



Testimony in Support of Senate Bill 94

Maryland Medical Assistance Program – Self-Measured Blood Pressure Monitoring

Faith Elise Metlock, PhD Candidate

Johns Hopkins School of Nursing

Research Program Coordinator, SAFE HEART Women Study

Honorable Chair and Members of the Maryland Senate Finance Committee,

Thank you for the opportunity to provide testimony in support of Senate Bill 94, which seeks to expand access to self-measured blood pressure monitoring for Medicaid recipients in Maryland. As a PhD candidate at Johns Hopkins School of Nursing and the Research Program Coordinator for the SAFE HEART Women Study, I bring a community-based perspective shaped by engaging directly with some of Maryland's most underserved populations. The SAFE HEART Women Study focuses on exploring social determinants of health and cardiovascular health literacy among women of reproductive age, particularly Black and Hispanic women. My experiences highlight both the significant need for this type of intervention and the transformative power of education in addressing cardiovascular health disparities. The views expressed here are my own and do not necessarily reflect the policies or positions of Johns Hopkins University/Johns Hopkins Health System.

In our study, my team and I engaged with over 450 women from the Baltimore and Washington, D.C., area, with approximately 60% identifying as members of minority racial groups. Cardiovascular risk factors were highly prevalent: 40% of participants had high blood pressure, 69% were overweight, 73% engaged in low levels of physical activity, 48% reported poor sleep, 35% had poor diets, and 32% had high cholesterol and high blood sugar. Additionally, the participants faced significant social challenges, with 58% reporting financial strain, 35% experiencing housing problems, 23% lacking health insurance, 31% having unreliable transportation, and 48% struggling with food insecurity. Many participants expressed how these challenges limited their ability to prioritize their health or consistently engage with the healthcare system. This is why we need self-measured blood pressure monitoring that enables individuals to manage their health outside of traditional healthcare settings and provide additional support to address these barriers.

One of the key components of our intervention was an educational campaign designed to improve cardiovascular health literacy. Over just a few months, we implemented a variety of tools to break down complex health information into actionable steps. The results were significant—participants demonstrated improved understanding of cardiovascular health, enabling them to make more informed decisions about their care. We cannot underestimate the power of education to complement self-measured blood pressure monitoring interventions to empower Marylanders to reduce their

cardiovascular risk. New technology must be paired with tailored, accessible health information to achieve meaningful outcomes. Senate Bill 94 introduces an educational campaign that would address these essential topics, equipping women with the skills they need not only to use the technology effectively but also to implement healthier lifestyle behaviors that reduce their cardiovascular risk. This comprehensive approach ensures that the bill meets the needs of Maryland's residents and underscores the importance of passing this legislation.

We heard these needs directly in interviews with our study participants. For example, one participant shared that providing free blood pressure monitors would significantly improve her ability to track her blood pressure more frequently between annual exams. She explained that this regular monitoring would help her stay mindful of the lifestyle changes she was working toward and enable her to feel more in control of her health. Many women expressed similar sentiments, emphasizing how access to tools like self-measured blood pressure monitors, paired with education, would empower them to advocate for themselves and make healthier choices. Senate Bill 94 is a direct response to these needs expressed by Maryland residents. By providing the tools, education, and support necessary for effective blood pressure management, this legislation has the potential to save lives.

While our study focused on women, the need for this intervention extends to all adults. Hypertension is a widespread condition that affects millions of Marylanders and disproportionately impacts underserved communities. Men, in particular, often face higher rates of hypertension and may benefit greatly from tools like self-measured blood pressure monitoring to catch and manage the condition earlier. For pregnant and postpartum women, the ability to monitor blood pressure at home is vital to preventing complications and addressing hypertensive disorders that are among the leading causes of maternal morbidity and mortality.

Senate Bill 94 removes logistical and financial barriers to blood pressure monitoring, incorporating education, and engaging community health workers who can provide culturally competent care and support. These efforts have the potential to improve health outcomes, reduce inequities, and empower Maryland residents to take control of their cardiovascular health. I strongly urge this committee to support Senate Bill 94. By expanding access to self-measured blood pressure monitoring and the accompanying education and support services, this legislation can make a lasting impact on the health and well-being of individuals, families, and communities across Maryland.



Faith Elise Metlock
PhD Candidate, Johns Hopkins School of Nursing
Research Program Coordinator, SAFE HEART Women Study
525 N. Wolfe Street, Baltimore, MD 21205
Email: fmetloc1@jhu.edu