



**HB1476 Independent Oversight and Review Board for Health Care
of Inmates in State Correctional Facilities - Establishment**

Presented to the Honorable Luke Clippinger and Members of the Judiciary Committee
March 6, 2020 1:00 p.m.

POSITION: SUPPORT

NARAL Pro-Choice Maryland urges the House Judiciary Committee to issue **a favorable report on HB1476 Independent Oversight and Review Board for Health Care of Inmates in State Correctional Facilities - Establishment**, sponsored by Delegate Jazz Lewis.

Our organization is an advocate for reproductive health, rights, and justice. We fight for access to high-quality reproductive health care for all Marylanders, including those in our correctional facilities. Incarcerated individuals, including those who are pregnant or who have recently given birth, have the right to healthcare equal in quality to that which they would receive outside of prison. An independent oversight board and the development of uniform, accessible complaint and grievance procedures for inmates would give Maryland the information it needs to meaningfully address healthcare problems in our correctional facilities and improve health outcomes for incarcerated people.

Correctional facilities house populations with unique health needs. Jails and prisons see high rates of mental illness, drug addiction, and chronic disease, and providing high quality healthcare is key to managing those conditions. A 2017 study by the Federal Bureau of Justice Statistics (BJS) found that 14 percent of those in prison and 26 percent of those in jail nationwide are suffering from severe mental illness, compared to just five percent of the general population.ⁱ Incarcerated women have higher rates of mental illness than incarcerated men, and two thirds of women in jails and prisons have a history of mental illness, compared to about a third of men. Another 2017 BJS report found that around 60 percent of jail and prison inmates suffer from drug dependency or addiction.ⁱⁱ Given that this report relied on data gathered before the onset of the opioid epidemic, drug addiction is likely an even more widespread health issue in the correctional system today. An oversight and review board would help Maryland manage public health crises like the opioid epidemic by ensuring that incarcerated people suffering from addiction receive safe, effective treatment.

We also need oversight to provide women and pregnant inmates—often overlooked segments of the prison population—with the unique care they need. An investigation of the Maryland Correctional Institution for Women conducted by Disability Rights Maryland found that the facility failed to provide sufficient mental health care, medical supervision, and accommodations for disabled inmates and that staff did not respond adequately to health complaints.ⁱⁱⁱ Additionally, many of Maryland's^{iv} pregnant inmates have reported receiving inadequate care or being denied care entirely. Charlotte Cook, for example, entered prison pregnant

and reported not receiving a blood test to confirm her pregnancy until five months into her incarceration, despite her repeated complaints of not feeling well.^v Her pregnancy was then categorized as high risk because during those five months, she had not received any prenatal care and had been taking psychiatric medication and performing physical labor. Her son was born weighing only 4.5 pounds, and she had to return to medical isolation without him just three days after giving birth. Another incarcerated woman, Angela Grimm, was placed in solitary confinement for three months after giving birth to her daughter.^{vi} She began suffering from severe depression and stopped eating, but her declining health was not noticed immediately due to the lack of medical supervision during her isolation. We must respond to the concerns they and other incarcerated people have raised about their healthcare access.

Maryland has already taken some steps to address the problems faced by pregnant inmates; the state recently passed bills requiring state correctional facilities to establish policies regarding pregnancy-related healthcare^{vii} of pregnant inmates and banning forced solitary confinement for pregnant inmates and those who have recently given birth.^[§§] However, there is still more work to be done. Having detailed, comprehensive information about what is happening in our correctional facilities will help us build on our recent efforts to protect the health of pregnant inmates. We need to ensure these individuals have full access to healthcare, including comprehensive prenatal testing, quality labor and delivery, and meaningful postpartum care, to ensure the best possible health outcomes for them and their children. An oversight board and improved grievance procedures can inform us as to whether state standards for care are being met and expose remaining problems in our correctional facilities so that Maryland can develop plans to address them.

Maryland is one of many states that have turned to for-profit companies to provide healthcare in their correctional facilities. There is insufficient data on the efficacy of and quality of care provided by these companies, but the many lawsuits brought against them are troubling. According to research by the *New Yorker*, Corizon, a correctional health care provider Maryland currently has a contract with, was sued over 1,000 times from 2015 to 2019 for malpractice, neglect, and wrongful death or injury.^{viii} For-profit providers have an incentive to reduce costs through methods like reducing staff, limiting hospital transfers, and avoiding unnecessary tests, but this corner-cutting can have detrimental impacts on inmates who do not have the freedom to seek out alternative care if they feel that the care they are being given is inadequate.

