

Department of Legislative Services

Maryland General Assembly

2006 Session

FISCAL AND POLICY NOTE

House Bill 1199

(Delegate Smigiel, *et al.*)

Judiciary

Judicial Proceedings

Task Force to Study the Feasibility of Establishing a Correctional Facility for the Incarceration and Treatment of Sex Offenders

This bill creates a Task Force to Study the Feasibility of Establishing a Correctional Facility for the Incarceration and Treatment of Sex Offenders to: (1) study whether sex offenders can be treated and rehabilitated; (2) study the feasibility and cost effectiveness of operating a separate correctional facility for their incarceration and treatment; (3) study the findings and recommendations from relevant national advisory committees, federal agencies, and peer-reviewed medical, correctional, and legal literature; and (4) if a separate facility is not feasible and cost effective, identify and recommend alternatives to establishing a separate facility.

The bill provides for the membership of the task force and requires staffing to be provided by the Department of Legislative Services. The task force must report its findings and recommendations to the Governor and the General Assembly by September 30, 2007. The bill's provisions terminate October 1, 2007.

Fiscal Summary

State Effect: Any expense reimbursements for task force members and staffing costs for the Department of Legislative Services are assumed to be minimal and absorbable within existing budgeted resources.

Local Effect: None.

Small Business Effect: None.

Analysis

Background: There are 17 states with statutes that authorize the confinement and treatment of sexual predators following completion of their criminal sentences: Arizona, California, Florida, Illinois, Iowa, Kansas, Massachusetts, Minnesota, Missouri, New Jersey, North Dakota, Pennsylvania, South Carolina, Texas, Virginia, Washington, and Wisconsin. Generally these programs authorize civil confinement of sex offenders identified as “sexually violent predators.”

According to a study by the Washington State Institute for Public Policy (March 2005), it is difficult to directly compare reported costs for these state programs because the service delivery models vary so much. Frequently, budget figures are spread across multiple parts of state government and not pro-rated to capture the sexually violent predator program portions. In any case, the cost of operating secure facilities for such commitments in the United States is at least \$224 million annually. States with small numbers of program residents will naturally have higher costs per resident.

Washington opened a new facility for such commitments in 2004, California opened a new 1,500-bed facility in 2005, and Florida is planning construction of a new 600-bed facility.

It is possible that the U. S. Congress will pass the Children’s Safety Act of 2005 (HR 3132) during 2006. This federal legislation would, in part:

- require the U.S. Attorney General to (1) maintain a national sex offender registry at the Federal Bureau of Investigation; (2) establish a sex offender management assistance program; and (3) authorize sex offender apprehension grants;
- amend (1) the DNA Identification Act of 1994 to expand the scope of DNA samples to be included in the Combined DNA Index System; and (2) the DNA Analysis Backlog Elimination Act of 2000 to authorize the Attorney General to collect DNA samples from individuals who are arrested or detained under U.S. authority;
- increase penalties for violent crimes against persons under age 18, including death or life imprisonment, if the crime results in the death of a person under that age, and increase penalties for sexual offenses against children;
- require background checks and checks of national crime information databases and state child abuse registries before approval of foster or adoptive placements; and
- establish (1) procedures for the civil commitment of sexually dangerous persons; and (2) mandatory minimum penalties for child sex trafficking.

Maryland's Clifton T. Perkins Hospital Center was established in 1960. The hospital serves as the State's sole maximum security psychiatric hospital. Perkins currently has 215 operated beds and operates at 100% capacity. In the 2006 capital budget, funding was provided to complete design and construct a new 48-bed maximum security wing, which will create additional capacity and allow the consolidation of the more difficult forensic mental health clients at Perkins. The services at Perkins include comprehensive treatment for violent offenders of correctional institutions and detention centers who meet the criteria for involuntary commitments and psychiatric treatment for those patients whose mental illness manifests itself in such aggressive and violent behavior as to render it impossible for them to be treated within the regional State psychiatric hospitals. The anticipated completion date of the new wing is June 2007.

Additional Information

Prior Introductions: None.

Cross File: None.

Information Source(s): Department of Legislative Services, Department of Public Safety and Correctional Services

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