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TO: The Honorable Maggie McIntosh, Chair
Members, House Appropriations Committee
The Honorable Carol L. Krimm

FROM: Pam M. Kasemeyer
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DATE: March 8, 2016

RE: **SUPPORT** – House Bill 1467 – *Department of Human Resources – Housing Counselor and Aftercare Program*

The Maryland State Medical Society (MedChi), which represents more than 7,600 Maryland physicians and their patients, supports House Bill 1467.

House Bill 1467 establishes a Housing Counselor and Aftercare Program in the Department of Human Resources (DHR) to provide grants to local jurisdictions to assist clients in obtaining and maintaining permanent affordable housing. Poverty in and of itself creates tremendous challenges to an individual's ability to successfully negotiate life's challenges. Homelessness exacerbates those challenges. Those unable to maintain permanent affordable housing often are unable to secure stable employment; struggle to obtain food, clothing and other essentials; and face increased health challenges associated with homelessness and the lack of a stable environment.

Currently, DHR's "Housing Counselor Program", which is not established in statute, provides grant support to only a limited number of programs that support currently homeless families beyond indirect supportive programs. Grant funds are used to provide funding to support a staff position that assists families or those at risk of homelessness in obtaining and maintaining housing. Funds available from this program may also be used for staff costs or client expenses associated with obtaining housing. These client expenses may include the first month's rent, security deposit, certain moving costs, and certain transportation costs. DHR provides these grant funds to either nonprofit organizations or local government entities. The program is currently available in five jurisdictions (Baltimore City and Baltimore, Harford Montgomery, and Washington counties).

Passage of House Bill 1467 will establish this program in statute, expanded to include not only assistance with obtaining affordable housing, but also in maintaining that housing once

secured. It assures that this program, which has been successful in the jurisdictions where it is available, is established statewide and becomes a permanent component of the State's various initiatives to address homelessness and the multifaceted negative impact it has on an individual's health and likelihood of establishing a stable and self-sufficient life. DHR will be required to provide grant funding to local jurisdictions that apply and agree to provide the range of services, client interaction and follow up, and other program requirements delineated in the bill and required by DHR in its development of the expanded program. While there is a fiscal cost to the expansion of the program, it is modest compared the individual and societal costs associated with homelessness.

The impact on health status alone is likely to offset the cost of the program. There is clear evidence that demonstrates an individual's health status, both short and long term, is severely compromised by homelessness. Inability to manage chronic disease, increased incidence of addiction and behavioral health problems, and a myriad of other health challenges, plague those who are homeless. The cost of providing treatment to these individuals is extraordinarily high as they often cannot or do not access services until they are severe and the reoccurrence of health conditions/challenges is extremely high due to a lack of a safe and stable housing environment where they can heal and prevent a reoccurrence. Prevention of, or effective management of, these health issues can dramatically change the potential for an individual to become a self-sufficient productive individual but often housing must be secured before health concerns can be appropriately diagnosed, managed and/or treated.

MedChi strongly supports the creation of this program. Its passage will ensure that those who are homeless or at risk of becoming homeless are assisted in securing housing or maintaining the housing they have. It will assist in providing a stable basis for these individuals to address the other challenges they face – unemployment, economic instability and significant health problems. MedChi urges a favorable report.

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