



December 12, 2025

The Honorable Robert F. Kennedy
 Secretary
 U.S. Department of Health and Human Services
 200 Independence Ave, SW
 Washington, DC 20201

Re: Maryland HealthChoice 1115 Extension Application

Dear Secretary Kennedy:

Thank you for the opportunity to submit comments on the Maryland HealthChoice 1115 Extension Application.

The undersigned organizations represent millions of individuals facing serious, acute and chronic health conditions. We have a unique perspective on what individuals and families need to prevent disease, cure illness and manage chronic health conditions. The diversity of our organizations and the populations we serve enable us to draw upon a wealth of knowledge and expertise that is an invaluable resource regarding any decisions affecting the Medicaid program and the people that it serves. We urge the Centers for Medicare and Medicaid Services (CMS) to make the best use of the recommendations, knowledge and experience our organizations offer here.

Our organizations are committed to ensuring that Maryland's Medicaid program provides quality and affordable healthcare coverage. We applaud the state's work to improve access to care in this waiver and support the proposal to provide targeted pre-release services for justice-involved adults otherwise eligible for Medicaid. Our organizations urge CMS to approve this proposal and offer the following comments on the Maryland HealthChoice Extension:

Our organizations support Maryland's proposal to reauthorize a targeted set of Medicaid services for justice-involved populations who are otherwise eligible for Medicaid for up to 90 days prior to release. This is consistent with both the goals of Medicaid and CMS guidance and is an important step in improving the continuity of care. Individuals with substance use disorder (SUD), serious mental illness (SMI), or both will be eligible for targeted services. Services will include comprehensive case management, medication-assisted treatment (MAT) with counseling, and a 30-day supply of prescription

medications upon release. The state estimates that 1,450 individuals are eligible for services annually under this demonstration.

This proposal will help these high-risk populations access critical supports needed to treat physical and behavioral health conditions. For example, studies in Washington and Florida reported that people with severe mental illness and Medicaid coverage at the time of their release were more likely to access community mental health services and had fewer detentions and stayed out of jail longer than those without coverage.¹ By aiming to reduce post-release overdoses and deaths, this proposal is also aligned with federal efforts combat the opioid crisis, first declared a public health emergency by the Trump Administration in 2017.²

Given the importance of pre-release services, our organizations urge CMS to work with the state to extend these services to all justice-involved individuals in the state, including youths and those in county and local correctional facilities. CMS should also work with the state to ensure that existing state spending on healthcare for the justice-involved population is supplemented, not replaced when implementing this policy.

Our organizations support Maryland's proposal to reauthorize pre-release services for the justice-involved population and we urge CMS to approve this proposal. Thank you for the opportunity to provide comments.

Sincerely,

American Cancer Society Cancer Action Network
American Heart Association
American Lung Association
Blood Cancer United
Coalition for Hemophilia B
Epilepsy Foundation of America
Hypertrophic Cardiomyopathy Association
Legal Action Center
National Patient Advocate Foundation
Susan G. Komen
The AIDS Institute
WomenHeart
ZERO Prostate Cancer

¹Joseph Morrissey et al. Medicaid Enrollment and Mental Health Service Use Following Release of Jail Detainees with Severe Mental Illness. *Psychiatric Services* 57, no. 6 (June 2006): 809-815. DOI: 10.1176/ps.2006.57.6.809, and Joseph Morrissey et al. The Role of Medicaid Enrollment and Outpatient Service Use in Jail Recidivism Among Persons with Severe Mental Illness. *Psychiatric Services* 58, no. 6 (June 2007): 794-801. DOI: 10.1176/ps.2007.58.6.794.

²Ongoing Emergencies & Disasters. Centers for Medicare and Medicaid Services. Sept 10 2024. Available at: <https://www.cms.gov/about-cms/what-we-do/emergency-response/current-emergencies/ongoing-emergencies>