



Testimony to the Senate Budget and Taxation Committee; Finance Committee

Support for SB 172: Health Equities Resource Communities Act

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The American Association of University Women of Maryland supports the passage of SB 172. Health inequities in underserved communities persist in Maryland as evidenced by the continuing high death rates during the pandemic in our Hispanic and African American communities; by the high death rate for African American women during pregnancy; and by the high infant mortality in the black community.

The Health Equity Resource Communities have the same focus and structure as the successful 2012-2016 Health Enterprise Zones, which increased access to health resources, improved residents' health, reduced hospital admissions, and created cost savings. But this program will not end after five years. Because the funding would result from a permanent one cent per dollar increase in the alcohol tax, the benefits from the program will make a lasting impact on the health of the underserved communities. This funding would help create new mental health and substance use disorder programs. Communities would compete for grants, tax incentives and health care provider loan repayment assistance to reduce disparities and improve health equity.

Even before the pandemic, life expectancies were considerably less for people living in these underserved Maryland communities. In Baltimore City, life expectancy was 20 years less for people in certain West Baltimore neighborhoods, compared to those in more affluent whiter areas just a few miles away. The expectancy for underserved communities inside the beltway in Prince George's County was 16% below predominantly white suburbs. We can and should act to end these disparities.

The American Association of University Women of Maryland urges passage of SB 172 to improve the health of our underserved Marylanders.