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)