

February 14, 2017

The Honorable Lawrence J. Hogan, Jr.  
Governor  
The State House  
100 State Circle  
Annapolis, MD 21401



Dear Governor Hogan:

Last month, I wrote to you on behalf of the Maryland Medicaid Advisory Committee to ask for your active leadership in Washington D.C. as Congress and the Administration debate the future of Medicaid and the Affordable Care Act. Today, I write as President and CEO of Health Care for the Homeless, a community-based, nonprofit organization providing a broad range of health care and support services for nearly 10,000 of Maryland's most vulnerable residents in Baltimore City, and in Baltimore and Harford counties. We are deeply concerned about proposals currently under discussion that would jeopardize coverage for low-income adults and could change the very structure of a program that already gives Maryland great flexibility. Your personal involvement as governor of an "expansion state" can help protect a program that is vitally important to beneficiaries, to providers such as Health Care for the Homeless and, as you know, to Maryland's broader health care system.

As a federally qualified health center (FQHC) delivering outpatient primary and behavioral health care, we have always seen patients regardless of their ability to pay or insurance status. Unfortunately, few of those we served qualified for health insurance, preventing us from better addressing their significant health care needs. As a result of lack of insurance and other barriers, people experiencing homelessness tended to be frequent users of emergency departments who incurred high-cost inpatient hospital stays, as well as remaining at high risk for re-admission due to poor outcomes. Medicaid expansion transformed our entire business model. Health coverage for our patients dramatically increased from just 30% in 2013 to about 90% today. For patients, this means being able to access a broad range of prescription drugs, life-saving specialty care, preventive care and behavioral health treatment. Many of our clients have finally been able to address longstanding health care problems so they are better able to reconnect to family, employment and permanent housing. **Because of the stability Medicaid offers, we are better able to prevent and end homelessness.**

Medicaid has also helped us deliver higher-quality health care. The financial stability that Medicaid brings has allowed us to transition from being a mostly grants-funded organization to one that has a solid foundation of third-party billing where grants complement Medicaid rather than fund core medical services. As a result, we've been able to give greater attention to expanding our quality improvement projects and improving care coordination activities with a focus on health outcomes. Medicaid has also allowed us to better leverage grant opportunities so we can expand adult dental care and services in supportive housing—both areas of significant need in Maryland that are not currently covered in the existing program. Critically, we have expanded our workforce, adding more than 100 jobs since 2013 and paying a living wage that prevents our staff from qualifying from the services we offer. **In short, Medicaid makes us better health care providers and better employers.**

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**Everyone deserves to go home.**

Few policy changes in recent years have so positively transformed the health care system for vulnerable people and those who serve them. One of our clients recently noted that “I would have died without Medicaid.” And our Director of Behavioral Health remarked, “Before expansion, I felt suffocated by the tremendous burden on me as a provider because my clients suffered so much without insurance. Now that my clients have greater access to the care they need, I feel like I can breathe again.”

As the leader of a safety net provider operating in Maryland for 32 years, I have never seen so much potential for transforming the state’s health care system to achieve better health and lower total costs. Whether it is maintaining our unique all-payer model of hospital financing through global budgets, or leveraging innovative delivery models in our recent 1115 HealthChoice Waiver approval, Medicaid is central to that success. Low-income people have better access to addiction treatment, mental health services and comprehensive medical care that ever before – and this benefits us all. But continued success in this work depends on the vast majority of people having comprehensive insurance that is not individually capped or limited by block grants, requiring additional state general funds to help make existing care models “whole.” These proposed financing changes will only reduce Maryland’s flexibility and make it harder to fund the services it currently provides. **Because of the flexibility already built into Medicaid, Maryland can continue to implement an evidence-based health care system that is not artificially limited by restrictive block grants.**

I am emboldened by the progress that Maryland is making to improve health and lower costs, especially for vulnerable people. Thank you for the support you have given to Medicaid within our state. Your voice in support of this program is needed urgently at the national level. Please join other Republican governors by lending your strong personal support to Medicaid in conversations with congressional leadership and by bringing greater public attention to the importance of Medicaid to our state’s economy. I would welcome the opportunity to discuss these important matters in greater detail and to support your work to retain the flexibility of Medicaid in Maryland’s unique health care system. Please do not hesitate to contact me at (443) 703-1301 or at [klindamood@hchmd.org](mailto:klindamood@hchmd.org).

Sincerely,



Kevin Lindamood, MSW  
President & CEO  
Health Care for the Homeless

cc: Dennis R. Schrader, Secretary, Maryland Department of Health and Mental Hygiene  
Shannon McMahon, Deputy Secretary for Health Care Financing, DHMH