



## OFFICE OF RACIAL EQUITY AND SOCIAL JUSTICE


Marc Elrich  
County Executive

Tiffany Ward  
Director and Chief Equity Officer

### MEMORANDUM

April 24, 2025

To: Jennifer Bryant, Director  
Office of Management and Budget

From: Tiffany Ward, Director  
Office of Racial Equity and Social Justice 

Re: Racial Equity Impact Assessment (REIA) for Supplemental Appropriation (SA) #25-58 FY25 Operating Budget, Montgomery County Government, Department of Health and Human Services, Montgomery Cares, \$974,664

- I. **FINDING:** The Office of Racial Equity and Social Justice (ORESJ) finds that *Supplemental Appropriation (SA) #25-58 FY25 Operating Budget, Montgomery County Government, Department of Health and Human Services (DHHS), Montgomery Cares (MCares)* is likely to advance racial equity as MCares aims to provide access to health care services for uninsured residents of Montgomery County who – due to systemic and structural reasons – are more likely to identify as Black, Indigenous, or People of Color (BIPOC).
- II. **BACKGROUND:** The purpose of *SA #25-58 FY25 Operating Budget, Montgomery County Government, DHHS, MCares*, is to address the FY25 budget shortfall in the MCares program associated with enrollment increases and to expand to a new clinic. The increase is needed because MCare's utilization is projected to reach 76,449 primary care encounters by the end of FY25, a 6.18% increase over initial projections of 72,000 encounters. Given enrollment growth, the program budget is expected to be exhausted in May 2025. Additionally, through expanded funding provided by this supplemental request, the program has the ability to expand its services by including the Islamic Center of Maryland's (ICM) Care Clinic, which is committed to serving underserved populations in the County. Given the increased need for the program, a FY25 supplemental budget appropriation of \$974,664 is needed in order to meet projected demand, avoid the development of a waitlist, prevent service stoppages and other impacts, and expand the MCares network.

**III. ANALYSIS:** MCares is comprised of different health care agencies providing community-based medical care to uninsured adults throughout Montgomery County.<sup>1</sup> The program offers medical check-ups by a doctor/nurse, sick visits by a doctor/nurse, medications, lab tests, x-rays, access to specialists, access to oral health care, and access to other health programs, with eligibility being determined at one of the participating clinics where staff can assist with eligibility determination.<sup>2</sup> Funding this supplemental request has the ability to mitigate disparities in access to health care amongst BIPOC individuals as systemic inequities related to health care access and affordability have resulted in low-income BIPOC individuals often lacking health insurance coverage—with 7.4% of Black and 22.4% of Latino residents of Montgomery County being uninsured compared to 3.6% of their White counterparts.<sup>3</sup> Additionally, this supplemental request can alleviate strain on the broader health care system, as those accessing the MCares program would be less likely to seek emergency care for preventative or less urgent medical needs.

ORESJ has conducted numerous Racial Equity Impact Assessments (REIAs) covering systemic health inequities, including barriers to health insurance coverage for children, and their impact on racial disparities in access to healthcare and health outcomes in the County. The following REIAs focus on the impacts of these disparities on the uninsured and the barriers faced when accessing health insurance coverage and healthcare:

- REIA for Supplemental Appropriation #25-34 Health and Human Services, Care For Kids Program  
<https://www.montgomerycountymd.gov/ore/Resources/Files/25-34.pdf>
- REIA for Supplemental Appropriation Supplemental Appropriation #23-80 Local Health Department Health Disparities Grant  
<https://www.montgomerycountymd.gov/ore/Resources/Files/23-80.pdf>
- REIA for Supplemental Appropriation #23-68 – Amendment to the FY23 Operating Budget for Maryland School-Based Health Center Program  
<https://www.montgomerycountymd.gov/ore/Resources/Files/23-68.pdf>
- REIA for Supplemental Appropriation #22-49 Centers for Disease Control and Prevention Cooperative Agreement Cooperative Agreement  
<https://www.montgomerycountymd.gov/ore/Resources/Files/22-49.pdf>

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<sup>1</sup> Montgomery County Government, Department of Health and Human Services. *Montgomery Cares (Medical Care for Uninsured Adults)*. 2025. Available at: <https://www.montgomerycountymd.gov/HHS-Program/PHS/PHSAdultMedforUninsured-p1440.html#more>

<sup>2</sup> Ibid.

