

March 12, 2024

To: Honorable Pamela Beidle, Chair Senate Finance Committee

From: Dr. Andreea Creanga Professor and Director Maryland Maternal Health Innovation Program Johns Hopkins University

RE: Letter of Support for Senate Bill 1059 – Maryland Maternal Health Act of 2024

I'm writing on behalf of the **Maryland Maternal Health Innovation Program (MDMOM)**, a wellestablished program funded by the Health Resources and Services Administration that aims to improve maternal health across the state of Maryland. This program is a collaboration between the Johns Hopkins University, the Maryland Department of Health, and the Maryland Patient Safety Center. **Our team strongly supports Senate Bill 1059 "Maryland Maternal Health Act of 2024".** This bill will serve as a critical accountability mechanism for several maternal health initiatives in the state of Maryland, including our on-going Severe Maternal Morbidity (SMM) Surveillance and Review project.

The timing of the bill could not be more critical. Every year, about 1,500 women in Maryland develop severe, life-threatening pregnancy complications and about 40 women die from such complications; moreover, the rate of such adverse maternal events has been increasing over time.^{1,2} Non-Hispanic Black women have a 2-3 times higher risk of developing severe pregnancy complications and dying from such conditions than non-Hispanic White women.^{2,3} To reduce maternal mortality and morbidity in Maryland, we must understand what are the main drivers, risk factors for, and causes of adverse outcomes in the state, and act to address them in a timely fashion.

The data from Maryland's Maternal Mortality Review program, while immensely useful for understanding why mothers die during pregnancy and postpartum, offer limited learning opportunities making it difficult to make actionable recommendations for hospitals. **Since July 2020, the MDMOM program has been conducting hospital-based SMM Surveillance and Review using specific guidance from key national professional organizations and health agencies** (e.g. the American College of Obstetricians and Gynecologists, the Society for Maternal-Fetal Medicine, the Centers for Disease Control and Prevention).^{4,5} As of March 1, 2024, 22 of Maryland's 32 birthing hospitals participate in SMM Surveillance and Review coordinated by the MDMOM program and staff in 5 additional hospitals are currently being trained to enroll in this program. SMM events are identified and reviewed as close to real-time as possible by review committees in each hospital, and de-identified data

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and recommendations from each SMM event reviewed are entered in a common, standardized electronic database maintained by the MDMOM program. Detailed hospital-specific results are shared with each participating hospital, and as a result, hospitals implement practice changes to prevent future SMM cases from occurring. Aggregate data pooled across all participating hospitals are used to develop annual data briefs to highlight the most prevalent causes and risk factors of SMM in the state.³ These data briefs are shared widely with all hospitals and made publicly available online.

This bill requires all 32 birthing hospitals in Maryland to participate in SMM Surveillance and Review program, learn from the data, and implement practice changes to aid quality improvement activities. **The MDMOM program and SMM Surveillance and Review are funded by the Health Resources and Services Administration until September 29, 2028.** We are, therefore, in a good position to assist in carrying out activities proposed in Section 2 of Senate Bill 1059 and, in partnership with the Maryland Department of Health and the Maryland Hospital Association, we look forward to sharing our results with the Health and Government Operations Committee.

Thank you for the opportunity to submit this testimony. We are in full support of Senate Bill 1059 and eager to assist the state with the work being proposed to improve the quality of care received by pregnant and postpartum women in Maryland. I respectfully request a favorable Committee report on Senate Bill 1059.

Sincerely,

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References

- 1. Reid L & Creanga AA. Severe maternal morbidity and related hospital quality measures in Maryland. J. Perinatol. 2018;38(8):997-1008.
- 2. Maryland Maternal Mortality Review. 2020 Annual Report available at: https://phpa.health.maryland.gov/mch/Pages/mmr.aspx.
- 3. MDMOM Data Brief 2, Severe Maternal Morbidity Surveillance and Review: https://mdmom.org/sites/default/files/documents/SMM-MDMOM-Brief-April2023.pdf
- Wolfson C, Qian J, Chin P, Downey C, Mattingly KJ, Jones-Beatty K, Olaku J, Qureshi S, Rhule J, Silldorff D, Atlas R, Banfield A, Johnson CT, Neale D, Sheffield JS, Silverman D, McLaughlin K, Koru G, Creanga AA. Findings From Severe Maternal Morbidity Surveillance and Review in Maryland. JAMA Netw Open. 2022;5(11):e2244077.
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