Connecticut provides compassionate release to eligible incarcerated individuals with serious medical conditions under three separate laws: (1) Medical Parole, (2) Compassionate Parole Release, and (3) Nursing Home Release.

**MEDICAL PAROLE**

**I. ELIGIBILITY**

**Medical Condition** – To be eligible for Medical Parole, an incarcerated individual must have a terminal medical condition, disease, or syndrome with (1) a prognosis of six months or less to live and (2) must be so debilitated or incapacitated that the person poses no danger to society.

**Exclusions** – Individuals serving sentences for capital felonies or murder “with special circumstances” are not eligible for Medical Parole.

**II. APPLICATION/REFERRAL**

Any of the following individuals may start the Medical Parole process by asking for a medical diagnosis to determine an incarcerated individual’s eligibility: the Warden/Superintendent of the institution in which the individual is housed, the Commissioner of the Department of Correction (Department), or the Connecticut Board of Pardons and Paroles (Board).

- An incarcerated individual, family member, or the individual’s attorney can also start the process by asking the Warden, Commissioner, or Board to request a medical diagnosis.

An Application for Medical Parole is available on the Board’s website; however, it details a somewhat different process, saying that the Board first screens an application, and if the incarcerated individual is determined to be “initially” eligible, the application will then be forwarded to Department medical staff.

**III. DOCUMENTATION AND ASSESSMENT**

**Documentation: Physician** – A physician must diagnose the incarcerated individual, and the diagnosis report must include (1) a description of the terminal condition, disease, or syndrome; (2) the likelihood of recovery from the condition, disease, or syndrome; and (3) a description of the individual’s physical incapacity.
IV. DECISION-MAKING PROCESS

Decision-Maker – The Connecticut Board of Pardons and Paroles is responsible for granting Medical Parole; however, it can appoint a “special panel” to assist in making the decision.12

Time Frame – The Board or the special panel reviews and rules on the Medical Parole requests “on an emergency basis” and is directed to “act in as expeditious a manner as possible.”13

Conditions

- Environment – An individual must agree to placement “for a definite or indefinite period of time” in a hospital, hospice, or other housing accommodation suitable to the person’s medical condition. That can include a family member’s home.14

- Medical Updates – The Board can require periodic medical reports on the person’s condition.15

V. POST-DECISION

Effect of Medical Parole Request on General Parole Eligibility – A request for Medical Parole does not affect an individual’s eligibility for any other form of parole or release provided under Connecticut law.16

Revocation/Termination – The Board will review the periodic medical updates; if it finds an individual’s condition has improved to the point the person may present a danger to society, the Board will order a return to Department custody.17

VI. REPORTING/STATISTICS

The Board reported the following statistics regarding the number of individuals released on Medical Parole:18

- In 2019, the Board granted Medical Parole to five individuals.

- In 2020, the Board granted Medical Parole to five individuals and denied one individual.
COMPASSIONATE PAROLE RELEASE

I. ELIGIBILITY

**Medical Condition/Age** – An incarcerated individual may be eligible for Compassionate Parole Release if “physically incapable of presenting a danger to society” because the individual is physically or mentally debilitated, incapacitated, or infirm as a result of (1) advanced age or (2) a condition, disease, or syndrome that is not terminal.\(^{19}\)

**Exclusions** – Individuals convicted of capital felonies or murder with special circumstances are not eligible for Compassionate Parole Release.\(^{20}\)

**Other Eligibility Criteria** – To be considered for Compassionate Parole Release, incarcerated individuals must have served at least half of their definite or aggregate sentences.\(^{21}\)

II. APPLICATION/REFERRAL

The *Application for Compassionate Parole Release* is available on the Board of Pardons and Paroles (Board) website.\(^{22}\) Neither the application nor the Board’s Information Sheet on Compassionate Parole\(^{23}\) provide any details or limitations on who can start the application process on behalf of an individual.

III. DOCUMENTATION AND ASSESSMENT

There is no information in the statute on the necessary documentation or assessment process. The Board’s Information Sheet states that it does not require a physician’s diagnosis but that it will obtain clinical input to help determine whether an individual meets the statutory criteria.\(^{24}\)

IV. DECISION-MAKING PROCESS

**Decision-Maker** – The Connecticut Board of Pardons and Paroles makes all decisions regarding Compassionate Parole Release.

**Conditions** – The statute says the Board can establish conditions of release.\(^{25}\) However, there is nothing indicating that it has set any specific conditions for this program.

V. POST-DECISION

**Supervision** – The Department of Correction supervises individuals granted Compassionate Parole Release.\(^{26}\)
VI. REPORTING/STATISTICS

The Board reported the following statistics regarding the number of individuals granted Compassionate Parole Release: 27

- In 2019, the Board granted Compassionate Parole Release for four individuals and denied it for two individuals.
- In 2020, the Board granted 26 individuals Compassionate Parole Release and denied six individuals.

