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**SB 172 Maryland Health Equity Resource Act  
Support  
Senate Budget and Taxation and Senate Finance Committees  
January 27, 2021**

Good afternoon Chairs Guzzone and Kelley and members of the Senate Budget and Taxation and Senate Finance Committees. My name is Tammy Bresnahan and I am the Director of Advocacy for AARP MD. As you may know, AARP Maryland is one of the largest membership-based organizations in Maryland, encompassing over 850,000 members. I represent AARP MD and its members in support of SB 172 Maryland Health Equity Resource Act.

AARP is a nonpartisan, nonprofit, nationwide organization that helps people turn their goals and dreams into real possibilities, strengthens communities and fights for the issues that matter most to families such as healthcare, employment and income security, retirement planning, affordable utilities and protection from financial abuse.

SB 172 Maryland Health Equity Resource Act will require Maryland to create and fund Health Equity Resource Communities to help reduce health inequities. The fund will provide grants, tax incentives, and health care provider loan repayment assistance in the state with poor health outcomes that contribute to health inequities. The communities will be modeled after Health Enterprise Zones Program which successfully increased access to health resources. Supporting health will help reduce preventable hospital admissions, which will result in lower overall health care costs, including lower insurance premiums for everyone. AARP supports funding the Health Equity Resource Communities through a one cent per dollar increase in the state alcohol beverage sales tax.

COVID-19 has revealed that communities of color are really suffering as it relates to health disparities. AARP MD has joined this coalition to support legislation during the 2021 legislative session that will establish Health Equity Resource Communities (HERC). The legislation will allow communities to be eligible for grants, tax incentives and health provider loan repayment assistance.

The Coronavirus pandemic (COVID-19) has exposed the vast shortcomings within our health system and the critical importance of affordable health coverage and care for all people and all families. Gaps in health and healthcare exist in Maryland and across the United States that lead to inequitable outcomes referred to as health disparity. The inequitable outcomes refer to the rate of incidence, prevalence, mortality, burden of disease, or any other adverse health condition; and is closely linked with social, economic, or environmental disadvantage for any specific population group, including a group based on education, income, location, health status, race, ethnicity, gender, sexual orientation, or age.

Disparities in life expectancy are especially apparent in predominantly Black areas. Gains in life expectancy for 50-year-old residents in majority Black counties lag almost three decades behind gains experienced by

Real Possibilities

residents of counties with less than five (5) percent Black residents, the report found. That means it took mostly Black counties until 2008 to experience the same life expectancy that counties with smaller Black populations had in 1980. (Future AARP reports will include additional analyses of trends among Hispanic, Native American and Asian American residents.) One explanation: Counties with a higher percentage of residents of color could also have a higher number of segregated neighborhoods and communities, and segregated communities can concentrate poverty, the report points out, further restricting access to quality schools, safe parks, good jobs, and banks and capital for business development. Chronic stress from systemic racism and discrimination in health care have also put predominantly Black communities at a disadvantage when it comes to life expectancy.<sup>1</sup> Evidence is clear that counties with more Black residents are having worse outcomes, and it's incumbent on all of us to make sure that everyone has the opportunity to live a longer and healthier life. Those extra years are another anniversary, potentially another grandchild — that's what people are missing out on.<sup>2</sup>

AARP through our advocacy, programs, and services, fight against discrimination, advocate for access to health care, and work to improve the lives of all people, especially those most vulnerable. As we consider this moment in time, it's clear, health equity is more important than ever. AARP will use its voice, resources, and trust in our brand to continue our fight for what is right so all people can live a life of dignity regardless of race, age, or income. This is why we support SB 172 Maryland Health Equity Resource Act.

We respectfully ask the committees to respectfully pass SB 172. If you have questions or comments please contact Tammy Bresnahan at [tbresnahan@aarp.org](mailto:tbresnahan@aarp.org) or by calling 410-302-8451.

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<sup>1</sup> [Where you Live at 50 Could Determine How Long You Live](#)

<sup>2</sup> IBID