



House of Representatives

General Assembly

File No. 828

January Session, 2019

Substitute House Bill No. 7395

House of Representatives, April 29, 2019

The Committee on Judiciary reported through REP. STAFSTROM of the 129th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING OPIOID ABUSE AND TREATMENT.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective October 1, 2019*) Not later than forty-five
2 days before the scheduled release of an inmate from the custody of the
3 Commissioner of Correction, including release subject to parole or
4 supervised community setting, the commissioner shall provide each
5 inmate suffering from opioid use disorder, or at risk of developing or
6 relapsing into an opioid use disorder, information and counseling
7 regarding opioid use disorder treatment options, including
8 information on how to access such options after being released into the
9 community.

10 Sec. 2. (NEW) (*Effective July 1, 2019*) (a) On or before January 1, 2020,
11 the Department of Correction, in consultation with the Departments of
12 Public Health and Mental Health and Addiction Services, shall
13 establish a medication-assisted treatment program in correctional
14 facilities for inmates with opioid use disorder. During the first year of
15 operation, at least five correctional facilities shall participate in the

16 program. During the second year of operation, at least thirty per cent
17 of all inmates in correctional facilities shall have access to the program.
18 During the third year of operation, at least sixty per cent of all inmates
19 in correctional facilities shall have access to the program. During the
20 fourth year and for each subsequent year of operation, one hundred
21 per cent of all inmates in correctional facilities shall have access to the
22 program.

23 (b) Correctional facilities that participate in the program shall (1)
24 establish procedures that enable qualified correctional staff to dispense
25 and administer all drugs approved by the federal Food and Drug
26 Administration for use in medication-assisted treatment of opioid use
27 disorder, and (2) make such treatment available under the program to
28 any inmate for whom such treatment is found to be appropriate by a
29 qualified, licensed health care provider. The program shall ensure that
30 an inmate who has been receiving medication-assisted treatment for
31 opioid use disorder immediately preceding the inmate's incarceration
32 shall continue such treatment while incarcerated unless the inmate
33 voluntarily discontinues such treatment or a qualified, licensed health
34 care provider determines that such treatment is no longer appropriate.
35 To the extent practicable, the Department of Correction shall prioritize
36 placement of inmates who have been receiving medication-assisted
37 treatment for opioid use disorder immediately preceding their
38 incarceration in a correctional facility that provides access to the
39 program.

40 (c) Not later than November 1, 2020, and annually thereafter until
41 November 1, 2024, the Commissioner of Correction shall report to the
42 Governor and, in accordance with the provisions of section 11-4a of the
43 general statutes, to the joint standing committees of the General
44 Assembly having cognizance of matters relating to public health and
45 the judiciary:

46 (1) The cost of the program in the prior year;

47 (2) The projected cost associated with expanding the program to
48 additional correctional facilities for the following year;

49 (3) A summary of changes to correctional facility practices related to
50 implementation of the program;

51 (4) The type and prevalence of medication-assisted treatment
52 provided under the program; and

53 (5) The number of inmates who (A) received medication-assisted
54 treatment under the program, (B) voluntarily discontinued
55 medication-assisted treatment, and (C) requested but did not receive
56 medication-assisted treatment.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2019</i>	New section
Sec. 2	<i>July 1, 2019</i>	New section

JUD *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 20 \$	FY 21 \$
Correction, Dept.	GF - Cost	2,191,879	2,238,934
State Comptroller - Fringe Benefits ¹	GF - Cost	352,399	371,780

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill requires the Department of Correction (DOC) to establish a medication-assisted treatment (MAT) program for inmates with opioid use disorder and to provide counseling to these inmates and results in a cost to the state. In order to provide the counseling and the MAT program the DOC would have to hire 13 employees (10 counselors, one counselor supervisor, and two MAT program coordinators) for a salary and fringe benefit cost of \$1.2 million in FY 20 and \$1.3 million in FY 21. Approximately 1,400 inmates would qualify for treatment and counselling.