NURSING HOME RELEASE

The Commissioner of the Department of Correction (Department) has discretionary authority to grant Nursing Home Release for incarcerated individuals with terminal illnesses and place them in authorized and licensed community-based nursing homes that provide palliative and end-of-life care. 28

I. ELIGIBILITY

Medical Condition – An individual must be suffering from a terminal condition, disease, or syndrome, or be so debilitated or incapacitated by a terminal condition, disease, or syndrome as to (1) require continuous palliative or end-of-life care or (2) be physically incapable of presenting a danger to society. 29

Exclusions – Individuals convicted of capital felonies or murder with special circumstances are not eligible for Nursing Home Release. 30

II. APPLICATION/REFERRAL

The Commissioner, in consultation with the Medical Director, selects eligible individuals. 31

III. DOCUMENTATION AND ASSESSMENT

To be released to a nursing home, the Department’s Medical Director must complete a medical assessment for the incarcerated person and the Medical Director Nursing Home Release Authorization Form, attesting to the individual’s eligibility for release to a nursing home. 32
IV. DECISION-MAKING PROCESS

Decision-Maker – Decisions on requests for Nursing Home Releases are made “at the discretion of the Warden by authority of the Commissioner in consultation with the Medical Director.”

Conditions – Periodic medical reviews by the Department’s Medical Director may be required as a condition of release. The Department’s Parole and Community Services Division also may consult with nursing home staff to establish any additional conditions that may be appropriate.

V. POST-DECISION

Supervision – The Department’s Division of Parole and Community Services supervises individuals released to nursing homes.

Revocation/Termination – If an individual’s condition improves to the point that the Nursing Home Release eligibility criteria are no longer met, the Commissioner will order the person’s return to custody.

VI. REPORTING/STATISTICS

Connecticut law does not require the Warden to report how many individuals have been granted Nursing Home Release. However, in response to FAMM’s information request, the Department reported the following:

- In 2019, it approved one individual for Nursing Home Release and denied one individual.
- In 2020, the Department did not approve or deny any individuals for Nursing Home Release.

Since the beginning of the program in 2013, the Department has approved 33 individuals for Nursing Home Release. However, it also advised FAMM that approving an individual for Nursing Home Release does not actually guarantee an individual goes to a nursing home, because the Department is not able to control or order a nursing home to take an approved individual.
CONNECTICUT COMPASSIONATE RELEASE

PRIMARY LEGAL SOURCES

MEDICAL PAROLE

Statute


Agency Policy/Publication


COMPASSIONATE PAROLE RELEASE

Statute


Agency Policy/Publications


NURSING HOME RELEASE

Statute


Agency Policy

NOTES

* Id. means see prior note.

1 Conn. Gen. Stat. §§ 54-131a through 54-131g.


6 Id., referencing § 53a-54b (murder with special circumstances).


8 Id. Note that “family member” includes a spouse, parent, guardian, grandparent, aunt/uncle, sibling, or child over the age of 18.


10 Pursuant to Conn. Gen. Stat. § 54-131c, the physician must be licensed under Chapter 370. If a diagnosis is made by a physician who is not employed by the Department or a medical facility the Department uses, it can be reviewed by a physician appointed by the Department’s Commissioner or Medical Director. Id.


13 Id.


15 Id. at (b). The statute does not define “periodic.”


21 Id.

22 Connecticut Board of Pardons and Paroles, Application for Compassionate Parole.
23 Connecticut Board of Pardons and Paroles, Application for Compassionate Parole and Info Sheet on Compassionate Parole.

24 Info Sheet on Compassionate Parole, Paragraph V.


26 Id.


29 Conn. Gen. Stat. § 18-100i (a); DOC Directive 8.16 (3).

30 Conn. Gen. Stat. § 18-100i (a), referencing § 53a-54b; DOC Directive 8.16 (4).

31 DOC Directive 8.16 (1).

32 Id. at (5). Note that 8.16 (4) includes the Warden in the process.

33 DOC Directive 8.16 (5). Note that the Medical Director Nursing Home Release Authorization Form is referenced but not included with the Directive nor available on the website.

34 Id. at (4).

35 Conn. Gen. Stat. § 18-100i (b). “Periodic” is not defined in the statute.

36 DOC Directive 8.16 (6).

37 Conn. Gen. Stat. § 18-100i (c); DOC Directive 8.16 (6).

38 Conn. Gen. Stat. § 18-100i (b); DOC Directive 8.16 (6) and (7).


40 Id.

41 Id.