



**STATE OF MONTANA  
DEPARTMENT OF CORRECTIONS  
POLICY DIRECTIVE**

Policy No. DOC 4.6.7	Subject: <b>MEDICAL PAROLE</b>
Chapter 4: FACILITY/PROGRAM SERVICES	Page 1 of 5 and Attachments
Section 6: Release/Placement	Effective Date: Mar. 11, 1996
Signature: /s/ Mike Ferriter, Director	Revised: 01/05/98; 03/26/02; 03/15/11

## **I. POLICY**

The Department of Corrections will assist the Board of Pardons and Parole in determining an offender's eligibility for medical parole before the Board considers an application for medical parole as provided in [Mont. Code Ann. § 46-23-210 \(2009\)](#).

## **II. APPLICABILITY**

State prisons and prerelease centers.

## **III. DEFINITIONS**

Administrator – The official, regardless of local title (division or facility administrator, bureau chief, warden, superintendent), ultimately responsible for the division, facility or program operation and management.

BOPP – The Board of Pardons and Parole.

IPPO – The institutional probation and parole officer.

Medical Parolee – An offender who has been released on medical parole to community supervision by the Board of Pardons and Parole (BOPP).

## **IV. DEPARTMENT DIRECTIVES**

### **A. Eligibility Criteria**

1. An offender is eligible for medical parole if:
  - a. the offender is incarcerated in a state prison or was sentenced to a state prison and is incarcerated in a prerelease center;
  - b. the offender is not under sentence of death or life imprisonment without possibility of parole;
  - c. the sentencing court has not restricted parole for the offender pursuant to [Mont. Code Ann. § 46-18-202](#) or if the sentencing court has restricted the offender's parole, the sentencing court has granted the offender approval for medical parole consideration.
    - 1) if the offender is under a parole restriction, the Institutional Probation and Parole Office (IPPO) where the offender is incarcerated will send the [Court Approval/Denial](#) form to the sentencing judge;
    - 2) the offender may not submit a Medical Parole Application unless the court authorizes the application provided by the Sentencing Court Approval/Denial form.

**B. Medical Parole Application**

1. The IPPO or other Department representative, the offender, the offender's spouse, parent, grandparent, child, sibling, or recognized representative may apply for medical parole.
2. A person listed in subsection 1. must complete the [Medical Parole Application](#) in writing and submit it to the IPPO office at the facility where the offender is incarcerated or from which he or she was transferred.
3. The written application must include:
  - a. the reasons for the medical parole request;
  - b. the relationship of the offender to the requesting party;
  - c. a detailed description of the offender's proposed placement and medical care including the name, address and telephone number of the individual or facility official who has agreed to provide care to the offender;
  - d. a report of an examination and written diagnosis as specified in Section C. of this policy;
  - e. the name, address and telephone number of the physician who has agreed to provide medical care to the offender during the medical parole if there is one;
  - f. a detailed explanation of how the offender's medical care will be financed;
  - g. an explanation of the proposed arrangements for transporting the offender to the caregiver or placement; and
  - h. a signed [Health Information Request to Release Records](#) form provided by the IPPO.
4. A [Medical Parole Application Routing](#) form will be used to track and ensure the medical parole application is returned to the IPPO at each stage of application process. Applications will be considered invalid if submitted to locations other than the IPPO's office.

**C. Medical Documentation**

1. A physician licensed in Montana must complete a thorough medical examination of the offender and sign the written [Medical Examination Report](#). This report must be attached to the Medical Parole Application Routing Form and returned to the IPPO's office.
2. The Department may assist an offender in obtaining the appropriate medical documentation by arranging for a physician employed by the Department to complete the medical examination.
3. In the event that the offender, family member, or recognized representative requests a medical examination by a licensed physician who is not a Department employee, payment will be the responsibility of the offender or the requesting party.
4. The written diagnosis resulting from the examination must include:
  - a. determination that the offender suffers from a medical condition that requires extensive medical attention, or that the offender has a medical condition that will likely cause death within six months or less;
  - b. a description of the offender's medical condition, any diagnosis, and any physical incapacity;

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- c. a description of the medical attention required to treat the offender's medical condition;
- d. a prognosis regarding:
  - 1) the offender's likelihood of recovery from the medical condition;
  - 2) the extent of any potential recovery; and
  - 3) if appropriate, whether the offender's medical condition will likely cause death within six months.

