

**O'NEILL
INSTITUTE**
FOR NATIONAL & GLOBAL HEALTH LAW

GEORGETOWN LAW

A NATIONAL SNAPSHOT UPDATE

ACCESS TO MEDICATIONS
FOR OPIOID USE DISORDER IN U.S.
JAILS AND PRISONS

LITIGATION, LEGISLATION, AND POLICIES

ABOUT THIS REPORT

This report is a product of the Addiction and Public Policy Initiative of the O'Neill Institute for National and Global Health Law at Georgetown Law Center. The essential vision for the O'Neill Institute rests upon the proposition that the law has been, and will remain, a fundamental tool for solving critical health problems in our local, national, and global communities. The Addiction and Public Policy Initiative works to advance a public health approach to substance use disorders and the overdose epidemic through policies, practices, and regulations that promote evidence based treatment and recovery.

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50 STATE SURVEY UPDATES

THE OVERDOSE EPIDEMIC IS RAVAGING OUR COMMUNITIES. In the twelve-month period ending in January 2022, over 107,000 people died of an overdose.¹ Of these overdose deaths, over 80,000 involved opioids, including over 71,000 deaths involving synthetic opioids like illicitly-manufactured fentanyl.² The risk of overdose death is especially severe for individuals leaving incarceration. Studies have found that individuals leaving incarceration are between 56 and 129 times more likely than the general population to die of an overdose shortly after reentry.³

The crisis is getting worse for nearly all demographic groups, but especially for Black and Indigenous communities. Since 2015, the death rate from drug overdose has skyrocketed especially among Black men and Indigenous men.⁴ Black and Indigenous communities are also both disproportionately incarcerated in state prisons and local jails.⁵

The number of people experiencing overdoses shortly after reentry is alarming, however, a common sense, evidence-based approach to reduce overdose deaths exists: the use of FDA-approved agonist⁶ medications for opioid use disorder (MOUD); specifically, methadone and buprenorphine. These medications have been proven to reduce the risk of death from any cause by 85% and the risk of death from an overdose by 75% in the weeks following release from incarceration.⁷ A recent report evaluating the impact of using these medications to treat OUD in New York City jails found an 80% decrease in overdose mortality upon reentry among those provided with MOUD.⁸

Despite overwhelming evidence of their safety and efficacy, the majority of jails and prisons in the United States do not provide these medications.⁹ Among jails and prisons that provide MOUD, some still fall short of providing adequate care. Some jails and prisons only continue MOUD for individuals who were receiving MOUD in the community (a practice known as “maintenance”), rather than initiating MOUD, if it is clinically appropriate, for those not already receiving it in the community (a practice known as “induction”). Other jails and prisons only provide naltrexone (brand name Vivitrol), an FDA-approved antagonist¹⁰ medication. This medication, while appropriate for some patients, has not been proven to be as effective as the agonist medications for treating OUD.¹¹ This is because it is more difficult to successfully initiate a patient on naltrexone, compared to an agonist medication like buprenorphine.¹² Patients must withdraw from opioids prior to initiation of naltrexone, which may result in painful withdrawal symptoms before they can use the medication.¹³ One study shows that, in correctional populations, naltrexone reduces rates of relapse in the short term, but has no effect on reducing return to

use after one year.¹⁴ This leads to an increased risk of relapse and fatal overdose for individuals who do not successfully get initiated on naltrexone. Thus, as noted by the CDC,¹⁵ it is critical that individuals have choice amongst the three medications.

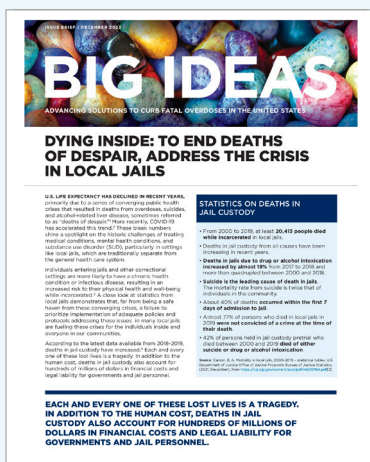
In July 2021, the O’Neill Institute published “National Snapshot: Access to Medications for Opioid Use Disorder in U.S. Jails and Prisons” outlining litigation, state legislation, and policies on access to medications for opioid use disorder (MOUD) in United States jails and prisons.¹⁶ This document supplements that snapshot and documents the growing momentum behind access to MOUD in jails and prisons throughout the country. This growth has occurred in rural, suburban, and urban areas.

