

Letter to the Editor

A Letter to the Editor is a response to a published article, where the response is either in further support of the article or in opposition. An Opinion Editorial or Op-Ed is a longer piece providing a strong case about a particular issue/situation that is timely and/or in the news.

Letter to the Editor:

A letter to the editor is very short and exists to express your opinion or point of view about an article you have read.

Guidelines:

- **Be Timely** – Write your letter within two weeks of article’s publication
- **Be Clear and Concise** – Make one main point and typically keep your letter under 200 words and/or follow the publication’s specific guidelines
- **Be Accurate** – Make sure you fact check your letter. Articles with incorrect information are usually not considered for publication.
- **Reference:** Reference or identify in the cover line if not in the specific response, the article to which you are responding.

Important: Always check with the specific publication for their individual rules and submission guidelines. Typically, in order to be considered for publication, the publication’s specific guidelines especially regarding length **MUST** be followed. This includes submitting to the attention of the proper person or department.

Letter to the Editor Example:

https://www.washingtonpost.com/opinions/mr-hogan-leads-on-response-to-opioid-epidemic/2017/03/05/8e0ce944-0044-11e7-9b78-824ccab94435_story.html?utm_term=.164d7038b98a

Re: “Maryland governor declares states of emergency for opioid crisis” March 1st
President Trump and those members of Congress who wish to repeal and replace the Affordable Care Act should look to the real-world politics of Maryland Gov. Larry Hogan (R) [“Hogan sets a state of emergency on opioids,” Metro, March 2].

The nationwide epidemic of addiction to opioids is devastating families, packing hospital emergency rooms and threatening the futures of many young people. These tragic dynamics disproportionately affect people and health-care providers who rely on Medicaid. Maryland is one of 31 states (plus the District) that expanded Medicaid under the Affordable Care Act, and Mr. Hogan is showing leadership by augmenting Maryland’s system of prevention and treatment with new funding.

It is disingenuous and regrettable when federal policymakers offer a block-grant solution for Medicaid funding or seek to put a per-capita limit on a recipient's eligibility. These critics are ignoring the scope of this addiction epidemic. Hospitals, local health departments, treatment providers, law enforcement, the courts, homeless shelters and outpatient providers need a stable, reliable Medicaid system.

The costs of substance abuse will not evaporate if Medicaid is weakened. They will only shift to state and local governments, hospitals, clinics and the nonprofit sector — all of which are already stretched to their limits.