



## DEPARTMENT OF HEALTH

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

March 27, 2024

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

**RE: Senate Bill 1059 – Maternal Health – Assessments, Referrals, and Reporting (Maryland Maternal Health Act of 2024) – Letter of Support as Amended**

Dear Chair Peña-Melnyk and Committee members:

The Maryland Department of Health (Department) respectfully submits this letter of support as amended for Senate Bill (SB) 1059 - Maternal Health – Assessments, Referrals, and Reporting (Maryland Maternal Health Act of 2024) which is identical to House cross-file, HB 1051. SB 1059 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. 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, hospitals and freestanding birthing centers are required to participate in the Severe Morbidity Surveillance Program.

The 2016-2018 Black non-Hispanic Maryland maternal mortality rate (MMR) was 2.8 times higher than the White non-Hispanic MMR.<sup>1</sup> 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.<sup>2</sup> 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.

The Department supports SB 1059, and has made it a strategic priority to reduce maternal morbidity and mortality and to eliminate the racial disparities in those two outcomes. We have appreciated the willingness of the Committees and sponsors to work with us on amendments and support SB 1059 as amended.

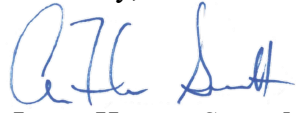
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<sup>1</sup> Maryland - 2020 Annual Report – Maryland Maternal Mortality Review.  
<https://health.maryland.gov/phpa/mch/Documents/MMR/HG%20%C2%A7%C2%A7%2013-1207%2013-1208%20>

<sup>2</sup> Findings From Severe Maternal Morbidity Surveillance and Review in Maryland.  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9709651>

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](mailto:sarah.case-herron@maryland.gov).

Sincerely,

A handwritten signature in blue ink, appearing to read "LH Scott". The signature is fluid and cursive, with the first name "LH" being particularly prominent.

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