The growth in access to MOUD in carceral settings is driven by a variety of factors, including litigation victories and settlements in cases brought by public interest lawyers in places like [New York](#) and [Michigan](#), by the U.S. Department of Justice in places like [Massachusetts](#) and [Kentucky](#), legislative efforts in [New York](#) and [Colorado](#), and executive action in [Ohio](#). Momentum has also accelerated due to [new guidance](#) issued by the U.S. Department of Justice’s Civil Rights Division in 2021 underscoring protections afforded to individuals under the American with Disabilities Act. Studies in [New York](#) and [Rhode Island](#), where some correctional facilities already provide MOUD, have further established that MOUD reduces the risk of overdose death.

This snapshot highlights the progress that has been made since July 2021. First, we summarize federal efforts on the issue. Then, we review states in which there were changes, and discuss major legislation, litigation, and regulatory/executive action on this issue that occurred since our last publication. This snapshot is accurate as of December 2022.

FEDERAL GUIDANCE AND REGULATORY REFORM

The Biden Administration’s National Drug Control Strategy establishes a goal of increasing the number of jails and prisons offering MOUD by 50% by 2025.¹⁷



The Department of Justice released guidance underscoring that a correctional facility’s blanket policy denying MOUD, and thus failing to allow an incarcerated person to continue MOUD treatment before their detention, amounts to an ADA violation.¹⁸ The DOJ also brought cases to this effect, discussed below. For more on the ADA and substance use disorder, [see our Big Ideas brief](#).¹⁹

In 2021, the Drug Enforcement Administration (DEA) issued a [rule](#) allowing for mobile methadone units, thereby potentially opening the door for expanded access to methadone for incarcerated individuals.²⁰

STATE BY STATE OVERVIEW

BELOW ARE UPDATES FROM INDIVIDUAL STATES:



CALIFORNIA

A report documenting findings from 2019 through 2021 showed that since introducing MOUD into California state prisons, overdose deaths among currently incarcerated people dropped by 58%.²¹ Additionally, hospitalizations were 48% lower for people who receive MOUD in prison than for those who were still waiting to receive care.²²

In June 2022, California adopted its 2022-2023 state budget, which included \$126.6 million in 2022-23 and \$162.5 million ongoing to expand the Integrated Substance Use Disorder Treatment Program Project, which includes all three forms of MOUD in state correctional facilities.²³

In October 2021, Governor Newsom signed AB653, the Medication-Assisted Treatment Grant Program, a three-year pilot program that will last until January 1, 2026. These county grants, to be awarded by the Board of State and Community Corrections, will be used for the treatment of incarcerated individuals with substance use disorders, including access to MOUD throughout the period of incarceration.²⁴ The legislation does not explicitly require the availability of agonist medications.



COLORADO

In May 2022, Governor Polis signed HB22-1326 into law. This law requires public and private jail facilities to provide incarcerated individuals with OUD access to, and a choice among, the three FDA-approved medications for opioid use disorder beginning July 2023.²⁵ This

legislation also mandates jails to assess individuals for substance use withdrawal symptoms and to develop protocols for withdrawal management care, such as medical withdrawal and medication for opioid use disorder treatment. Denver's jail recently expanded its medications for opioid use disorder program, which now includes access to all three FDA-approved medications, as well as induction and maintenance of MOUD.²⁶



GEORGIA

A 2022 report released by the Georgia Department of Corrections indicated that one prison facility conducted a pilot MOUD program with only the antagonist naltrexone available.²⁷ The report indicates a willingness to expand this program should there be additional funding; the report is silent on future availability of opioid agonist forms of MOUD medications.



ILLINOIS

After litigation was brought against DuPage County's jail challenging its MOUD policy,²⁸ the jail established a methadone program and is working to create a buprenorphine program for incarcerated individuals.²⁹ The jail makes naltrexone available for people upon leaving the jail. According to media reports, other county jails in Illinois are beginning MOUD programs, with the Lee County Law Enforcement Center being the fifth county jail in the state to announce its intention to begin offering MOUD.³⁰

 **KANSAS**

Public reporting in February 2022 indicates that the Sedgwick County and Crawford County jails began to allow incarcerated individuals to initiate or continue buprenorphine during incarceration.³¹

 **KENTUCKY**

The U.S. Attorney for the Eastern District of Kentucky announced an agreement with the Fayette County Detention Center to continue MOUD treatment for individuals who were receiving it in the community prior to incarceration.³² The agreement requires access to all three FDA-approved medications for opioid use disorder.

