



DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

March 6, 2024

The Honorable Joseline A. Peña-Melnyk
Chair, House Health and Government Operations Committee
Room 241, House Office Building
Annapolis, Maryland 21401

RE: House Bill 1051 - Maternal Health- Assessments, Referrals, and Reporting (Maryland Maternal Health Act of 2024) - Letter of Support

Dear Chair Peña-Melnyk and Committee Members:

The Maryland Department of Health (Department) respectfully submits this letter of support for House Bill (HB) 1051- Maternal Health - Assessments, Referrals and Reporting (Maryland Maternal Health Act of 2024). HB 1051 establishes requirements for local health departments, health care providers, and facilities regarding maternal health, including requirements regarding prenatal risk assessment (PRA) forms and postpartum infant and maternal referral (PIMR) forms. HB 1051 also prohibits the Department from providing Medical Assistance Program reimbursement to a hospital or freestanding birthing center unless the facility complies with certain provisions of this Act. The Secretary of Health, in collaboration with the Maryland Health Care Commission, is required to develop a Maryland Report Card for Birthing Facility Maternity Care. Lastly, the Department must conduct a study on the incidents of severe maternal morbidity in the State.

The 2016-2018 Black non-Hispanic Maryland maternal mortality rate (MMR) was 2.8 times higher than the White non-Hispanic MMR.¹ Similar disparities are observed for severe maternal morbidity (SMM). Based on the most recent state hospitalization data, the SMM rate for non-Hispanic Black people was almost twice that of non-Hispanic White birthing people.²

The Department supports HB 1051, and has made it a strategic priority to reduce maternal morbidity and mortality and to eliminate the racial disparities in those two outcomes. Maryland's MMR remains above national and international targets despite its 2022 Census Bureau ranking as the sixth wealthiest state in the nation by median household income. There are also racial and regional disparities in MMR that fall more heavily on non-Hispanic Black women and those living in the Baltimore-metro area and on the Eastern Shore.

There are multiple current initiatives in Maryland to improve maternal health, supported by local, State, and Federal funding. They include a Perinatal Neonatal Quality Collaborative and Maryland's Maternal

¹ Maryland - 2020 Annual Report – Maryland Maternal Mortality Review.

<https://health.maryland.gov/phpa/mch/Documents/MMR/HG%20%C2%A7%C2%A7%2013-1207%2013-1208%20and%20%C2%A713-1212%20-%20Maryland%20Maternal%20Mortality%20Review%202020.pdf>

² Findings From Severe Maternal Morbidity Surveillance and Review in Maryland.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9709651/>

Health Innovation Program (MDMOM). The Department is actively working with the bill sponsor on amendments to strengthen HB 1051's operationalization and integration with existing programs.

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at sarah.case-herron@maryland.gov.

Sincerely,

A handwritten signature in blue ink, appearing to read "LH Scott", is enclosed within a faint, light blue outline of the state of Maryland.

Laura Herrera Scott, M.D., M.P.H.
Secretary