

January 31, 2025

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helpingupmission.org

Hon. Marc Korman, Chair
Hon. Regina T. Boyce, Vice Chair
Members of the Maryland House Environment & Transportation Committee
250 Taylor House Office Building
251 Taylor House Office Building
Annapolis, Maryland 21401

Re: House Bill 93 Housing & Community Development – Homeless Shelter Certification Program

Dear Delegates Korman, Boyce and Members of the House Environment & Transportation Committee,

Since 1885, Baltimore City-based Helping Up Mission (HUM) has compassionately served Marylanders from across the state who are suffering from addiction, poverty, and homelessness. A description of our specific programs and services is attached for your reference. In 2024 alone, on our recovery campuses for men and women in the Historic Jonestown neighborhood of East Baltimore, HUM served 2,971 unduplicated men, women and women with children who face head-on the substance use, homelessness, and trauma that has devastated their lives and left their families without hope.

Helping Up Mission was founded by Abraham Bradenbaugh, a Methodist pastor who left the comforts of a typical church setting and went to the streets of Baltimore to "help people up" and out of their desperate circumstances. People of faith have kept HUM going and growing for 140 years. These thousands of donors, volunteers, and staff are compelled and called to do excellent work every day, to help our neighbors living in desperate life-threatening conditions. This is the kind of inspired work by faith-based organizations that should be given freedom from as much government regulation as possible to keep expenses low and effectiveness high.

As one of the largest residential recovery providers in Maryland for those experiencing addiction and homelessness, HUM acknowledges the necessity for shelters serving people suffering from homelessness to operate in compliance with health and safety codes and ordinances and follow risk management best practices. Organizations like ours welcomed inspections and have productive relationships with City, State, and federal regulatory agencies. In fact, today HUM reports to over fifty regulatory groups and is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF).

In the 2024 General Assembly, House Bill 577 and Senate Bill 1107 were introduced to create a Homeless Shelter Licensing Program, which would be administered by the Department of Housing and Community Development (DHCD). As enacted, the law required DHCD to conduct a study and report findings and recommendations to this Committee by July 1, 2025. Helping Up Mission and other providers in the homeless services space reasonably expected to be contacted by DHCD and to participate meaningfully in the department's study. Instead, without any input from HUM or other non-continuum-of-care providers, HB 93 (and its corollary Senate Bill 234) were introduced on January 8, 2025, apparently with the mandated study being merely a research report. From our review of the January 2025 DHCD report, the content appears to be drawn only from publicly available sources, with little to no input from the very providers who

would be most knowledgeable about, and profoundly impacted by, the duplicative compliance and regulatory system proposed in HB 93.

Without the benefit of a true study that considered provider input and experience, we submit that at least two critical questions must be answered: What is the problem that HB 93 seeks to fix? Why implement a far-reaching regulatory program without buy-in from those who directly serve our most vulnerable Marylanders?

Critical items to be addressed:

We assume HB 93 would not treat HUM's entire operation, which consists of two facilities distinctly serving men at a 500-bed building and women and their children at a 250-bed building, as a "homeless shelter" when that designation represents at most 10% of our total beds.

HUM's primary focus is addiction recovery, and we have a compelling need to prevent admission to people currently and actively using alcohol and/or drugs. Would HB 93 allow a carve out for providers like HUM who operate even their temporary overnight shelter beds as part of a recovery program? Would HB 93 acknowledge accreditation, such as by CARF, as meeting the operational requirements that DHCD will develop for this certification program?

We speak from tragic experience on this point: Introducing individuals in active addiction and alcohol abuse into a recovery community—even for one night—puts the sobriety of others at risk and leads to greater numbers of relapse, overdose, and even death.

HUM hopes these and other questions will be given due consideration, and respectfully, we propose the following amendments¹:

Amendment to 6-1401 (H) (3):

o "Homeless Shelter" does not include: A facility or program where the participant is enrolled in or identifies as contemplating enrolling in a residential addiction recovery program.

