated individuals, including factors such as~~
10 ~~institutional adjustment, behavior infractions, reentry rates, HIV and~~
11 ~~hepatitis C treatment, and program participation, among related relevant~~
12 ~~factors. The reports shall also include the impact on institutional~~
13 ~~safety and performance and any recommendations for additional legisla-~~
14 ~~tive enactments that may be needed or required to improve or enhance the~~
15 ~~program as determined to be appropriate by the commissioner], along with
16 the state commission of correction, provide data necessary to complete
17 the report required by subdivision (h) of section 19.07 of the mental
18 hygiene law to the commissioner of the office of addiction services and
19 supports.~~

20 § 2. Subdivision (h) of section 19.07 of the mental hygiene law, as
21 separately amended by chapters 322 and 494 of the laws of 2021, is
22 amended to read as follows:

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

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1 (h) The office of addiction services and supports shall monitor
2 programs providing care and treatment to incarcerated individuals who
3 have a history of alcohol or substance use disorder or dependence in
4 correctional facilities operated by the department of corrections and
5 community supervision [~~who have a history of alcohol or substance use~~
6 ~~disorder or dependence~~] and local counties. The office shall also
7 develop guidelines for the operation of alcohol and substance use disorder
8 treatment programs in such correctional facilities, based on best
9 practices, and tailored to the nature of the individual's substance use,
10 history of past treatment, and history of mental illness or trauma,
11 which may include harm reduction strategies, in order to ensure that
12 such programs sufficiently meet the needs of incarcerated individuals
13 with a history of alcohol or substance use disorder or dependence and
14 promote the successful transition to treatment in the community upon
15 release. No later than the first day of December of each year, the
16 office in collaboration with the department of corrections and community
17 supervision and the state commission of correction shall submit a report
18 regarding: (1) the adequacy and effectiveness of alcohol and substance
19 use disorder treatment programs operated by the department of
20 corrections and community supervision and local counties, including
21 medication assisted treatment programs as established by section 19.18-c
22 of this article and section six hundred twenty-six of the correction
23 law; (2) the total number of incarcerated individuals and the demograph-
24 ic information of such incarcerated individuals including race, ethnici-
25 ty, gender and age in each correctional [~~facilities that have been~~
26 ~~screened for, and determined to have, a substance use disorder~~]
27 facility; (3) information regarding which substances incarcerated indi-
28 viduals are most often dependent upon and the available treatment for
29 such individuals within each correctional facility; (4) the total number
30 of individuals who participate in each of the treatment programs oper-
31 ated by the department of corrections and community supervision and
32 local counties; [~~and~~] (5) the total number of individuals who partic-
33 ipated in a substance use disorder treatment program but failed to
34 complete such program, as well as whether such failure to complete the
35 program was a result of disciplinary action taken by the facility
36 against the individual for instances unrelated to their participation in
37 the treatment program; and (6) information regarding medication assisted
38 treatment programs operated by the department of corrections and commu-
39 nity supervision and local counties, for which all indices shall be
40 broken down by race, ethnicity, gender and age, and which shall include
41 the following:
42 (i) the number of individuals screened at each facility and at what
43 point during such individual's incarceration they were screened and how
44 many had an existing prescription for a medication to treat substance
45 use disorder before becoming incarcerated;
46 (ii) the number of individuals determined to have a substance use
47 disorder that can be treated with one of the Federal Food and Drug
48 Administration (FDA) approved medications available;
49 (iii) the number of individuals offered such medication;
50 (iv) the number of individuals who accepted or declined such medica-
51 tion and the reason for rejection if available;
52 (v) the medication types used, for how many people, including the
53 average dosage amount for each form of medication for substance use
54 disorder used;

1 (vi) whether and at what point dosages changed, including for people
2 with existing prescriptions for a medication to treat substance use
3 disorder;

4 (vii) the regulatory structure used to provide methadone to each
5 patient including: the name of any community-based opioid treatment
6 programs each facility is utilizing to obtain methadone and the distance
7 from the facility, whether the facility is operating as a medication
8 unit of the opioid treatment program, and/or whether the facility is
9 providing methadone directly by registering with the Federal Drug
10 Enforcement Agency as a hospital and/or clinic;

11 (viii) the number and types of medical providers on staff to prescribe
12 buprenorphine or naltrexone and the number and types of staff needed to
13 administer such medications;

14 (ix) the types and dosages of opioid overdose reversal medications
15 stocked at each facility and the number of times it was used including
16 data about usage prior to implementation of the medication assisted
17 treatment program;

18 (x) the rates of overdose by incarcerated individuals prescribed medi-
19 cations for opioid use disorder including which medication was used for
20 treatment and the overall rates of overdose in each facility before and
21 after implementation of the medication assisted treatment program;

22 (xi) the rates of other health issues associated with substance use
23 disorder including HIV, hepatitis C, and mental health diagnoses;

24 (xii) an analysis of the impact of such alcohol and substance use
25 disorder treatment programs on participating incarcerated individuals,
26 including institutional adjustment, behavior infractions, and re-entry
27 rates, among other relevant factors. Such analysis shall also include
28 the impact on institutional safety and performance and any recommenda-
29 tions for additional legislative actions that may be needed or required
30 to improve or enhance the program as determined to be appropriate by the
31 commissioner; and

32 (xiii) the number of incidents involving illicit substances in the
33 facility before and after the initiation of medications for substance
34 use disorder. The department of corrections and community supervision
35 and local counties shall provide the office with information needed to
36 complete this report. Such report shall be made available to the public
37 on the office's website and sent to the governor, the temporary presi-
38 dent of the senate, the speaker of the assembly, the [~~chairman~~] chair-
39 person of the senate committee on crime victims, crime and correction,
40 and the [~~chairman~~] chairperson of the assembly committee on correction.

41 § 3. This act shall take effect immediately.