 **MAINE**

In May 2022, Governor Mills signed L.D. 1654/H.P. 1225 into law, which establishes funding and oversight measures for county jails. The law requires each county jail in Maine to adopt rules providing access to substance use disorder screening, assessment, treatment to include all three FDA-approved forms of MOUD, recovery, and reentry services.³³

 **MASSACHUSETTS**

The United States Attorney for the District of Massachusetts announced in April 2022 that, under the terms of a cooperative agreement, all state and county correctional facilities will provide all three FDA-approved medications for individuals already in treatment prior to entering the facility.³⁴ According to the U.S. Attorney, the Worcester, Plymouth, and Dukes County Sheriff's Offices will provide all three

medications before the end of 2022 and all remaining state and local correctional facilities now offer the medications.

In addition, the U.S. Department of Justice settled an investigation into the practices of the Massachusetts Trial Court system, with an agreement to stop the practice of “requiring drug court participants to stop taking medications used to treat opioid use disorder and either pressured or required participants to undergo treatment without a medical assessment.”³⁵

 **MICHIGAN**

In October 2021, a lawsuit was filed on behalf of an individual incarcerated at a northern Michigan county jail because the jail denied him his prescribed buprenorphine. Alleging a violation of a soon-to-be incarcerated individual's Eighth Amendment rights and the ADA, the plaintiff requested an injunction ordering the jail to provide incarcerated individuals with their prescribed MOUD. The parties settled, with the county agreeing to provide the plaintiff with Suboxone during his incarceration, cover the cost of his medication, and pay the ACLU \$25,000 in legal fees and costs.³⁶

 **MINNESOTA**

The state of Minnesota released survey findings showing that fewer than half of the corrections facilities in the state provide MOUD, and that of those that do, over 80 percent provide at least one agonist form of MOUD.³⁷

 **NEW MEXICO**

In December 2022, a lawsuit was filed against the New Mexico state prison system on behalf of individuals with opioid use disorder, alleging that their denial of MOUD amounts to a violation of the ADA and the Eighth Amendment.⁴¹ The suit is unique in that Disability Rights New Mexico, the state's Protection and Advocacy program, is the plaintiff and represents its constituents with opioid use disorder. The suit is currently pending.

 **NEW YORK**

NY S7703 was signed into law by Governor Hochul in March 2022. The law requires state prisons and local jails to provide MOUD to individuals diagnosed with OUD, regardless of whether they have been receiving MOUD in the community.³⁸ The program must include all three forms of FDA-approved medications and individualized treatment plans for each participant. The legislation includes protections for an incarcerated person's right to stay on the medication, regardless of disciplinary violations inside the correctional facility.

In September 2021, the U.S. District Court for the Northern District of New York enjoined the Jefferson County Jail from denying an incarcerated person MOUD upon incarceration, ruling that such a denial violated the Americans with Disabilities Act and the Fourteenth Amendment.³⁹ In May 2022 in a related class action, the court ruled that the jail was required to provide agonist MOUD to all incarcerated people who had received it in the community prior to it upon entry into the jail.⁴⁰

 **NORTH CAROLINA**

In 2021, the North Carolina General Assembly's final budget allocated \$2 million in recurring funds for MOUD in jails.⁴² This \$2 million specifically limited permissible medication administration to naltrexone and did not allow funding for methadone and buprenorphine.⁴³ However, the state's 2022 budget now allows funding for all three FDA-approved medications for opioid use disorder.⁴⁴

A woman in North Carolina sued the state prison system for forcibly withdrawing her from her buprenorphine shortly after giving birth.⁴⁵ The suit is pending.

