



Written Testimony
In Favor
HB – 0297 – Correctional Ombudsman

Submitted by: Madison Gestiehr
Student Attorney, Decarceration and Re-Entry Clinic
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My name is Madison Gestiehr, and I am a student attorney testifying on behalf of the American University Washington College of Law Decarceration and Re-entry Clinic in support of the Correctional Ombudsman Bill. Our Clinic represents individuals who have served decades in Maryland's prisons, and we advocate for their release in Maryland Circuit Courts and at parole hearings.

In addition to providing testimony on behalf of the Decarceration and Re-entry Clinic in support of the Correctional Ombudsman Bill, I am also here today to express my support for the Bill as a proud lifelong Maryland resident.

Over the past few years, especially during my time advocating on the behalf of an incarcerated individuals, I have become increasingly aware of how we treat the incarcerated population in Maryland. And I am not only disgraced by it, but I am also utterly devastated that we haven't done more to prevent the harms that incarcerated individuals face every day. We need to do better, and the first step towards doing so is by establishing an Office of Correctional Ombudsman.

In my role in as a student attorney in the Clinic, I have had heard directly from incarcerated individuals and returning citizens about their experience in Maryland prisons. This past week, for example, I read letters from currently incarcerated individuals sharing their experiences with medical care in their correctional facilities. Unfortunately, within the overwhelming stack of

letters I reviewed, none of them had anything positive to share.

Among the stories, I read about two men who have gone completely blind because they haven't had their cataracts removed, despite pleading with the prison's medical staff for years about their vision loss, the associated discomfort, and their need for cataract removal. I also read a story about a woman who was a breast cancer survivor. For months she has complained of excruciating chest pain. However because her file identifies her as a breast cancer survivor, the medical team has brushed off her complaint suggesting that whatever she is feeling was probably a result her cancer. Despite the woman's insistence that the pain was not related to her breast cancer and required further observation, the medical team declined to schedule her an examination. This woman worries every day that she is going to get increasingly worse, continue to suffer in pain, or even die as a result of her condition before receiving a proper diagnosis.

These stories are, unfortunately, not unique. Every day, incarcerated people are turned away from treatment for internal pain they are experiencing solely because their wounds aren't visible. In practice, this means that unless you are bleeding in the moment, the infirmary won't conduct an examination..

Additionally, incarcerated individuals are given Tylenol or Ibuprofen to manage whatever symptoms they are experiencing even if it's not an adequate remedy. In one case recently, an incarcerated individual, Calvin C. Murray, who is housed at the Eastern Correctional Institute suffered a mild stroke due to a heart rhythm disorder, which left him partially paralyzed for six days.¹ Mr. Murray has since sued YesCare, the private company responsible for providing medical care in Maryland prisons, for their subpar medical response which was to give him 600 milligrams of Ibuprofen.²

Mr. Murray's lawsuit against YesCare is one of more than a half-dozen that have been filed by

¹ Ben Conarck, *The Legal Gymnastics and Thorny History of Maryland's Correctional Health Care Provide*, BALT. BANNER, (Oct. 17, 2023, 5:46 PM), <https://www.thebaltimorebanner.com/community/criminal-justice/yescare-maryland-bankruptcy-lawsuits-AF3KEDN3K5F3TIVNQE3G5SYFCI/>.

² *Id.*

incarcerated individuals in Maryland against the company in 2023.³ Additional lawsuits against YesCare include cases where an incarcerated individual did not receive medication their seizure disorder and where an incarcerated individual was denied treatment for deep vein thrombosis.⁴ These experiences can be avoided if there is independent oversight focusing on the overall medical care provided.

Another concerning matter is that an [evaluation](#) of YesCare (formerly known as “Corizon”), written by Private Equity Stakeholder Project researcher Michael Fenne, documents how the private company manipulated bankruptcy law to evade liabilities for the conditions of the incarcerated patients in its care.⁵ By undergoing a restructuring process, YesCare was able to continue to operate while shedding liabilities against it stemming from over 1,000 lawsuits filed by incarcerated individuals and their families, which alleged substandard medical care, into a different business entity. Below, while not exhaustive, is a list of claims brought by incarcerated individuals and their families against YesCare under its former name “Corizon”:⁶

- **Inadequate treatment of acute and chronic illness**, exemplified by a case of an incarcerated individual who died three days into a six-day sentence after Corizon providers ignored his complaints of intense pain which was caused by an entirely treatable existing condition that the medical providers should have been aware of and looked into);⁷

³ *Id.*

⁴ *Id.*

⁵ See Michael Fenne, *YesCare Dodges Liability for Prison Conditions*, PRIVATE EQUITY STAKEHOLDER PROJECT (Oct. 2023), https://pestakeholder.org/wp-content/uploads/2023/10/PESP_Report_YesCare-Corizon_2023.pdf; see also *YesCare Dodges Liability for Prison Conditions: Merger, Division, and Bankruptcy*, PRIVATE EQUITY STAKEHOLDER PROJECT (Oct. 17, 2023), <https://pestakeholder.org/reports/yescare-dodges-liability-for-prison-conditions-merger-division-and-bankruptcy/>.

