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THE MARYLAND HOUSE OF DELEGATES
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FAVORABLE – HB190--CORRECTIONAL SERVICES – GERIATRIC and MEDICAL PAROLE

TO: Chair Clippinger, members of the Judiciary Committee

HB190, if enacted does a few things with respect to parole revisions. The bill establishes geriatric parole. The Maryland Parole Commission would consider the age of an individual and allow for parole if, based on the totality of the circumstances, there is a reasonable probability that the individual will not recidivate. Importantly the Commission evaluates whether such release is compatible with public safety. These provisions apply only to an incarcerated individual who is at least age 60, has served at least 15 years of the sentence imposed, is not registered or eligible for registration on the State Sex Offender Registry, and is sentenced to a term of incarceration for which all sentences being served (including any life sentence) are with the possibility of parole. An incarcerated individual considered for parole under these provisions must have a hearing every two years.

In the bill, we also tighten up the terms of medical parole. We define, chronically debilitated, incapacitated, and terminal illness as determined by a licensed medical professional. We also provide minimum guidelines for the Commission as to what to use when considering whether granting medical parole. You may wonder why it's important to clarify medical parole. Well, last year, only 14 incarcerated individuals were granted medical parole, and tragically, 4 of them passed away shortly after being released. This underscores the need for reform—namely, to take a humanitarian approach to justice and increase the number of those eligible for medical parole.

It's important to note that the medical parole provisions in this bill should not be confused with those in HB311 (Correctional Services – Medical Parole – Life Imprisonment), another piece of legislation I am introducing this session. HB311 addresses a technical fix to remove the requirement for gubernatorial approval when granting medical parole for individuals serving life sentences. It does not, however, clarify the terms of medical parole, which is what HB190 does. Further, HB1123 is another bill you will be hearing about shortly which is similar to this bill yet has some key differences that will be discussed.

On that note, HB190 brings compassionate release to Maryland and addresses ambiguities in medical parole.

Thank you for your consideration. A favorable report is requested.