Amendment to 6-1401:

- o Strike subpart B (29) (Compliance with: ADA, Federal FHA, and other applicable Federal Laws) and substitute: Compliance with applicable Federal Laws.
- Add (F): The Department may accept accreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF) or similar accreditation/certification as satisfaction of the minimum requirements to be applicable to each homeless shelter certification class.

Amendment to 6-1405 (D) (13):

o Strike "current" and state as: Past use of alcohol or illegal drugs, except an individual assessed by shelter staff as a threat to the health, safety or property of others.

Respectfully,

K. Daniel Stoltzfus, MPA Chief Executive Officer

cc: Sky Woodward, Esq., General Counsel & Chief Administrative Officer, Helping Up Mission

Attachment – Overview of HUM Programs

¹ HUM proposes a non-exhaustive list of amendments in this written testimony and states that many more amendments are likely necessary to satisfy it and similar organizations.



OVERVIEW OF HUM PROGRAMS

MEN'S SPIRITUAL RECOVERY PROGRAM (SRP)

Beds - Up to 225

HUM's "Flagship" program. The Spiritual Recovery Program is the convergence of spirituality and medicine. It is an incredibly innovative recovery model integrating primary healthcare, behavioral health, and evidence-based treatment for substance use disorder with spiritual 12-step principles, workforce development, education, and life enrichment activities. For one full year, participants reside in a therapeutic community and participate in a wide array of comprehensive wrap-around services. HUM aims to empower men to return to their families and communities as leaders and role models.

WOMEN'S SPIRITUAL RECOVERY PROGRAM

Beds - Currently expanding up to 125

HUM's "Flagship" program. The Spiritual Recovery Program is the convergence of spirituality and medicine. It is an incredibly innovative recovery model integrating primary healthcare, behavioral health, and evidence-based treatment for substance use disorder with spiritual 12-step principles, workforce development, education, and life enrichment activities. Participants reside in a therapeutic community and participate in a wide array of comprehensive wrap-around services. This program moved from a leased 40-bed facility on Chase St. to 1216 E. Baltimore St, to our newly constructed 250-bed facility in March 2022.

NEXT STEP PROGRAM

Beds-(up to 20 beds on both men's and women's campuses)

This program operates in partnership with local healthcare institutions, we currently have an agreement with John Hopkins Hospital and Hopkins Bayview. With the advent of Population Health and Total Cost of Care, Maryland hospitals are rated on over-all patient care. The Next Step Program provides local hospitals with a safe, stable residential facility to refer patients who need additional or ongoing care, but do not need to be in a costly hospital bed. Patient care is shared between the health center and HUM. The goal of the program is to help the patient take the next step in the process of their recovery journey.

JOHNS HOPKINS UNIVERSITY (JHU) CORNERSTONE CLINIC AT HELPING UP MISSION

A six-month intensive outpatient program embedded within HUM's Spiritual Recovery Programs which exclusively serves SRP men and women offering substance use disorder (SUD) and mental health counseling in both individual and group sessions. Cornerstone Clinic is operated by JHU and is CARF-accredited and licensed provider who handles their own Medicaid billing for services provided to HUM clients. As part of the agreement with JHU, HUM provides both office space, group rooms and use of telehealth equipment for Cornerstone counselors.

JOHNS HOPKINS BAYVIEW HOSPITAL CENTER FOR ADDICTION & PREGNANCY

Beds - Up to 30 Women and their babies at 1216 E. Baltimore St.

Johns Hopkins Bayview operates a Comprehensive Addiction and Pregnancy (CAP) program that provides outpatient services and programming for pregnant women with substance use disorders. Both CAP and HUM clients often face poverty and homelessness, yet stable housing is an essential element in substance use treatment. The Johns Hopkins Bayview Center for Addiction & Pregnancy (CAP) partnership with HUM offers specialized SUD counseling, clinical and medical services for pregnant and post-partum women concurrently residing at the Women's SRP and their babies. The CAP program is operated by Johns Hopkins Bayview who is a licensed provider to offer medical and clinical services for which they manage the Medicaid billing for any services provided to HUM CAP clients. As part of the agreement with CAP, HUM provides both office space, group rooms and use of telehealth equipment for CAP clinical staff along with transportation to Bayview campus for medical appointments.

