## **Testimony to Support SB 172: Maryland Health Equity Resource Act**

To: Senator Guy Guzzone and the Members of the Senate Budget and Taxation Committee

From: Betty McGarvey Crowley and Christine Hager, Ph.D Co-Chairs, Health Task

Force, Unitarian Universalist Legislative Ministry of Maryland

Date: January 27, 2021

The Unitarian Universalist Legislative Ministry of Maryland (UULM-MD) is an advocacy organization, with members in UU congregations throughout the state. Since its founding in 2005, health care issues have been a priority and we are a member of the Health Care for All Coalition. As a faith community UUs translate our focus on health equity into actions that reflect our belief in the inherent worth and dignity of each person. UULM-MD supports SB 172.

This proposed legislation would provide services to underserved areas of the state. It is modeled on the 2012-2016 Health Enterprise Zones (HEZ) Program which increased access to health resources, improved residents' health, reduced hospital admissions, and created cost savings. The new Equity Act will address the poor health outcomes that contribute to racial, ethnic, and geographic health inequities which have been evident in the COVID-19 pandemic. If this program had continued, residents of underserved zones could have received more appropriate education on prevention, testing, vaccinations, and treatment for COVID-19.

From the examples of the prior HEZ programs, we learned how effectively people can be served in their communities when local groups and individuals partner to determine the needs, develop programs to meet them, and hire staff who can relate to the residents. However, many of the successful HEZ funded programs were discontinued as there was no sustained funding. The adoption of SB 172 could again fund equity zones to facilitate these highly effective strategies. For example, funding will enable hiring of "community health workers" who are members of the underserved communities, and who relate to their fellow community members – by knowing their barriers, culture and language. These workers can help residents access resources like transportation, health insurance and free medication from pharmaceutical company programs, and guide them in following their doctors' advice, all of which help prevent hospitalization, and ER visits, and enhance wellness. The bill would help recruit and retain needed health professionals for these areas by providing tax credits which aids with huge student loans. It is inspiring to meet dedicated people working to advance health in these underserved communities and hear of the success of collaboration (between the

doctors, nurses, nurse practitioners, community health workers, pharmacists, social workers, hospitals, universities, and community organizations.) They are effective as they gain the trust of local residents, know their concerns, and what is needed in their community to meet the disparities.

The proposed raise by a mere one cent on a dollar for the alcohol beverage tax is a reasonable way to help this program become quickly implemented and continued. The tax would be raised initially on beverages sold in liquor stores; but delayed in restaurants and bars that are being hurt by the economic downturn. When the tax was last raised in 2011, it helped support health services and decreased significantly binge drinking and underage drinking. Maryland's tax rate is below rates in surrounding jurisdictions and this tax increase is supported by Maryland residents.

UULM-MD asks you to vote for it. This program can reduce the obvious and unconscionable lack of programs that meet the needs of those who are often forgotten.

Thank you!

Betty McGarvie Crowley and Cristine Hager, Ph.D., Co-Chairs, Health Task Force