 **OHIO**

The Ohio Department of Rehabilitation and Corrections, the state prison system, announced a \$2.8 million contract to provide people diagnosed with OUD who are in the state prison system with methadone and buprenorphine treatment by October 2022.⁴⁶

 **PENNSYLVANIA**

In April 2022, a federal district court allowed a case arising out of George W. Hill Correctional Facility in Delaware County, Pennsylvania to move forward. This suit included a claim that would require the jail to pay monetary damages due to the jail's requirement that the individual withdraw from methadone treatment during incarceration.⁴⁷

The United States Department of Justice also sued the Unified Judicial System of Pennsylvania for violating the Americans with Disabilities Act by prohibiting use of MOUD in its court supervision and probation programs.⁴⁸

Both cases are pending at the time of publication.



RHODE ISLAND

In May 2022, the Office of the U.S Attorney for the District of Rhode Island entered into an agreement with the Wyatt Detention Facility, which holds detainees of the United States Marshals Service (USMS) and Immigration and Customs Enforcement (ICE). Under the terms of the agreement, the facility will allow individuals to continue receiving MOUD while they are detained.⁴⁹



SOUTH CAROLINA

The South Carolina Department of Corrections released a protocol in September 2021 providing only the antagonist medication naltrexone to incarcerated people upon release.⁵⁰



SOUTH DAKOTA

As of December 2021, the South Dakota Department of Social Services Division of Behavioral Health screens individuals for SUD upon entry to the correctional system. South Dakota officials report that there is an MOUD pilot program in the women's prison, but incarcerated men are connected to MOUD treatment only upon release.⁵¹



TEXAS

Legislation introduced in Texas in 2021-2022 to require MOUD in the state prison system died in committee.⁵²



VERMONT

In January 2022, the Vermont Department of Corrections reported that legislation passed in 2018 mandating that all state correctional facilities provide MOUD was associated with an increase in MOUD engagement and a decrease in opioid-related overdoses after release from incarceration.⁵³



WASHINGTON

The Washington State Health Care Authority Division of Behavioral Health and Recovery is coordinating a local jail MOUD program in jails statewide, with \$5 million in FY 2022 and \$5 million in FY 2023 funding.⁵⁴



WISCONSIN

In April 2022, Dane County Jail officials announced that individuals would be maintained on Subutex, a form of buprenorphine, upon entry into the jail.⁵⁵ County officials have expressed an intention to expand the program.

