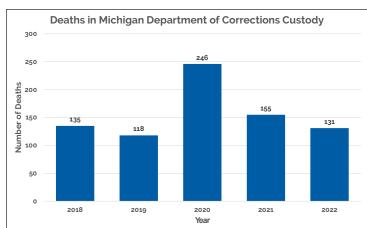
# Safe & Just Michigan Medically Frail Parole

### Medically Frail Reform (Senate Bill 599)

- Medically frail parole was **passed with bipartisan support**, with the support of the Michigan Department of Corrections and with a neutral stance from the Prosecuting Attorneys Association of Michigan in 2019.
- Medically frail parole is reserved for people who by definition **pose no threat** to the public due to a permanent, serious, or terminal condition and/or a disabling mental disorder that significantly impairs one's ability to perform daily living activities (such as walking or standing) without assistance.
- Due to unforeseen issues with statutory definitions, release procedures and available placements, **only one person** has been paroled under this law since it passed almost five years ago, while 158 people died of COVID in MDOC custody during this time period.
- **SB 599, which has bipartisan support**, corrects the issues in the original bill and will help the law function as it was intended.
- If the law is utilized properly, the state could **save millions of dollars annually with no impact on public safety**. This is a win-win that the Legislature should pass now. Parole for medically frail people allows MDOC to:
  - 1. focus on its core functions (instead of complex health care needs),
  - 2. transition medically frail people into more appropriate care, and



3. shift the cost of their care from the General Fund to Medicaid (70% federal dollars), Medicare or private insurance in some cases.

Michigan passed a compassionate parole law in 2019 intended to create a pathway for people with terminal diseases or profound disabilities to be paroled to nursing homes, hospices or other appropriate care facilities. However, since then, only a single person has been released under the medically frail parole law, while 650 people have died in Michigan prisons since the year the law passed.

Questions? Contact Safe & Just Michigan, at 517.482.7753 or info@safeandjustmi.org



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Source: Michigan Department of Corrections

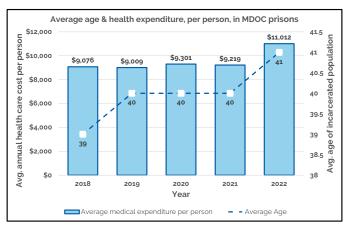
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#### Medical Parole Promotes Better Placement Options & Lower Costs

- Prisons are not designed to house medically vulnerable people, but absent a parole option for medically frail people, MDOC must address any medical needs that arise no matter how complex or costly they may be.
- Medical parole allows MDOC to get out of the business of hospice and nursing care while shifting the costs of care from 100% General Fund to Medicaid, Medicare, or private insurance.

#### The Problem Will Grow if Unaddressed

- MDOC spends over \$327.2 million annually on health care for incarcerated people, and costs are continuing to increase. The overall costs for older people in prison are approximately 3 times as high as younger incarcerated people. Aging of the prison population has had a significant impact on correctional health care costs.
- Researchers use either 50 or 55 as the geriatric cut-off for justice-involved people due to the **evidence of the "accelerated aging" of older incarcerated people**, who present as 10-15 years older than their chronological age due to a variety of risk factors for poor health, including long-term incarceration.
- According to the 2021 MDOC Statistical Report, there were 8,526 people aged 50 and older incarcerated in the Michigan Department of Corrections. **By 2026, 1 in 5** incarcerated people in Michigan are expected to be age 55 or older.
- The percentage of incarcerated individuals over the age of 59 has more than doubled from 4.0% in 2007 to 11.3% in 2023.



Health care costs continue to rise in Michigan prisons and will only get worse as our prison population ages. Between 2018 and 2022, the average age in Michigan prisons rose from 39 to 41, making our prison population among the oldest, if not <u>the</u> oldest, in the nation. Meanwhile, health care expenditures per person rose 21.3 percent to \$11,102 from \$9,076.

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