

Compassionate Release Report Card • October 2022

Illinois

Overall Grade for Illinois

Total Grade

94_{/100}

Letter Grade

A

Program Grades

Medical Release

Total Grade

94/100

Letter Grade

A

Find all compassionate release resources on FAMM's site →

[famm.org](https://www.famm.org)



Medical Release

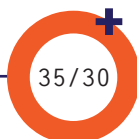
Total Grade

94 /100

Letter Grade

A

Eligibility Criteria



10/10 Clearly set out with understandable and measurable standards.

10/10 Generous or not unduly restrictive.

10/10 No categorical exclusions/everyone is eligible for consideration.

+ Extra credit: Terminal illness time-left-to-live provisions are reasonable and sufficiently long to permit the completion of the review and decision-making processes. **+5**

Procedures

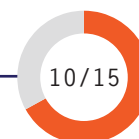


5/5 Documentation and assessment are straightforward, lacking multiple or redundant reviews and authorizations.

5/5 Time frames for completing review and/or decision-making exist and are designed to keep the process moving along.

x Extra credit: Expedited time frames exist for terminal cases. **0**

Engaging the Process

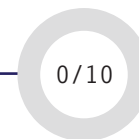


5/5 Clinical and other staff can identify potentially eligible individuals and initiate the process.

5/5 Incarcerated people, their loved ones, and advocates can initiate the process.

0/5 Corrections staff have an affirmative duty to identify incarcerated people eligible for compassionate release and take the steps necessary to begin the process.

Release Planning Support

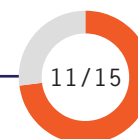


0/5 Agencies provide comprehensive release planning.

x Extra credit: Release planning includes helping the incarcerated person apply for benefits prior to release, including housing, Medicaid, Medicare, and/or veterans benefits. **0**

0/5 Release planning begins early in the process.

Agency Policy Design



3/5 Agency rules exist for all stages of identification, initiation, assessment, and decision-making.

3/5 Agency rules are consistent with and/or complement the statute, are up to date, and internally consistent.

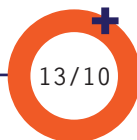
5/5 Rules provide clear guidance to reviewers and decision-makers about steps to take and standards to apply.

Data Collection and Public Reporting



5/5 Agencies are obliged to gather, compile, and report release data to legislature.

5/5 Reporting is made available to the public via annual reports or other means.



Right to Counsel and Appeals

5/5 Program allows counsel to represent people before decision-maker (i.e., parole board, commissioner, or court).

✘ **Extra credit:** Denials are appealable. **0**

3/5 Individuals have the right to reapply should conditions change.

+ **Extra credit:** Revocations are not used to return people to prison because their condition improves or goes into remission or because the individual outlives the prognosis. **+5**



Overall Extra Credit

+5 The Illinois Prisoner Review Board, which makes the final Medical Release decisions, must provide, gather, and report comprehensive data regarding applications for medical release and outcomes. FAMM awarded extra credit because reporting must include demographic data, which we consider essential to compassionate release transparency.

The Numbers

The Illinois Medical Release law did not go into effect until 2022.

High and Low Marks

HIGH MARKS

- **Overall**, Illinois' Medical Release program is well-designed, comprehensive, and generous; and because of its many excellent features, the program received among the highest marks FAMM awarded.
- The program excelled in **eligibility criteria**, earning extra credit for a generous time frame for terminal illness time remaining to live (18 months). That affords time for the Department of Corrections to assess and the Prisoner Review Board to decide whether to release the individual. No incarcerated person is barred from eligibility due to the nature of the conviction or sentence. The "medically incapacitated" standard covers medical as well as cognitive conditions and uses relatively straightforward standards.
- **Policy design** is thoughtful. The program includes process steps, roles, and outcomes. Medical Release only received less than perfect marks in this grading category because of the Department of Corrections' scattered placement of guidance. Some information is found in the regulation, some in the application, and some on the Department's Prisoner Review Board webpage. That makes it difficult to get a clear picture from one source of how the program operates.
- **Procedures** are clear and time-bound, important when dealing with requests on behalf of medically vulnerable incarcerated people.
- Individuals are generally unable to **reapply after denial** for a period of six months, but the Board chair can waive that waiting period "for compelling reasons."
- **Data collection and reporting** are top notch. They are comprehensive; are made available to the public; and earned **extra credit** for including demographic information about applications, releases, denials, and delays.

LOW MARK

- The program does not appear to provide any **release planning**. The applicant must include a parole plan with the application that has information about housing and whether anyone there will care for the applicant and ensure the individual is transported to medical appointments. If not providing that information, the person must state whether the individual will accept placement that the Department provides. No other information about release planning is available. FAMM believes that people with medical and cognitive conditions warranting release and people nearing the end of life deserve release planning support from corrections agencies. It is unrealistic and ungenerous to require them to find and certify housing and other supports on their own.