

Department of Legislative Services  
Maryland General Assembly  
2019 Session

FISCAL AND POLICY NOTE  
First Reader

House Bill 1112  
Judiciary

(Delegate J. Lewis)

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**Task Force to Study Health Care for Inmates in Correctional Facilities**

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This bill establishes a Task Force to Study Health Care for Inmates in Correctional Facilities. The task force must (1) review the policies and practices of the Department of Public Safety and Correctional Services (DPSCS) regarding access to health care services, as specified; (2) determine the capital or operational expenditures that are necessary to address any issues regarding the quality of health care services received by inmates in correctional facilities and inmates' access to health care services in correctional facilities; and (3) make recommendations regarding changes in policies, practices, or expenditures that are necessary to address any issues regarding the quality of health care services received by inmates and inmates' access to health care services. DPSCS must provide staff for the task force. Task force members may not receive compensation but are entitled to reimbursement for expenses. The task force must report its findings and recommendations to the Governor and the General Assembly by December 31, 2019. **The bill takes effect June 1, 2019, and terminates June 30, 2020.**

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**Fiscal Summary**

**State Effect:** Any expense reimbursements for task force members and staffing costs for DPSCS are assumed to be minimal and absorbable within existing budgeted resources. Revenues are not affected.

**Local Effect:** None.

**Small Business Effect:** None.

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## Analysis

**Current Law:** Promptly after an inmate is sentenced to the jurisdiction of the Division of Correction (DOC) within DPSCS, DOC must assemble an adequate case record for the inmate that includes (1) a description, photograph, and family history of the inmate; (2) any previous record of the inmate; (3) a summary of the facts of each case for which the inmate is serving a sentence; (4) the results of a specified risk and needs assessment of the inmate; and (5) the results of a specified physical, mental, and educational examination of the inmate.

DOC must conduct a risk and needs assessment and a physical, mental, and educational examination of an inmate as soon as feasible after the individual is sentenced to the jurisdiction of DOC. Based on the information assembled for an inmate's case record, DOC must classify an inmate and develop a case plan to guide an inmate's rehabilitation while under the custody of DOC.

Whenever DOC determines that an inmate is ill and the facilities of the correctional facility are inadequate to provide treatment, DOC may direct the correctional facility manager to order the inmate's temporary removal to a facility in the State in which the inmate may receive adequate treatment. An order of temporary removal must be carried out with correctional officers and under supervision and safeguards to prevent the inmate's escape and require the inmate to be returned to a DOC correctional facility as soon as the inmate's health allows.

For pregnant inmates, if a representation is made to the managing official of a State correctional facility that an inmate in the facility is pregnant and about to give birth, the managing official must make an investigation and, if the facts require, recommend through the Maryland Parole Commission that the Governor exercise executive clemency. Without notice, the Governor may parole the inmate, commute the inmate's sentence, or suspend the execution of the inmate's sentence for a definite period or from time to time. If the Governor suspends the execution of an inmate's sentence, the managing official of the correctional facility must, in a reasonable time before the anticipated birth, have the inmate transferred from the correctional facility to another facility that provides comfortable accommodations, maintenance, and medical care under supervision and safeguards that the managing official determines necessary to prevent the inmate's escape from custody. The managing official must also require the inmate to be returned to the correctional facility as soon after giving birth as the inmate's health allows. Chapter 212 of 2014 requires that the medical professional responsible for the care of an inmate determine when the inmate's health allows the inmate to be returned to a correctional facility after giving birth.

**Background:** The Office of Inmate Health Clinical Services within DPSCS supervises the treatment of offenders under the control and custody of DPSCS. Treatment services

include medical care, mental health, dental care, pharmacy services, and substance use disorder care. Overall, the department works with private health care providers through a competitive bidding process and enters into contractual relationships with those providers to deliver health care services. Corizon Inc. is the current medical provider as of January 1, 2019.

The total number of inmates and detainees under the jurisdiction of DPSCS is estimated at just under 19,000 people in fiscal 2019. The total cost of the DPSCS inmate health care service contracts is expected to exceed \$200 million in fiscal 2020.

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### **Additional Information**

**Prior Introductions:** None.

**Cross File:** None.

**Information Source(s):** Department of Public Safety and Correctional Services;  
Department of Legislative Services

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