



Maryland
Hospital Association

February 1, 2024

To: The Honorable Brian J. Feldman, Chair, Senate Education, Energy, and the Environment Committee

Re: Letter of Support - Senate Bill 308 - Housing and Community Development - Just Community Designation

Dear Chair Feldman:

On behalf of the Maryland Hospital Association's (MHA) 62 member hospitals and health systems, we appreciate the opportunity to comment on Senate Bill 308.

As part of MHA's [commitment to racial equity](#), Maryland hospitals are evaluating factors inside and outside of their organizations to promote equity and opportunities to address social determinants impacting Marylanders' health. We are working with members of our Health Equity Advisory Committee to identify partners and external opportunities to support these efforts. Hospitals embrace culturally responsive strategies to address disparities in health outcomes to ensure all Marylanders can be as healthy as possible.

SB 308 would establish the "Just Community" designation to actively improve health and social equity in communities that have been disproportionately affected by negative state, federal, and local policies. Undoing the effects of generations of disinvestment and unequal resources in communities around the state is critical for a comprehensive approach to bolster success on the state's population health and health equity strategies.

Maryland hospitals care for millions of people each year, around-the-clock. In addition to the care they provide, they continuously evaluate factors inside and outside of their organizations to promote the health and the well-being of the populations they serve and the tens of thousands they employ. Hospitals are committed to addressing the social drivers of health, which includes cross-sector collaboration and investments in the community.

Maryland is consistently identified as one of the richest states in the nation, with a median household income of approximately \$90,000—well above the national average.¹ However, the state also has the dubious distinction of having one of the highest rates of income inequality.

Marginalized communities in Maryland struggle with social and economic adversity. Access to educational opportunities, affordable housing, reliable transportation, healthy food, safe play spaces, and health care, are not equally distributed throughout the state. To fully address the

¹ US News & World Report. Fitzgerald, Madeline. "The 10 Richest States in America." [usnews.com/news/best-states/slideshows/10-wealthiest-states-in-america?onepage](https://www.usnews.com/news/best-states/slideshows/10-wealthiest-states-in-america?onepage) (accessed Oct. 7, 2022)

systemic issues facing many of Maryland’s communities, and meaningfully improve the health of all Marylanders, issues beyond direct medical care must be considered.

Environmental, economic, and social factors influence health outcomes and contribute to health inequities.² The prioritization of communities that have been historically denied—whether intentionally or unintentionally—opportunities to access resources for success is critical to solve and to address adverse impacts to health-related systemic inequity.

For these reasons, we request a *favorable* report on SB 308.

For more information, please contact:
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² Centers for Disease Control and Prevention. “NCHHSTP Social Determinants of Health (SDH) Frequently Asked Questions.” [cdc.gov/nchhstp/socialdeterminants/faq.html](https://www.cdc.gov/nchhstp/socialdeterminants/faq.html). (accessed February 17, 2023).