JOHNS HOPKINS 911 BROADWAY CLINIC HOUSING PROGRAM

Beds - Up to 38 Men at 1029 E. Baltimore St, Up to 14 Women at 1216 E. Baltimore St.

HUM has a long-standing relationship with John Hopkins Institutions, including Johns Hopkins Hospital and Johns Hopkins University. The Hopkins Housing Program was established in 2008 to a single-point residence for patients enrolled in JHH's Broadway Center for Addictions program. JHH pays a nightly per diem for each program participant, which includes housing and transportation to and from the hospital. While these men and women are not participants in the Spiritual Recovery Program, they do live within the same therapeutic recovery-based community and abide by the same policies and procedures as everyone else. Patients who complete treatment of this program can transition laterally into the Spiritual Recovery Program (SRP) to follow through on their employment and housing goals.

DEPARTMENT OF VETERAN'S AFFAIRS - MEN'S BRIDGE HOUSING

Beds - up to 18

This is a partnership program in collaboration with the Department of Veterans Affairs, providing short term transitional housing for homeless veterans as they work towards accomplishing their goals of securing employment or identifying permanent housing (HUDVASH).

DEPARTMENT OF VETERAN'S AFFAIRS – FEMALE EMERGENT BEDS

Beds - up to 5

This is a partnership program in collaboration with the Department of Veterans Affairs, providing short term transitional housing for female homeless veterans as they work towards accomplishing their goals of securing employment or identifying permanent housing.

GRADUATE TRANSITIONAL HOUSING

Beds - varies based on census on the men's and women's campuses, currently 125-150

Established in 2004, this program provides up to two years of transitional housing following completion of the Spiritual Recovery Program. This aftercare housing provides graduates with an opportunity to transition into more independent living while still reaping the benefits of accountability from the supportive recovery community.

SEMI-PERMANENT SUPPORTIVE HOUSING PROGRAM

Beds - 21 (each one of three row homes has a capacity of 7)

This program provides the next level of independent living for men who have completed two years in the Graduate Transitional Housing Program. Participants enjoy independent living within close proximity of the HUM supportive campus community. About half of these men are HUM residential staff members. This significant number of staff living on and near the main campus helps to maintain a consistent culture during evening and weekend hours.

GATEWAY TO TRANSFORMATION PROGRAM

Beds - Up to 28 at the Center for Women & Children

The Gateway Program is an up to 30-day residential program is designed for unaccompanied women who need help overcoming life controlling crises or trauma. Our clients include women experiencing homelessness, individuals struggling with drug or alcohol addictions, women fleeing domestic violence and countless others who have run out of options. The primary strategy of this new initiative is to assess and stabilize the client to be placed in the appropriate solution pathway.

OVERNIGHT GUEST SERVICES

Beds - Up to 60 on Men's Campus

Our longest, historical program since our inception in 1885, serves men experiencing homelessness. Individuals sleep in a dormitory style bed and receive two nutritious meals, a hot shower, and clothing. Beyond caring for these basic needs, the program offers hope, encouragement, and the opportunity for real and permanent change. Participants who acknowledge the need for help with alcohol or substance use disorder treatment are interviewed for our residential recovery program.

KEY PROGRAM ACRONYMS AND ABBREVIATIONS

OGS: HUM's service to individuals experiencing homelessness, Overnight Guest Services

911 Program: HUM's partnership and contract with Johns Hopkins Broadway Center for Addiction

to provide residential services for men and women in this outpatient treatment program which includes medication-assisted treatment and individual/group

counseling.

CAP: The Johns Hopkins Bayview Comprehensive Addiction & Pregnancy (CAP)

partnership with HUM which offers specialized SUD counseling, clinical and

medical services for pregnant and post-partum women concurrently residing at the

Women's SRP and their babies.