

STATE OF NEW YORK

5317--A

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 -- recommitted to the Committee on Crime Victims, Crime and Correction in accordance with Senate Rule 6, sec. 8 -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee

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.~~

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

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

4 (h) The office of addiction services and supports shall monitor
5 programs providing care and treatment to incarcerated individuals who
6 have a history of alcohol or substance use disorder or dependence in
7 correctional facilities operated by the department of corrections and
8 community supervision [~~who have a history of alcohol or substance use~~
9 ~~disorder or dependence~~] and local counties. The office shall also

10 develop guidelines for the operation of alcohol and substance use disor-
11 der treatment programs in such correctional facilities, based on best
12 practices, and tailored to the nature of the individual's substance use,
13 history of past treatment, and history of mental illness or trauma,
14 which may include harm reduction strategies, in order to ensure that
15 such programs sufficiently meet the needs of incarcerated individuals
16 with a history of alcohol or substance use disorder or dependence and
17 promote the successful transition to treatment in the community upon
18 release. No later than the first day of December of each year, the
19 office in collaboration with the department of corrections and community
20 supervision and the state commission of correction shall submit a report
21 regarding: (1) the adequacy and effectiveness of alcohol and substance
22 use disorder treatment programs operated by the department of
23 corrections and community supervision and local counties, including
24 medication assisted treatment programs as established by section 19.18-c
25 of this article and section six hundred twenty-six of the correction
26 law; (2) the total number of incarcerated individuals and the demograph-
27 ic information of such incarcerated individuals including race, ethnici-
28 ty, gender and age in each correctional [~~facilities~~] facility that have
29 been screened for[~~, and determined to have,~~] a substance use disorder
30 and the total number of such individuals determined to have a substance
31 use disorder that can be treated with a federal food and drug adminis-
32 tration approved medication; (3) information regarding which substances
33 incarcerated individuals are most often dependent upon and the available
34 treatment for such individuals within each correctional facility; (4)
35 the total number of individuals who participate in each of the treatment
36 programs operated by the department of corrections and community super-
37 vision and local counties; [~~and~~] (5) the total number of individuals who
38 participated in a substance use disorder treatment program but failed to
39 complete such program, as well as whether such failure to complete the
40 program was a result of disciplinary action taken by the facility
41 against the individual for instances unrelated to their participation in
42 the treatment program; and (6) information regarding medication assisted
43 treatment programs operated by the department of corrections and commu-
44 nity supervision and local counties, for which all indices shall be
45 broken down by race, ethnicity, gender and age, and which shall include
46 the following:

47 (i) the number of individuals who accepted or declined such medication
48 and the reason for rejection if available;

49 (ii) the medication types used, for how many people, including the
50 average dosage amount for each form of medication for substance use
51 disorder used;

52 (iii) whether and at what point dosages changed, including for people
53 with existing prescriptions for a medication to treat substance use
54 disorder;

55 (iv) the regulatory structure used to provide methadone to each
56 patient including: the name of any community-based opioid treatment

1 programs each facility is utilizing to obtain methadone and the distance
2 from the facility, whether the facility is operating as a medication
3 unit of the opioid treatment program, and/or whether the facility is
4 providing methadone directly by registering with the Federal Drug
5 Enforcement Agency as a hospital and/or clinic;

6 (v) the types and dosages of opioid overdose reversal medications
7 stocked at each facility and the number of times it was used including
8 data about usage prior to implementation of the medication assisted
9 treatment program;

10 (vi) the rates of overdose by incarcerated individuals prescribed
11 medications for opioid use disorder including which medication was used
12 for treatment and the overall rates of overdose in each facility before
13 and after implementation of the medication assisted treatment program;

14 (vii) the rates of other health issues associated with substance use
15 disorder including but not limited to HIV, hepatitis C, and mental
16 health diagnoses;

17 (viii) the number of incidents involving illicit substances in the
18 facility before and after the initiation of medications for substance
19 use disorder. The department of corrections and community supervision
20 and local counties shall provide the office with information needed to
21 complete this report. Such report shall be made available to the public
22 on the office's website and sent to the governor, the temporary presi-
23 dent of the senate, the minority leader of the senate, the speaker of
24 the assembly, the minority leader of the assembly, the [~~chairman~~] chair-
25 person of the senate committee on crime victims, the ranking member of
26 the senate committee on crime victims, the chair-person of the senate
27 committee on crime and correction, [~~and the chairman~~] the chair-person
28 of the senate committee on alcoholism and substance use disorders, the
29 ranking member of the senate committee on alcoholism and substance use
30 disorders, the chair-person of the assembly committee on correction, the
31 ranking member of the assembly committee on correction, the chair-person
32 of the assembly committee on alcoholism and drug abuse, and the ranking
33 member of the committee on alcoholism and drug abuse.

34 § 3. This act shall take effect immediately.