<sup>3</sup> Jupiter Independent Research Group. *Racial Equity Profile Update: Montgomery County*. 2023. Available at: <https://www.montgomerycountymd.gov/ORE/Resources/Files/JUPITERRACIALEQUITYPROFILE.pdf>

The expansion of Medicaid through the Affordable Care Act reduced the nation's uninsured rate by making health care coverage available for eligible low-income adults under 65 who previously did not have access to health insurance. In Maryland, this resulted in a 78% increase in Medicaid and CHIP (Children's Health Insurance Program) participation between 2013 and 2024.<sup>4</sup> Despite its heavy reliance by those in greatest need of health insurance coverage, the current Congress is actively discussing changes to Medicaid policies related to eligibility and coverage to cut \$600 to \$800 billion from the Medicaid program over the next 10 years—a huge percentage of the federal Medicaid budget.<sup>5</sup> A massive reduction in Medicaid funding such as this could result in states and localities having to make up for this huge decrease in federal funding by supplementing the loss themselves to maintain current levels of enrollment for program participants, or it could result in large reductions in the program as states and localities may have to make steep cuts to participation.<sup>6</sup> This, coupled with a U.S. economy currently in flux as it faces a potential recession fueled by increasing unemployment, stock market volatility, and the implementation of tariffs, has the potential to place massive strain on states and counties that have taken up the Medicaid expansion. Funding programs such as MCares have the ability to address potential harmful policies at the federal level as they relate to reducing health disparities for those experiencing the greatest burdens in accessing care. As such, ORESJ stresses the importance of providing the resources needed to fund programs such as these.

Of note, immigrants with no legal status (who often work and contribute fiscal resources to the communities in which they work and live) are unable to access federal health care programs and often go uninsured or are reliant on local programs. Current federal directives have resulted in these communities' accessing services and programs they are eligible for, which serve to increase their quality of life at lower rates, for fear of negative interactions with systems that could result in their detainment and/or ultimate deportation. ORESJ emphasizes that programs such as MCares should prioritize the unique needs of these communities and work to establish a culture of trust so that individuals can access the resources that they need and deserve.

cc: Dr. James C. Bridgers, Jr., Director, Department of Health and Human Services  
Tricia Swanson, Director, Strategic Partnerships, Office of the County Executive

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<sup>4</sup> Healthinsurance.org. *Medicaid eligibility and enrollment in Maryland*. 2025. Available at: <https://www.healthinsurance.org/medicaid/maryland/>

<sup>5</sup> Johns Hopkins Bloomberg School of Public Health. *The Potential Impacts of Cuts to Medicaid*. 2025. Available at: <https://publichealth.jhu.edu/2025/the-potential-impacts-of-cuts-to-medicaid>

<sup>6</sup> Buettgens, M. *Reducing Federal Support for Medicaid Expansion Would Shift Costs to States and Likely Result in Coverage Losses*. 2025. Available at: [https://www.urban.org/sites/default/files/2025-02/Reducing\\_Federal\\_Support\\_for\\_Medicaid\\_Expansion\\_Would\\_Shift\\_Costs\\_to\\_States\\_and\\_Likely\\_Result\\_in\\_Coverage\\_Losses\\_0.pdf](https://www.urban.org/sites/default/files/2025-02/Reducing_Federal_Support_for_Medicaid_Expansion_Would_Shift_Costs_to_States_and_Likely_Result_in_Coverage_Losses_0.pdf)