



Testimony in Support of Senate Bill 94
Maryland Medical Assistance Program – Self-Measured Blood Pressure Monitoring
Dr. Ashley Gresh, PhD, MSN, MA, RN, CNM
Assistant Professor
Johns Hopkins School of Nursing

I am writing in strong support of Senate Bill 94, which seeks to address cardiovascular health through enhanced screening and care. As a midwife and public health nurse with a dedicated focus on advancing postpartum care and improving maternal outcomes, I have witnessed firsthand the profound impact that comprehensive care during this time can have on the long-term health of birthing people and their families.

Cardiovascular disease is the leading cause of maternal mortality in the United States, with a significant proportion of cases occurring in the postpartum period. Senate Bill 94 represents a critical step forward in addressing this issue and aligns with the evidence-based understanding that early detection and management of conditions such as hypertension, preeclampsia, and gestational diabetes are vital to preventing long-term cardiovascular disease and improving maternal health outcomes. This is particularly important in the postpartum period because we know that birthing people that had hypertension in pregnancy have an increased risk of developing cardiovascular disease long-term.

In my clinical and public health practice, I have observed that extending postpartum care beyond the traditional six-week visit and integrating targeted cardiovascular screenings can save lives. Many of the individuals I care for are unaware of the cardiovascular risks they face following childbirth. Senate Bill 94 will help ensure that these risks are identified and managed through timely, comprehensive care. Just this past week, I worked with a client who had received a self-measured blood pressure monitor, allowing her to check her blood pressure at home. A few days ago, she woke up feeling unwell, used the monitor, and discovered she was in a hypertensive crisis. Recognizing this as a critical danger sign, she sought immediate care, a decision that ultimately saved her life.

Moreover, this bill has the potential to address significant health disparities. Black and Latina women are disproportionately affected by maternal mortality and morbidity, often due to systemic inequities that exacerbate cardiovascular risks. By providing ways for patients to engage in their own care and screenings and supporting culturally responsive care, this legislation can help close these gaps and promote health equity across Maryland.

Senate Bill 94 also recognizes the importance of collaboration among healthcare providers, from obstetricians and midwives to primary care physicians and cardiologists and community health workers that are often on the frontlines of care in community settings. This coordinated approach is essential for ensuring seamless transitions in care and fostering a continuum of support for birthing people throughout the first year postpartum.

As a healthcare professional deeply committed to this work, I urge the Maryland General Assembly to pass Senate Bill 94. By enacting this legislation, Maryland can lead the way in reducing maternal mortality, addressing health inequities, and improving long-term health outcomes for all birthing people.

Thank you for your attention to this critical issue and for your leadership in advancing maternal health equity.

Sincerely,

A handwritten signature in black ink, appearing to be "Ashley Gresh".

Ashley Gresh, PhD, MSN, MA, RN, CNM
Assistant Professor
Johns Hopkins University School of Nursing
525 North Wolfe Street, Baltimore, MD, 21205
Email: ashley.gresh@jhu.edu

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