

1 S.166

2 Introduced by Senators Ashe, Ayer, and Sears

3 Referred to Committee on

4 Date:

5 Subject: Human services; corrections; medication-assisted treatment

6 Statement of purpose of bill as introduced: This bill proposes to enable opioid-  
7 dependent inmates to receive medication-assisted treatment in State  
8 correctional facilities from providers employed by opioid treatment programs  
9 throughout the State.

10 An act relating to the provision of medication-assisted treatment for inmates

11 It is hereby enacted by the General Assembly of the State of Vermont:

12 Sec. 1. 18 V.S.A. § 4750 is added to read:

13 § 4750. DEFINITION

14 As used in this chapter, “medication-assisted treatment” means the use of  
15 certain medications, including either methadone or buprenorphine, in  
16 combination with counseling and behavioral therapies for the treatment of a  
17 substance use disorder.

18 Sec. 2. 28 V.S.A. § 801 is amended to read:

19 § 801. MEDICAL CARE OF INMATES

20 \* \* \*

1 (b) Upon admission to a correctional facility for a minimum of 14  
2 consecutive days, each inmate shall be given a physical assessment unless  
3 extenuating circumstances exist. The physical assessment shall include  
4 screening for opioid dependence.

5 \* \* \*

6 (e)(1) Except as otherwise provided in this subsection, an offender who is  
7 admitted to a correctional facility while under the medical care of a licensed  
8 physician, a licensed advanced practice registered nurse, or a licensed nurse  
9 practitioner and who is taking medication at the time of admission pursuant to  
10 a valid prescription as verified by the inmate's pharmacy of record, primary  
11 care provider, other licensed care provider, or as verified by the Vermont  
12 Prescription Monitoring System or other prescription monitoring or  
13 information system, including buprenorphine, methadone, or other medication  
14 prescribed in the course of medication-assisted treatment, shall be entitled to  
15 continue that medication and to be provided that medication by the Department  
16 pending an evaluation by a licensed physician, a licensed physician assistant, a  
17 licensed nurse practitioner, or a licensed advanced practice registered nurse.  
18 However, the Department may defer provision of medication in accordance  
19 with this subsection if, in the clinical judgment of a licensed physician, a  
20 physician assistant, a nurse practitioner, or an advanced practice registered  
21 nurse, it is not in the inmate's best interest to continue the medication at that

1 time. The licensed practitioner who makes the clinical judgment shall enter the  
2 reason for the discontinuance into the inmate's permanent medical record. It is  
3 not the intent of the General Assembly that this subsection shall create a new  
4 or additional private right of action.

5 (2) If an inmate screens positive for opioid dependence pursuant to  
6 subsection (b) of this section and had not been receiving medication-assisted  
7 treatment prior to admission, the inmate may elect to commence medication-  
8 assisted treatment if it is deemed clinically appropriate and in the inmate's best  
9 interest by a provider employed by the nearest opioid treatment program  
10 certified and accredited pursuant to 42 C.F.R. Part 8.

11 (3) As used in this subsection, "medication-assisted treatment" shall  
12 have the same meaning as in 18 V.S.A. § 4750.

13 \* \* \*

14 Sec. 3. 28 V.S.A. § 801b is added to read:

15 § 801b. INMATES RECEIVING MEDICATION-ASSISTED TREATMENT

16 (a) The Departments of Corrections and of Health shall work  
17 collaboratively to ensure that an inmate screening positive for opioid  
18 dependence at the time of admission to a State correctional facility shall be  
19 allowed to continue or commence clinically appropriate medication-assisted  
20 treatment while in the facility.

1        (b) The Departments shall contract with opioid treatment programs  
2        throughout the State, certified and accredited pursuant to 42 C.F.R. Part 8, that  
3        serve regions in which a State correctional facility is located to provide  
4        clinically appropriate medication-assisted treatment in the facility to an inmate  
5        screening positive for opioid dependence pursuant to section 801 of this  
6        section. Treatment received pursuant to this section shall be coordinated  
7        pursuant to 18 V.S.A. § 4753.

8        (c) As used in this section, “medication-assisted treatment” shall have the  
9        same meaning as in 18 V.S.A. § 4750.

10       Sec. 4. RULE; MEDICATION-ASSISTED TREATMENT IN STATE

11                    CORRECTIONAL FACILITIES

12        (a) The Commissioners of Health and of Corrections shall adopt a rule  
13        pursuant to 3 V.S.A. chapter 25 governing the provision of medication-assisted  
14        treatment to opioid-dependent inmates pursuant to 28 V.S.A. §§ 801 and 801b.

15        (b) As used in this section, “medication-assisted treatment” shall have the  
16        same meaning as in 18 V.S.A. § 4750.

17        Sec. 5. EFFECTIVE DATE

18        This act shall take effect on July 1, 2018.