ENDNOTES

- 1 Press Release, Centers for Disease Control and Prevention, *U.S. Overdose Deaths In 2021 Increased Half as Much as in 2020 – But Are Still Up 15%* (May 11, 2022), https://www.cdc.gov/nchs/pressroom/nchs_press_releases/2022/202205.htm.
- 2 Id.
- 3 Ingrid A. Binswanger et al., *Release From Prison — A High Risk of Death for Former Inmates*, *N Engl J Med* 2007; 356:157D–165 (Jan. 11, 2007), <https://doi.org/10.1056/nejmsa064115>; Massachusetts Department of Public Health, *Data Brief: An Assessment of Opioid-Related Deaths in Massachusetts 2013-2014* (Sept. 2016), <https://www.mass.gov/doc/data-brief-chapter-55-opioid-overdose-study-september-2016/download>.
- 4 John Gramlich, *Recent Surge in U.S. Drug Overdose Deaths Has Hit Black Men the Hardest*, Pew Research Center (Jan. 19, 2022), [https://www.pewresearch.org/fact-tank/2022/01/19/recent-surge-in-u-s-drug-overdose-deaths-has-hit-black-men-the-hardest/#:~:text=There%20were%2054.1%20fatal%20drug,men%20\(27.3%20per%20100%2C000\)](https://www.pewresearch.org/fact-tank/2022/01/19/recent-surge-in-u-s-drug-overdose-deaths-has-hit-black-men-the-hardest/#:~:text=There%20were%2054.1%20fatal%20drug,men%20(27.3%20per%20100%2C000)).
- 5 John Gramlich, *Black Imprisonment Rate in the U.S. Has Fallen by a Third Since 2006*, Pew Research Center (May 6, 2020), <https://www.pewresearch.org/fact-tank/2020/05/06/share-of-black-white-hispanic-americans-in-prison-2018-vs-2006/>; Chart, *U.S. Incarceration Rates by Race and Ethnicity*, 2010, Prison Policy Initiative (2020), <https://www.prisonpolicy.org/graphs/raceinc.html>; Todd D. Minton and Zhen Zeng, *Jail Inmates in 2020 – Statistical Tables*, Bureau of Justice Statistics (Dec. 2021), <https://bjs.ojp.gov/content/pub/pdf/ji20st.pdf>.
- 6 An opioid agonist medication binds to the opioid receptors in the brain, unlike an opioid antagonist medication which blocks activation of the opioid receptors. Research Report, *How Do Medications to Treat Opioid Use Disorder Work?*, National Institute on Drug Abuse (Dec. 2021), <https://nida.nih.gov/publications/research-reports/medications-to-treat-opioid-addiction/how-do-medications-to-treat-opioid-addiction-work>.
- 7 John Marsden et al., *Does Exposure to Opioid Substitution Treatment in Prison Reduce the Risk of Death After Release? A National Prospective Observational Study in England*, *Addiction* 112: 1408–1418 (Feb. 4, 2017), <https://onlinelibrary.wiley.com/doi/10.1111/add.13779>.
- 8 Sungwoo Lim et al., *Association Between Jail-based Methadone or Buprenorphine Treatment for Opioid Use Disorder and Overdose Mortality after Release from New York City Jails 2011–17*, *Addiction* (Oct. 28, 2022), <https://onlinelibrary.wiley.com/doi/abs/10.1111/add.16071?campaign=wolacceptedarticle>.
- 9 *Opioid Use Disorder Treatment in Jails and Prisons*, Pew Charitable Trusts (Apr. 23, 2020), <https://www.pewtrusts.org/en/research-and-analysis/issue-briefs/2020/04/opioid-use-disorder-treatment-in-jails-and-prisons>.
- 10 Research Report, *How Do Medications to Treat Opioid Use Disorder Work?*, National Institute on Drug Abuse (Dec. 2021), <https://nida.nih.gov/publications/research-reports/medications-to-treat-opioid-addiction/how-do-medications-to-treat-opioid-addiction-work>.