An independent oversight board could provide an in-depth look at how these companies are operating in Maryland and prevent a repeat of the problems Maryland has experienced with its prior private correctional health care providers. In 2010, a review of inmate healthcare conducted by the Office of Legislative Audits found that inmates were not receiving timely medical exams, medical contractors were not maintaining complete records for all inmates with chronic conditions, and that contractors were not completing or releasing required self-audits.^{ix} In 2012, Maryland selected the for-profit company Wexford Health Sources as its new inmate health care provider, but a lawsuit alleging insufficient management and provision of care led to Maryland replacing Wexford with Corizon, another for-profit health care company.^x The Board of Public Works awarded Corizon a five-year, \$680 million contract in 2018, but the company has a record in other states of lawsuits and multi-million-dollar settlements following the deaths of inmates.^{xi} We need oversight to ensure that contracted healthcare companies are meeting Maryland's standards for inmate healthcare and are not prioritizing profits over the wellbeing of the people for which they are responsible. Incarcerated people cannot choose their healthcare provider, so Maryland has a responsibility to make sure that the providers we choose for them are meeting their needs.

An oversight board is also a money-saving measure. A more complete understanding of the healthcare landscape in Maryland's correctional facilities will enable the implementation of stronger preventative measures and empower correctional staff to stop health problems before they become severe and expensive. Ensuring a prompt response to health problems is key to reducing preventable hospitalizations and readmissions. Furthermore, providing effective care for addiction and chronic illness among incarcerated people helps reduce the further healthcare expenses when those individuals leave prison.

Developing and implementing equitable, cost-effective healthcare strategies for correctional facilities requires a complete understanding of the current healthcare landscape in those facilities. The lack of transparency and oversight in Maryland's prisons prevents the state from meaningfully evaluating the quality of care inmates are receiving or developing alternative plans for providing care. For these reasons, NARAL Pro-Choice Maryland **urges a favorable committee report on HB1476**. Thank you for your time and consideration.

ⁱ Bronson, Jennifer, and Marcus Berzofsky. "Indicators of Mental Health Problems Reported by Prisoners and Jail Inmates, 2011-12." U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, June 2017. <https://www.bjs.gov/content/pub/pdf/imhprpji1112.pdf>.

ⁱⁱ Bronson, Jennifer, Stephanie Zimmer, Jessica Stroop, and Marcus Berzofsky. "Drug Use, Dependence, and Abuse Among State Prisoners and Jail Inmates, 2007-2009." U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, 2017. <https://www.bjs.gov/content/pub/pdf/dudaspi0709.pdf>.

ⁱⁱⁱ Munib Lohrasbi. "Segregation and Suicide: Confinement at the Maryland Correctional Institution for Women." Disability Rights Maryland.

^{iv} Vargas, Theresa. "Maryland Just Banned Placing Pregnant Inmates in Solitary Confinement. Yes, That Was Apparently Happening." *Washington Post*, May 1, 2019. https://www.washingtonpost.com/local/maryland-just-banned-placing-pregnant-women-in-solitary-confinement-yes-that-was-apparently-happening/2019/05/01/e74e58ea-6c2a-11e9-8f44-e8d8bb1df986_story.html.

^v Vargas, Theresa. "Maryland Just Banned Placing Pregnant Inmates in Solitary Confinement. Yes, That Was Apparently Happening." *Washington Post*, May 1, 2019. https://www.washingtonpost.com/local/maryland-just-banned-placing-pregnant-women-in-solitary-confinement-yes-that-was-apparently-happening/2019/05/01/e74e58ea-6c2a-11e9-8f44-e8d8bb1df986_story.html.

^{vi} Vargas, Theresa. "Maryland Just Banned Placing Pregnant Inmates in Solitary Confinement. Yes, That Was Apparently Happening." *Washington Post*, May 1, 2019. https://www.washingtonpost.com/local/maryland-just-banned-placing-pregnant-women-in-solitary-confinement-yes-that-was-apparently-happening/2019/05/01/e74e58ea-6c2a-11e9-8f44-e8d8bb1df986_story.html.

^{vii} See Maryland Code, Correctional Services § 9-601.

^{viii} Coll, Steve. "The Jail Health-Care Crisis." *The New Yorker*, February 25, 2019. <https://www.newyorker.com/magazine/2019/03/04/the-jail-health-care-crisis>.

^{ix} "Inmate Health care Follow-up Review." Special Review. Office of Legislative Audits, Department of Legislative Services, Maryland General Assembly, March 2010.

^x Wood, Pamela. "Maryland Awards Big Contract for Inmate Health Care as Prior Contractor Sues." *The Baltimore Sun*, December 19, 2018. <https://www.baltimoresun.com/politics/bs-md-board-prison-20181219-story.html>.

^{xi} "Board of Public Works Secretary's Action Agenda." State of Maryland Board of Public Works, December 19, 2018. <https://bpw.maryland.gov/MeetingDocs/2018-Dec-19-Agenda.pdf>.

Wood, Pamela. "Maryland Awards Big Contract for Inmate Health Care as Prior Contractor Sues." *The Baltimore Sun*, December 19, 2018. <https://www.baltimoresun.com/politics/bs-md-board-prison-20181219-story.html>.