

TESTIMONY IN SUPPORT OF BILL #HB1476

Independent Oversight and Review Board for Health Care of Inmates in State Correctional Facilities-Establishment

Date: 03/02/2020

From: Maryland Prisoners' Rights Coalition

To: Chairman Luke Clippinger, Madame Chair Vanessa Atterbeary and Members of the House Judiciary Committee

Re: SUPPORT FOR BILL#HB1476

The Maryland Prisoners' Rights Coalition is a directly impacted governed organization supported by advocacy partners that works to improve conditions of confinement for incarcerated individuals in Maryland Correctional facilities. We have spent many years investigating and analyzing the most serious and important conditions of confinement in the State of Maryland and the NUMBER ONE most egregious condition of confinement is by far the access to and quality of healthcare. As well, we receive hundreds of calls regarding very serious lack of healthcare issues and have to intervene daily with facilities to advocate for medications and healthcare. Historically, nationally and statewide correctional healthcare has proven to not only be subpar and inadequate but at a state that is violating the Constitution by way of the 8th amendment. Due to the intense barriers for incarcerated individuals to file grievances for the abuse and neglect, it is difficult for most to obtain relief from these violations, however nonetheless, denial of healthcare is an 8th amendment violation and needs to be addressed as the issue and the legal responsibility will continue to grow. After much investigation into DPSCS policies, practices, medical and health records, interrogatories obtained directly from DPSCS, and consultations with healthcare professionals and experts in the community, we have narrowed in on the major issues and the fact that healthcare for incarcerated individuals is NOT regulated as it is in the community. This is a direct cause of the neglect and ultimately the negative health outcomes and the negative impact on our communities. Not only is it a waste of multi-million dollar contracts, but there is a serious cost to the wellbeing of our communities and a high cost of legal liability. The stories we share are not just stories, we have collected tangible evidence to justify and solidify the need for this legislation. Currently, and according to DPSCS's own admissions, they are solely internally regulated, some entities they claim to be regulated by not only do not REQUIRE compliance but DPSCS facilities historically fail their accreditation process (ACA and NCCH), and the others are internal departments that have themselves confirmed that they defer to the healthcare contractors in the event that there is a complaint (OIH, MCCS). DPSCS contracts a medical contractor (Corizon) that historically and nationally has been in litigation for abuses/violations, does not uphold their contract of care and has been terminated in multiple states. This is the "healthcare provider" that DPSCS defers responsibility to with no independent oversight. DPSCS claims they have a "robust" chronic care system; we have evidence that the information they provided is not only untrue and these "policies" are not being followed, but also that once again, they defer accountability solely to the unreliable provider with again no oversight. It is extremely irresponsible to allow no true level of regulation that follows proper protocols required in the healthcare community outside of the correctional facilities. This has caused and will continue to cause neglect, lack of care leading to permanent disabilities, rampant infectious disease, increased addiction epidemic, increased overdoses, suicides and relapses, increased mental health issues in an era where mental illness is at an all time high, negative impacts on re-entry, recidivism, victimization and public safety. This legislation is a strong first step to assisting the DPSCS in correcting a long history of healthcare issues. DPSCS, while it is great that the Secretary wants to make improvements and we agree this would be a huge job, continues to make excuses and plans for improvements that are many years away and that are not reasonably obtainable without expert assistance. This is a way that these changes can begin to come about in a much-needed expedient manner and in a manner that at least follows a minimum standard of care and protocol. We currently have evidence that

the practices and procedures of the healthcare providers DOES NOT follow minimum standard protocol. With DPSCS reporting almost half of their population as being designated as chronically ill, we have a serious issue. Between the lack of electronic records, the inconsistent recordkeeping and reporting, the high number of illnesses not being treated, the consistent misdiagnoses, the prescription medication process not following protocol causing serious medication mishaps systemically, the deaths, overdoses, suicides and lack of proper emergency response for healthcare emergencies, it is past time to do something to regulate this issue. This legislation brings community healthcare providers, experts, advocacy organizations, legal representatives, correction staff representation and health organizations that can specialize and that work with this population to the table to sort this out and assist the Department with proper policies, practices and accountability that will hold fast to an acceptable standard of care. This effort will not only benefit the population, but it will drastically benefit the families and the community. We cannot stress the importance of this legislation and of reform to the access to and quality of healthcare for incarcerated individuals. This is a civil and human rights issue, it is an economic issue, it is a safety issue, it is a LEGAL issue and it is an overwhelmingly important issue that does not have the time to wait for changes many years from now. As the representative for the entire incarcerated population and the families and loved ones of that population, we strongly urge you to support and give a favorable report for HB1476.

Respectfully,
The Maryland Prisoners' Rights Coalition
MPRC Partners and the Directly Impacted Governance Committee