Miller Senate Office Building 11 Bladen Street, Room 422 Annapolis, Maryland 21401 410-841-3697 • 301-858-3697



THE SENATE OF MARYLAND Annapolis, Maryland 21401

## **Testimony of Senator Jill P. Carter**

## In Favor of SB0132 – Correctional Services – Medical Parole - Life Imprisonment

## Before the Judicial Proceedings Committee

## On February 7<sup>th</sup> 2024

Mr. Chairman, Vice Chair, and Members of the Committee:

Senate Bill 0132 repeals provisions in Maryland law relating to the governor's approval being necessary for medical parole decisions made by the Maryland Parole Commission. SB0132 makes it so that if the Maryland Parole Commission approves an inmate's request for medical parole, that decision is final, no longer needing gubernatorial approval and removing the 180 day waiting period. SB0132 also only deals with those serving life sentences with parole, not those detained without the possibility of parole.

SB0132 corrects an oversight made by lawmakers in 2021 when they overrode Governor Hogan's veto to remove the Governor from parole decisions. The bill, SB0202, did not include medical parole decisions when removing the gubernatorial oversight, a tragic omission that has resulted in multiple deaths of people awaiting their release. It only makes sense to continue the logic that began with SB0202 in this regard. The 180 day waiting period currently allowed by Maryland law is particularly problematic. If the parole commission grants medical parole, it is because they have acknowledged that the inmate 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". Our prisons are utterly incapable of providing those needing medical parole with any sort of proper care. According to the Prison Policy Initiative, only 4% of prisons nationwide have hospice care centers, with most prisons and jails not built with any consideration for providing end-of-life or intensive medical care. Additionally, these inmates are dealing with medical staff that are spread too thin and correctional guards that don't have the necessary training to provide anything other than basic medical care. The situation is dire enough that prisons have resorted to using inmates as volunteers or employed, but underpaid, caregivers.

Lastly, forcing someone to wait six months for the governor's approval of a decision already made by the parole board significantly financially overburdens an already costly prison system. According to the Prison Policy Initiative, prisons have reported spending up to 14 times more for medical care depending on the age and condition of the patient than the average inmate.

SB0132 closes a, frankly, illogical loophole in Maryland law that allows the governor final approval on medical parole decisions despite having been shut out from the wider parole decision making process two years ago. This correction is noncontroversial and long overdue.

As such, I urge this committee to issue a favorable report in regards to SB0132. Thank you for your time.

Respectfully,

Jill P. Carter