

Office of Government Relations 88 State Circle Annapolis, Maryland 21401

HB 1005

February 23, 2022

TO: Members of the House Health and Government Operations Committee
FROM: Natasha Mehu, Director, Office of Government Relations
RE: House Bill 1005 - Maryland Medical Assistance Program - Community Violence Prevention Services

POSITION: Support

Chair Pendergrass, Vice Chair Pena-Melñyk, and Members of the Committee, please be advised that the Baltimore City Administration (BCA) **supports** House Bill (HB) 1005.

HB 1005 adds certified Violence Prevention Professionals (VPP) to the list of recognized health care providers that are eligible for reimbursement under the Maryland Medical Assistance Program.

In 2015, the National Uniform Claims Committee allowed state Medicaid agencies to add VPPs services as a covered benefit for violently injured patients because they are at high risk of death from revictimization. In 2018, Philadelphia's Healing Hurt People program was the first Hospital-based Violence Intervention Program (HVIP) to receive funding through Medicaid to provide comprehensive and trauma-informed services. Illinois and Connecticut recently passed laws to begin Medicaid reimbursement for violence prevention services that are going into effect this year. These laws will bring programmatic funding broadly to service providers throughout the states, as opposed to the single-site contract with Healing Hurt People.

Maryland should be at the forefront of expanding hospital-based services to prevent and intervene in violence in our communities because violently injured patients are at high risk of being revictimized. Programs in Baltimore City have already demonstrated that these programs

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can be cost-effective in preventing fatal reinjury. In 1998, Dr. Carnell Cooper started the Violence Intervention Program at the University of Maryland Medical Center to stop the "revolving door phenomenon" of patients being discharged without counseling or services and getting readmitted from serious injuries. This partnership between the hospital and Parole and Probation continues to receive national attention because the academic evaluation found that it truly saved lives. Baltimore City has continued to maintain its leadership in this growing field. In fact, this bill is similar to the law passed in Connecticut, which was the brainchild of University of Maryland School of Medicine emergency physician Dr. Kyle Fischer ten years ago.

Baltimore City's Mayor's Office of Neighborhood Safety and Engagement (MONSE) currently partners and provides funding with hospital-based violence intervention programs at MedStar Harbor Hospital, St. Agnes Hospital, and LifeBridge Health. Last month, Mayor Scott and MONSE convened leaders from every local hospital in Baltimore City and asked them to partner with us to expand these services. For these violence intervention and prevention partnerships to succeed, increased and stable funding is necessary.

Medicaid is not just a new source of stable funding. Mayor Scott is committed to a public health approach to gun violence and this legislation provides an opportunity to further integrate community violence interventions into the healthcare system. This bill will allow individual underfunded programs to innovate, connect to the rest of the community violence intervention ecosystem Baltimore City is creating, and make sure we recruit, train, and support smart passionate professionals to do this work.

We respectfully request a *favorable* report on HB 1005.