⁶ Letter from Senator Elizabeth Warren, Senator Mazie Hirono, Senator Richard Blumenthal, Senator Richard J. Durbin, Senator Jeffery A. Merkley, Senator Ron Wyden, Senator Bernard Sanders, Senator Cory A. Booker, and Senator Peter Welch to Jeffery Sholey and Yitzchok Lefkowitz (Oct. 24, 2023), <https://www.warren.senate.gov/imo/media/doc/2023.10.24%20Letter%20re%20Corizon%20Texas%20Two-Step.pdf>.

⁷ Nicole Einbinder & Dakin Campbell, *Hidden Investors Took over Corizon Health, A Leading Prison Healthcare Company. Then They Deployed the Texas Two-Step*, BUS. INSIDER (Aug. 21, 2023), <https://www.businessinsider.com/corizon-health-bankruptcy-yescare-texas-two-step-law-2023-8>

- **Lack of adequate psychological care**, evidenced by a detention center which Corizon has chosen to staff just a single psychiatrist even though the facility houses 400 individuals struggling with their mental health;⁸
- **Failure to adequately staff facilities**, including at a facility in Oregon which Corizon left without a registered nurse for almost 20% of the time even though a registered nurse is supposed to be on call at all times;⁹
- **Refusal to prescribe appropriate medications**, with one nurse alleging that she was explicitly asked by Corizon “not to prescribe medications that [she] felt . . . were necessary”;¹⁰ and
- **Failure to rectify a culture of sexual abuse and misconduct**, for example at Rikers Island facility in New York, where two Corizon staffers were indicted on multiple charges of rape, sexual abuse, and related crimes.¹¹

Both, the many stories I have encountered and shared with you, detailing inadequate healthcare within Maryland’s prisons and our state’s choice to permit YesCare to remain as the healthcare provider for our incarcerated population¹² underscores the urgent need for a Correctional Ombudsman. It is time we step up, extend care, and provide incarcerated individuals the medical services we all demand for ourselves.

The plea for a Correctional Ombudsman is a demand for accountability and a crucial step toward rectifying systemic flaws. An independent oversight committee is indispensable to investigate

⁸ Jason Szep, *Special Report: U.S. Jails are Outsourcing Medical Care – and the Death Toll is Rising*, REUTERS (Oct. 26, 2020), <https://www.reuters.com/article/us-usa-jails-privatization-special-repor/special-report-u-s-jails-are-outsourcing-medical-care-and-the-death-toll-is-rising-idUSKBN27B1DH>.

⁹ Rebecca Woolington, *Dying Alone: A jail Inmate’s Health Spiraled for 7 days and No One Stopped It*, THE OREGONIAN (Apr. 10, 2016), https://www.oregonlive.com/washingtoncounty/2016/04/dying_alone_a_jail_inmates_hea.html#incart_big-photo.

¹⁰ Jason Szep, *Special Report: U.S. Jails are Outsourcing Medical Care – and the Death Toll is Rising*, REUTERS (Oct. 26, 2020), <https://www.reuters.com/article/us-usa-jails-privatization-special-repor/special-report-u-s-jails-are-outsourcing-medical-care-and-the-death-toll-is-rising-idUSKBN27B1DH>.

¹¹ Erika Eichelberger, *In Harm’s Way: Seeking Medical Care, Female Rikers Inmates Say They Faced Sexual Abuse*, THE INTERCEPT (Sept. 10, 2015), <https://theintercept.com/2015/09/10/female-rikers-inmates-medical-care-sexual-abuse-allegations/>.

¹² Ben Conarck, *Maryland’s Prison Health Care Provider Could be in Big Trouble*, BALT. BANNER (Mar. 1, 2024, 5:30AM), <https://www.thebaltimorebanner.com/community/criminal-justice/yescare-bankruptcy-maryland-prisons-health-care-T2ZJK2QJ5JHAXCC5EWLF74ZSZM/>.

and monitor YesCare's operations, ensure that incarcerated individuals are receiving healthcare that aligns with legal standards, enforce accountability, and ultimately safeguard the well-being of those within our correctional facilities. The establishment of an Ombudsman is not just a policy recommendation; it's a moral imperative for a more humane and rehabilitative correctional system.

I urge you to vote favorably on this legislation. Thank you.