SENATE BILL 774

By: Senator Carter
Introduced and read first time: February 7, 2022
Assigned to: Judicial Proceedings

A BILL ENTITLED

AN ACT concerning

Correctional Services – Medical Parole – Life Imprisonment

FOR the purpose of repealing provisions relating to gubernatorial approval of a decision of
the Maryland Parole Commission to grant medical parole to an inmate serving a
term of life imprisonment; and generally relating to medical parole.

BY repealing and reenacting, with amendments,

Article – Correctional Services
Section 7–309
Annotated Code of Maryland
(2017 Replacement Volume and 2021 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That the Laws of Maryland read as follows:

Article – Correctional Services

7–309.

(a) This section applies to any inmate who is sentenced to a term of incarceration
for which all sentences being served, including any life sentence, are with the possibility of
parole.

(b) An inmate who is so chronically debilitated or incapacitated by a medical or
mental health condition, disease, or syndrome as to be physically incapable of presenting a
danger to society may be released on medical parole at any time during the term of that
inmate’s sentence, without regard to the eligibility standards specified in § 7–301 of this
subtitle.

(c) (1) A request for a medical parole under this section may be filed with the
Maryland Parole Commission by:

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.
[Brackets] indicate matter deleted from existing law.
(i) the inmate seeking the medical parole;

(ii) an attorney;

(iii) a prison official or employee;

(iv) a medical professional;

(v) a family member; or

(vi) any other person.

(2) The request shall be in writing and shall articulate the grounds that support the appropriateness of granting the medical parole.

(d) Following review of the request, the Commission may:

(1) find the request to be inconsistent with the best interests of public safety and take no further action; or

(2) request that department or local correctional facility personnel provide information for formal consideration of parole release.

(e) The information to be considered by the Commission before granting medical parole shall, at a minimum, include:

(1) (i) a recommendation by the medical professional treating the inmate under contract with the Department or local correctional facility; or

(ii) if requested by an individual identified in subsection (c)(1) of this section, one medical evaluation conducted at no cost to the inmate by a medical professional who is independent from the Division of Correction or local correctional facility;

(2) the inmate’s medical information, including:

(i) a description of the inmate’s condition, disease, or syndrome;

(ii) a prognosis concerning the likelihood of recovery from the condition, disease, or syndrome;

(iii) a description of the inmate’s physical incapacity and score on the Karnofsky Performance Scale Index or similar classification of physical impairment; and

(iv) a mental health evaluation, where relevant;

(3) discharge information, including:
SENATE BILL 774

(i) availability of treatment or professional services within the community;

(ii) family support within the community; and

(iii) housing availability, including hospital or hospice care; and

(4) case management information, including:

(i) the circumstances of the current offense;

(ii) institutional history;

(iii) pending charges, sentences in other jurisdictions, and any other detainers; and

(iv) criminal history information.

(f) The Commission may require as a condition of release on medical parole that:

(1) the parolee agree to placement for a definite or indefinite period of time in a hospital or hospice or other housing accommodation suitable to the parolee’s medical condition, including the family home of the parolee, as specified by the Commission or the supervising agent; and

(2) the parolee forward authentic copies of applicable medical records to indicate that the particular medical condition giving rise to the release continues to exist.

(g) (1) If the Commission has reason to believe that a parolee is no longer so debilitated or incapacitated as to be physically incapable of presenting a danger to society, the parolee shall be returned to the custody of the Division of Correction or the local correctional facility from which the inmate was released.

(2) (i) A parole hearing for a parolee returned to custody shall be held to consider whether the parolee remains incapacitated and shall be heard promptly.

(ii) A parolee returned to custody under this subsection shall be maintained in custody, if the incapacitation is found to no longer exist.

(3) An inmate whose medical parole is revoked for lack of continued incapacitation may be considered for parole in accordance with the eligibility requirements specified in § 7–301 of this subtitle.

(h) (1) Subject to paragraph (2) of this subsection, provisions of law relating to victim notification and opportunity to be heard shall apply to proceedings relating to medical parole.
In cases of imminent death, time limits relating to victim notification
and opportunity to be heard may be reduced or waived in the discretion of the Commission.

If the Commission decides to grant medical parole to an inmate
sentenced to life imprisonment, the decision shall be transmitted to the Governor.

The Governor may disapprove the decision by written transmittal to
the Commission.

If the Governor does not disapprove the decision within 180 days after
receipt of the written transmittal, the decision becomes effective.

The Commission shall issue regulations to implement the provisions of
this section.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
October 1, 2022.