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Clinical Program

**February 25, 2025
House – Judiciary
Testimony in Support of HB 311 – Correctional Services – Medical Parole – Life
Imprisonment**

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The Decarceration and Re-Entry Clinic represents men and women detained in Maryland prisons before the courts and before the Maryland Parole Commission. Our work is motivated by our desire to end mass incarceration, an unjust system that creates vast racial disparities. We support this bill which merely removes the governor from the parole release process for lifers.

The bill would allow the Maryland Parole Commission to grant medical parole to an incarcerated individual serving a term of life imprisonment. During the height of the pandemic, many defense attorneys across the country pivoted their practices towards representing individuals who linger in our jails and prisons who suffer from severe and chronic medical conditions. While the groundswell of fighting for compassionate release has simmered, we must remember that individuals remain behind bars with debilitating, worsening and disabling medical conditions from which they will never escape. “There is a lack of political and bureaucratic will to see dying in prison as a negative marker for what a prison system should be...” says Barry Holman, of the National Center for Institutions and Alternatives.¹ We agree.

We support a favorable report on this bill because any person who is 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 should be considered for parole release at any time during their sentence. The Maryland Parole Commission, which bears the responsibility for making parole decisions in the State, must be authorized to consider parole release for medically compromised individuals without political interference.

¹ See Medical Parole, Politics vs. Compassion, National Prison Hospice Association, [Medical Parole | National Prison Hospice Association \(npha.org\)](https://www.npha.org/medical-parole).

Men and women serving life sentences are not excluded from those who suffer from severe, chronic medical conditions in prison and should not be excluded from the opportunity for medical parole. We support this bill which allows a request for medical parole to be filed with the Maryland Parole Commission by the individual, an attorney, a prison official, a medical professional or a family member. I have practiced in this area long enough to have witnessed several individuals being granted medical parole by the Maryland Parole Commission only to be rejected by a governor. The Maryland Parole Commission should be the final decision maker in identifying who meets the statutory criteria for medical parole release.

Due to extreme sentencing, Maryland is experiencing growth in our aging prison population as they get sicker. Based on data showing this population has higher care costs, a fiscal analysis concluded that continued confinement of this age group for an additional 18 years (based on the expected period of incarceration, the age at release and the projected life expectancy of the Ungers), would amount to nearly \$1 million per person, or \$53,000 a year. This is compared to the \$6,000 a year to provide intensive reentry support that has proven to successfully reintegrate them back into the community.² Additionally, individuals released under the Juvenile Restoration Act are additional proof that people who serve long sentences are less likely to engage in recidivism behavior.

We urge a favorable report.

² Report by The Justice Policy Institute, *The Ungers, 5 Years and Counting: A Case Study in Safely Reducing Long Prison Terms and Saving Taxpayer Dollars*, November 2018.