The bill also requires the MAT program to be available at five facilities in the first year and available to 30% of the population in the second year, resulting in a \$1.3 million cost in FY 20 and 21. The cost of treatment is estimated at \$100 per week for each inmate with opioid use disorder.

The Out Years

¹The fringe benefit costs for most state employees are budgeted centrally in accounts administered by the Comptroller. The estimated active employee fringe benefit cost associated with most personnel changes is 41.19% of payroll in FY 20 and FY 21.

State Impact:

Agency Affected	Fund-Effect	FY 22 \$	FY 23 \$	FY 24 \$
Correction, Dept.	GF - Cost	4,037,138	6,898,199	6,898,199
State Comptroller - Fringe Benefits	GF - Cost	371,780	371,780	371,780

Note: GF=General Fund

In FY 22 the MAT program increases to cover 60% of the population for a cost of \$3.1 million and in FY 23 increases to 100% of the population for a cost of \$6.0 million. The figures also include the salary and fringe benefits associated with administering the program.

Municipal Impact: None

OLR Bill Analysis

sHB 7395

AN ACT CONCERNING OPIOID ABUSE AND TREATMENT.

SUMMARY

This bill requires the Department of Correction (DOC), by January 1, 2020 and in consultation with the departments of public health and mental health and addiction services, to establish a medication-assisted treatment (MAT) program in correctional facilities for inmates with opioid use disorder. (Generally, MAT programs provide federal Food and Drug Administration (FDA)-approved medications, in combination with counseling and behavioral therapies, to treat substance use disorders.)

Under the bill, program participation is as follows: (1) at least five correctional facilities must participate in the first year, (2) at least 30% of all correctional facility inmates must have program access in the second year, (3) at least 60% of inmates must have program access in the third year, and (4) all inmates must have program access from the fourth year on. The bill establishes program requirements regarding staff procedures for MAT and treatment access.

The bill requires the DOC commissioner to annually report for five years to the governor and Public Health and Judiciary committees on the program, beginning by November 1, 2020 and ending November 1, 2024.

Additionally, the bill requires the commissioner to provide inmates who have opioid use disorder or are at risk of developing or relapsing into the disorder with information and counseling on treatment options, including how to access them after being released into the community. The commissioner must do this at least 45 days before an inmate's scheduled release from DOC custody, including a release

subject to parole or a supervised community setting.

EFFECTIVE DATE: July 1, 2019, except the provision requiring the commissioner to provide certain inmates with opioid use treatment information prior to their release takes effect October 1, 2019.

MAT PROGRAM REQUIREMENTS

Under the bill, correctional facilities participating in the program must:

1. establish procedures enabling qualified correctional staff to dispense and administer all FDA-approved drugs for use in MAT for opioid use disorder and
2. make the treatment available to any inmate for whom a qualified, licensed health care provider finds it appropriate.

The bill also requires that the program ensure that an inmate receiving MAT for opioid use disorder immediately preceding his or her incarceration continues the treatment while incarcerated unless (1) the inmate voluntarily discontinues it or (2) a qualified, licensed health care provider determines it is no longer appropriate.

Under the bill, DOC must, to the extent practicable, prioritize placing inmates who were receiving MAT for opioid use disorder immediately preceding their incarceration in a facility with access to the program.

REPORTING REQUIREMENTS

The bill requires the DOC commissioner's annual report to include:

1. the program's cost for the prior year, as well as the projected cost to expand the program to additional correctional facilities for the following year;
2. a summary of changes to correctional facility practices related to the program's implementation;

3. the type and prevalence of MAT the program provided; and
4. how many inmates received MAT under the program, voluntarily discontinued the treatment, and requested but did not receive the treatment.

COMMITTEE ACTION

Judiciary Committee

Joint Favorable Substitute

Yea 37 Nay 0 (04/10/2019)