

Testimony in Support of Senate Bill 94

Maryland Medical Assistance Program – Self-Measured Blood Pressure Monitoring

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Honorable Chair and Members of the Committee,

I am writing to express my strong support for **Senate Bill 94**, which would require the Maryland Medical Assistance Program to provide coverage for self-measured blood pressure monitoring for eligible program recipients. As an Associate Professor and Associate Dean for Research at the Johns Hopkins School of Nursing and Bloomberg School of Public Health, and a Board Member of the Baltimore and Greater Maryland American Heart Association, I have dedicated my career as cardiovascular nurse epidemiologist to studying and implementing interventions to prevent and manage hypertension and its complications. The views expressed here are my own and do not necessarily reflect the policies or positions of Johns Hopkins University/Johns Hopkins Health System.

Through my research implementing self-measured blood pressure monitoring among adults in Maryland, I have witnessed firsthand the transformative impact of empowering patients to monitor their own blood pressure in the LINKED-BP and LINKED-HEARTS Programs. This simple yet powerful intervention allows individuals to take an active role in their health management while providing healthcare providers with crucial data to optimize treatment decisions.

The timing of this legislation is critical, particularly given the persistent crisis of maternal mortality in Maryland. Heart disease remains a leading risk factor for maternal mortality, making blood pressure monitoring especially crucial during pregnancy and the postpartum period. Hypertensive disorders can develop rapidly during pregnancy, often with devastating consequences for both mother and child if not detected and managed promptly.

Of particular concern is the stark racial disparity in maternal health outcomes. Black women face disproportionately higher rates of both heart disease and maternal mortality. In my research and clinical experience, I have observed how access to self-measured blood pressure monitoring can serve as a vital early

warning system, enabling timely intervention before complications become severe. I have This is especially important for Black women, who historically have faced systemic barriers to accessing quality healthcare.

This bill takes a comprehensive approach by not only providing the monitoring devices but also ensuring coverage for essential support services, including:

- Patient training on proper use of the devices
- Data transmission and interpretation
- Remote patient monitoring
- Educational materials and classes

The inclusion of community health workers as eligible providers is particularly noteworthy, as they play a crucial role in reaching underserved communities and providing culturally competent care coordination. In our research, we have employed community health workers to support adults in managing hypertension and educating them about self-monitoring, lifestyle changes and medication adherence. We have seen blood pressure improve in these patients due to better adherence to therapy and improvement in self-management behaviors.

By requiring coverage for self-measured blood pressure monitoring, Senate Bill 94 would remove a significant financial barrier that currently prevents many Medicaid recipients from accessing this potentially life-saving intervention. The bill's emphasis on education and support services will help ensure that recipients can effectively use these devices and interpret their results.

I strongly urge the committee to support Senate Bill 94. This legislation represents a crucial step forward in addressing cardiovascular health disparities and improving maternal health outcomes in Maryland.

Sincerely,



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