

TESTIMONY IN SUPPORT OF BILL # SB0562/ HB0600 Correctional Services - Geriatric and Medical Parole

Date: 02/24/2022

From: Maryland Prisoners' Rights Coalition

Re: SUPPORT FOR BILL# SB0562

To: Chairman Smith, Vice-Chair Waldstreicher, and Members of JPR

Thank you for bringing this important bill forward and allowing us to illuminate the issue.

The Maryland Prisoners' Rights Coalition is a directly impacted organization, supported by advocacy partners, that works to improve the conditions of confinement for incarcerated individuals in Maryland prisons.

We have spent many years identifying and analyzing the conditions of confinement in the State of Maryland that pose grave risks to prisoners' health and safety. Consistently, the most egregious condition of confinement is access to healthcare and the quality of healthcare administered within the prisons. As you can imagine, COVID-19 has only exacerbated this. Yearly, we receive hundreds of calls regarding these conditions, requiring us to intervene with facilities to advocate for everything from not receiving prescribed medications to healthcare for the chronically and terminally ill.

Maryland correctional healthcare has proven to be not only subpar and inadequate but also in violation of the 8th amendment of the United States Constitution as cited in the Duvall Case (Duvall v Hogan). Incarcerated individuals face insurmountable barriers just to file grievances for the medical abuses and neglect they endure contributed by the lack of access to and quality of healthcare in the Maryland correctional system.

Many incarcerated individuals are never able to obtain relief and languish behind the walls of our correctional system. That is both cruel AND unusual. Denial of healthcare is an 8th amendment violation and needs to be addressed; given that, the issue will lead to compounded health problems, unnecessary deaths, and ultimately legal liabilities.

When we receive calls from our clients, as part of our intake process, we ask them to complete a request for information form (ROI), which we submit to DPSCS for our clients' records. During our research, we found DPSCS lacking proper medical records and having unclear policies.

We even submitted interrogatories that were returned with vague information. Furthermore, over the years, our investigation found egregious practices and subpar healthcare standards. The lack of accurate medical records, unclear policies, and stark practices, caused directly by neglect, ultimately exacerbate the ailments of the severely and terminally ill causing negative health outcomes for them. If and when these men and women return to society, they have a multitude of health problems that require specialized care - problems that if they were treated properly would not have catastrophic health implications, like in the case of a gentleman named Donald Brown, Vivian Penda's son.

The Maryland correctional healthcare system cannot and does not serve those who have serious medical issues. Not only is it a waste of millions of dollars in contracts, but there is also a serious cost to the wellbeing of our communities and even higher legal liability.

One question we have gotten is, “what about those who provide health care services to inmates?” There lies the problem; we found that:

- Healthcare provided by DPSCS vendors is self-regulated and is not subject to any standards of compliance.
- Because of inconsistent care, DPSCS facilities historically fail their federal correctional accreditation (ACA and NCCH).

DPSCS contracts a medical contractor, which is currently Corizon, that has been nationally and historically in litigation for abuses and violations. They were cited for not upholding their contract of care, and have, because of the aforementioned, been terminated in multiple states.

Corizon lacks the capacity to provide long-term medical care for the chronically ill, the terminally ill, and the elderly. As an example, the medical cost for an inmate under the age of 60 who is considered healthy in Maryland per year is \$7,956. This doubles for inmates over the age of 60, costing an additional \$5.2 million per year - these figures don't include people under 60 with serious illness, so imagine that. This amounts to almost \$26 million over 5 years. Corizon's bid and contract over five years are \$680 million. With a \$680 million contract, BUT overall expenses approaching \$800 million over five years, how does Corizon propose to meet the needs of this population? These numbers speak volumes and press the need for medical and geriatric parole.

Providing those with terminal and debilitating conditions the opportunity for parole is a strong first step in correcting a long history of healthcare neglect and offers a viable opportunity for proper care for those debilitated by DPSCS, while it is great that DPSCS would like to make improvements and we agree this would be a huge job, continues to make excuses and plans for improvement that are many years away and that are not reasonably obtainable without expert assistance. This bill is a way that these changes can begin to come about in a much-needed expedient manner that at least follows a minimum standard of care and protocol. We currently have evidence that the practices and procedures of the healthcare providers DO NOT follow minimum standard protocol. With DPSCS reporting almost half of their population as being designated as chronically ill, we have a serious issue.

We cannot stress the importance of this legislation and reform to the access to and quality of healthcare for incarcerated individuals enough. This is a civil, social, economic, legal, and moral issue, which also bears GREAT FINANCIAL COSTS to the Maryland taxpayers.

We cannot wait for changes in the distant future; it needs to be addressed now starting with offering the viable pathway we've laid out for medical and geriatric parole. As a representative for the entire incarcerated population of the state of Maryland, their families, and loved ones, we strongly urge you to support and give a favorable report for SB0562/HB0600.

Respectfully,

The Maryland Prisoners' Rights Coalition
MPRC Partners and the Directly Impacted Governance Committee