

COMPASSIONATE RELEASE VS. MEDICAL PAROLE

	Compassionate Release	Medical Parole
Eligibility	Terminal illness with 6 month or less to live or permanently medically incapacitated, provided that the incapacity did not exist at time of sentencing, and the conditions of release and treatment do not pose a risk to public safety. Not condemned or sentenced to life without the possibility of parole.	Permanently medically incapacitated, provided that the incapacity didn't exist at time of sentencing; and the conditions of release would not reasonably pose a threat to public safety. Not condemned or sentenced to life without the possibility of parole.
Application Process	CPHCS physician completes CDCR Chrono 128-C describing inmate's illness, present housing, physical condition, estimated life expectancy and desire to participate in compassionate release process. CMO and RMD reviews Chrono, if approved, goes to C&PR, then Warden, then to HQ. Inmate family member/designee may initiate process on behalf of the inmate.	Medical Parole Form in development CPHCS Physician may initiate request for medical parole. Family member or designee may also request consideration for medical parole by contacting head physician of the institution; Head Physician has 30 days to either forward medical parole application to Board of Parole Hearings or deny application; if denies, family or designee has to be notified in writing of reason for denial.
Parole Status	Resentencing or recalling (nullification) of original sentence, including an inmate being released to parole; Released to family or self. No return to custody if inmate's condition improves.	Original sentence cannot be recalled; Released on medical parole with any reasonable conditions of parole set by DAPO and/or BPH, which may include electronic monitoring; medical parole status would be voided if inmate recovers, and the inmate would be returned to prison unless he or she had otherwise reached his or her parole date.
Monitoring After Release	Released as free citizen or under conditions set by the court if released to parole supervision.	Division of Adult Parole Operations and CPHCS (for medical condition improvements)
Payment for Medical Services	Family or self or insurance plan or county aid, if qualifies.	Medical or Medicare if qualifies; CDCR will make hospital provider whole
Legislative Backing	Penal Code 1170 (d-e)	SB 1399
Final Deciding Authority	Sentencing Court	Board of Parole Hearings