- 11 Joshua Lee et al., *Comparative Effectiveness of Extended-release Naltrexone Versus Buprenorphine-naloxone for Opioid Relapse Prevention (X:BOT): a Multicentre, Open-label, Randomised Controlled Trial*, 391(10118) *The Lancet* 309–318 (Jan. 27, 2018), [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(17\)32812-X/fulltext?elsca=tlxpr](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(17)32812-X/fulltext?elsca=tlxpr).
- 12 Id.
- 13 *Naltrexone*, Substance Abuse and Mental Health Services Administration (Sept. 27, 2022), <https://www.samhsa.gov/medication-assisted-treatment/medications-counseling-related-conditions/naltrexone>.
- 14 Joshua D. Lee et al., *Extended-Release Naltrexone to Prevent Opioid Relapse in Criminal Justice Offenders*, 374(13) *N. Engl. J. Med* 1232–42 (Mar. 2016), https://www.nejm.org/doi/10.1056/NEJMoa1505409?url_ver=Z39.88-2003&rfr_id=ori:rid:crossref.org&rfr_dat=cr_pub%20%20www.ncbi.nlm.nih.gov.
- 15 Jennifer J. Carroll et al., *Linking People with Opioid Use Disorder to Medication Treatment*, Centers for Disease Control and Prevention, at 22 (2022), https://www.cdc.gov/drugoverdose/pdf/pubs/Linkage-to-Care_Edited-PDF_508-3-15-2022.pdf.
- 16 Shelly Weizman et al., *National Snapshot: Access to Medications for Opioid Use Disorder in U.S. Jails and Prisons*, O’Neill Institute for National and Global Health Law at Georgetown Law Center (July 28, 2021), <https://oneill.law.georgetown.edu/publications/national-snapshot-access-to-medications-for-opioid-use-disorder-in-u-s-jails-and-prisons/>.
- 17 *National Drug Control Strategy*, The White House Executive Office of the President Office of National Drug Control Policy, at 17 (Apr. 2022), <https://www.whitehouse.gov/wp-content/uploads/2022/04/National-Drug-Control-2022Strategy.pdf>.
- 18 *The Americans with Disabilities Act and the Opioid Crisis*, U.S. Department of Justice (Apr. 5, 2022), https://archive.ada.gov/opioid_guidance.pdf.
- 19 Regina LaBelle et al., *The Americans with Disabilities Act and Substance Use Disorder*, The O’Neill Institute for National and Global Health Law at Georgetown Law Center (Sept. 2022), https://oneill.law.georgetown.edu/wp-content/uploads/2022/09/ONL_BI20_ADA_SUD_P10.pdf.
- 20 21 C.F.R. §§ 1300, 1301, 1304.
- 21 *Transforming Substance Use Disorder Treatment in California’s Prison System*, California Correctional Health Care Services (Apr. 2022), <https://cchcs.ca.gov/wp-content/uploads/sites/60/ISUDT/Impacts-ISUDT-Program2019-22.pdf>.
- 22 Id.
- 23 Corrections and Rehabilitation, California State Budget Enacted 2022–2023, <https://www.ebudget.ca.gov/2022-23/pdf/Enacted/GovernorsBudget/5210.pdf>.
- 24 A.B. 653, 2021 Leg., Reg. Sess. (Cal. 2021), https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=20210220AB653.
- 25 Fentanyl Accountability and Prevention Bill, H.B. 22-1326, 74th Gen. Assemb., 1st Reg. Sess. (Colo. 2022), <https://leg.colorado.gov/bills/hb22-1326>.
- 26 David Heitz, *Denver Jails Expand Medication-Assisted Addiction Treatment*, NewsBreak (Oct. 6, 2022), <https://original.newsbreak.com/@david-heitz-561257/2771429473405-denver-jails-expand-medication-assisted-addiction-treatment>.
- 27 Georgia Prison Program, *Current FY2022 RSAT Funded Program* (Updated June 1, 2020), https://www.rsat-tta.com/pdfs/GA_RSAT_Compndium_11-20.
- 28 *Finnigan v. Mendrick*, 2021 WL 736228 (N.D. Ill. Feb. 24, 2021).