**D. Placement Location**

1. The Department must approve the offender's proposed location for medical parole.
2. Placement may be in a hospital, nursing home, hospice facility, family home, or other location or program.

**E. Procedure**

1. The IPPO will forward the application and supporting documents to the Department medical director or other Health Services Bureau staff for review and a recommendation to accept or reject the application.
2. Following the Health Services Bureau's review and comments, the IPPO will forward the application to the administrator for review. The administrator will consult with BOPP concerning past BOPP dispositions before application is approved or denied.
3. If the administrator denies the medical parole request, he or she must provide the reasons for the disapproval in writing via the IPPO to the offender or the individual who requested the medical parole if different from the offender. The BOPP does not consider denied applications.
4. If the administrator approves the request, he or she will forward the application and Medical Parole Application Routing Form and required attachments to the IPPO office at the facility where the offender is incarcerated or from which he or she was transferred.
5. The IPPO, in consultation with the appropriate staff, will:
  - a. prepare or request the preparation of all pre-parole documents required by the BOPP; and
  - b. forward all pre-parole documents including the application and attachments and Medical Parole Application Routing Form to the BOPP.
6. Upon receipt of the application and attachments and Medical Parole Application Routing Form the BOPP will set a hearing date and notify the applicant.

**F. Medical Parole Plan**

1. If the BOPP approves the medical parole, a probation and parole (P&P) officer in the region in which the offender will reside will investigate the medical parole plan and send the findings to the BOPP.
2. If the BOPP approves the medical parole plan, the offender or recognized representative must sign and accept the standard conditions of parole and any special conditions set by

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the BOPP including the specific placement ordered by the BOPP. The offender and the P&P officer assigned to supervise the offender must follow the parole sign up procedures in accordance with *P&P Standard Operating Procedure 60-1, Initial Sign-up to Probation and Parole Supervision*.

3. If the BOPP rejects the offender's medical parole plan, the IPPO will determine if the concerns identified by the investigating P&P officer and the BOPP can be addressed and the plan resubmitted to the BOPP for its approval.

**G. Conditions of Medical Parole**

The BOPP may require additional conditions for the offender including, but not limited to, periodic medical examinations and an updated prognosis. These procedures will be done at the parolee's expense. If the BOPP requires such examinations and prognosis, the examining physician will submit copies of the results to the BOPP and Department. The offender must sign a health information release form for all medical treatment received during the medical parole.

**H. Consideration for Non-medical Parole**

1. When a medical parolee is 60 days from his or her non-medical parole eligibility date, the appropriate records department supervisor will inform the BOPP and supervising P&P officer of the non-medical parole eligibility date.
2. Upon notification that the offender is being considered for non-medical parole status, the supervising P&P officer is responsible to provide the BOPP with all pre-parole documents, reports and recommendations.
3. Within its regular course of business, the BOPP will conduct a hearing to determine whether the offender should remain on medical parole status or be granted a non-medical parole.

**I. Violations of Conditions of Medical Parole**

1. If it is alleged that the offender has violated the conditions of medical parole, or that the offender's medical condition has improved to the extent that he or she no longer requires extensive medical attention or is likely to pose a detriment to the offender, victim, or community, the supervising P&P officer will submit in writing a report of violation with the BOPP.
2. If the P&P officer submits a report of violation, the Department will follow its standard procedures for revocation of parole.

**J. Medical Parole Denials**

Decisions by the BOPP to deny medical paroles are final.

**V. CLOSING**

Questions concerning this policy should be directed to the appropriate administrator, Board of Pardons and Parole, or Department director.

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## VI. REFERENCES

- A. [46-18-202](#), MCA (2009), *Additional Restrictions on Sentence*; [46-23-210](#), MCA (2009), *Medical Parole*; [46-23-1025](#), MCA (2009), *Report to and Actions by Board*.
- B. 3-3198; *ACA Standards Supplement, 2008*; *Adult P&P Services, 3<sup>rd</sup> Edition*
- C. *P&P Standard Operating Procedure 60-1, Initial Sign-up to Probation and Parole Supervision*

## VII. ATTACHMENTS

[Court Approval/Denial Form PDF](#)

[Health Information Request to Release Records PDF](#)

[Medical Examination Report PDF](#)

[Medical Parole Application PDF](#)

[Medical Parole Application Routing Form PDF](#)