- 29 *Medicated Assisted Recovery Program*, DuPage County Sheriff's Office, <https://www.dupagesheriff.org/medicatedAssistedRecoveryProgram>.
- 30 Anthony Ferretti, *Lee County Jail Could Be One of the First in the State to Offer Medication Assisted Treatment*, WIFR (July 15, 2022), <https://www.wifr.com/2022/07/16/lee-county-jail-could-be-one-first-state-offer-medication-assisted-treatment/>.
- 31 Celia Llopis-Jensen, *A Few Kansas Jails are Finally Allowing Medical Care for Opioid Addiction*, Kansas City Public Radio (Feb. 6, 2022), <https://www.kcur.org/news/2022-02-16/a-few-kansas-jails-are-finally-allowing-medical-care-for-opioid-addiction>.
- 32 Press Release, U.S. Department of Justice, *U.S. Attorney's Office Announces Agreement to Ensure Access to Medications for Opioid Use Disorder at Fayette County Detention Center*, U.S. Department of Justice (Nov. 8, 2022), <https://www.justice.gov/usao-edky/pr/us-attorney-s-office-announces-agreement-ensure-access-medications-opioid-use-disorder>.
- 33 H.P. 1225, 130th Leg., 2d Reg. Sess. (Me. 2022), <https://legislature.maine.gov/bills/getPDF.asp?paper=HP1225&item=3&snum=130>.
- 34 Press Release, U.S. Department of Justice, U.S. Attorney's Office - Dist. of Mass., *U.S. Attorney Rollins Announces Correctional Facilities Statewide to Maintain All Medications for Opioid Use Disorder* (Apr. 1, 2022), <https://www.justice.gov/usao-ma/pr/us-attorney-rollins-announces-correctional-facilities-statewide-maintain-all-medications#:~:text=BOSTON%20%E2%80%93%20The%20U.S.%20Attorney's%20Office,entering%20a%20carceral%20facility's%20custody%2C>.
- 35 Press Release, U.S. Department of Justice, U.S. Attorney's Office - Dist. of Mass., *U.S. Attorney's Office Settles Disability Discrimination Allegations with the Massachusetts Trial Court Concerning Access to Medications for Opioid Use Disorder*, (Mar. 24, 2022), <https://www.justice.gov/usao-ma/pr/us-attorney-s-office-settles-disability-discrimination-allegations-massachusetts-trial>.
- 36 *Patson v. Grand Traverse Co.*, No. 21-cv-912 (W.D. Mich. Jan 19, 2022).
- 37 *Treating Opioid Use Disorder for Criminal-Justice-Involved Individuals*, Minnesota's State Portal, https://mn.gov/mmb/assets/Treating%20Opioid%20Use%20Disorder%20for%20Criminal-Justice-Involved%20Individuals_tcm1059-511580.pdf (last visited July 19, 2022).
- 38 S. S7703, 2021-2022 Gen. Assemb., Reg. Sess. (N.Y. 2022), <https://www.nysenate.gov/legislation/bills/2021/S7703>.
- 39 *P.G. v. Jefferson Co.*, 2021 WL 4059409 (N.D.N.Y. Sept. 7, 2021)
- 40 *M.C. V. Jefferson Co.*, 2022 WL 1541462 (N.D.N.Y. May 16, 2022).
- 41 *Disability Rights New Mexico v. Tafoya Lucero*, No. 22-cv-00954 (Dec. 15, 2022)
- 42 S. 105, 2021-2022 Gen. Assemb., Reg. Sess. (N.C. 2022), <https://www.ncleg.gov/BillLookup/2021/S105>.
- 43 Taylor Knopf, *Tweaks in State Opioid Funding Could Mean Big Changes for People With Addiction*, North Carolina Health News (July 7, 2022), <https://www.northcarolinahealthnews.org/2022/07/07/tweaks-in-opioid-funding-could-mean-big-changes-for-people-with-substance-use-disorder/>.
- 44 Id.
- 45 Elizabeth Thompson, *Woman Sues NC State Prison System for Mistreatment While Pregnant*, North Carolina Health News (May 25, 2022), <https://www.northcarolinahealthnews.org/2022/05/25/woman-sues-nc-state-prison-system-for-mistreatment-while-pregnant/>.
- 46 Dave O'Brien, *Lorain Correctional Now Providing Medication-assisted Treatment to Inmates*, The Chronicle (Sept. 3, 2022), <https://chroniclet.com/news/324689/lorain-correctional-now-providing-medication-assisted-treatment-to-inmates/>.
- 47 *Strickland v. Delaware Co.*, No. 2:21-CV-04141-MMB, 2022 WL 1157485 (E.D. Pa. Apr. 19, 2022).
- 48 *United States v. Unified Jud. Syst. of Penn.*, No. 22-cv-709 (E.D. Pa. 2022).
- 49 Press Release, U.S. Department of Justice, U.S. Attorney's Office - Dist. of R.I., *Wyatt Detention Center to Provide Opioid Use Disorder Treatment to Detainees in Treatment Prior to Detention* (May 23, 2022), <https://www.justice.gov/usao-ri/pr/wyatt-detention-center-provide-opioid-use-disorder-treatment-detainees-treatment-prior>.
- 50 *Mental Health Services - Medication Assisted Treatment Program Delivery Protocol, SCDC Policy HS-19.16*, South Carolina Department of Corrections (2021), <https://www.doc.sc.gov/policy/HS-19-16.htm.pdf>.
- 51 *DSS Correctional Behavioral Health Overview*, South Dakota Department of Social Services, https://dss.sd.gov/docs/behavioralhealth/resources/12.08.21_Slides.pdf (last visited Dec. 12, 2022).
- 52 H.B. 1640, 87th Leg., Reg. Sess. (Tex. 2021), <https://capitol.texas.gov/BillLookup/History.aspx?LegSess=87R&Bill=HB1640>.
- 53 Elias M. Klemperer et al., *A Statewide Evaluation of the Implementation and Effectiveness of Medications for Opioid Use Disorder in Vermont Correctional Facilities and the Impact of COVID-19*, Vt. Gen. Assemb. (Jan. 24, 2022), <https://legislature.vermont.gov/Documents/2022/WorkGroups/House%20Corrections%20and%20Institutions/Reports%20and%20Resources/W-Department%20of%20Corrections-Act%20176%20-%20Evaluation%20of%20the%20Effectiveness%20of%20the%20Medication-assisted%20Treatment>.
- 54 Factsheet, *Medication for opioid use disorder (MOUD) in jails program*, Washington State Health Care Authority (Jan. 2022), <https://www.hca.wa.gov/assets/program/fact-sheet-moud-in-jails-2022.pdf>.
- 55 Juliana Tornabene, *Program to Help Those with Opioid Addiction Implemented at Dane Co. Jail*, NBC15 WMTV (Apr. 12, 2022), <https://www.nbc15.com/2022/04/12/program-help-those-with-opioid-addiction-implemented-dane-co-jail/>.

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