



Testimony Concerning SB 156
“Workgroup on Universal Newborn Nurse Home Visiting Services – Establishment”
Submitted to the House Health and Government Operations Committee
March 19, 2025

Position: Support

Maryland Family Network (MFN) strongly supports SB 156, which would establish a workgroup to study newborn home visiting services.

MFN has worked since 1945 to improve the availability and quality of child care and other vital supports for children and families in Maryland. We have been active in state and federal debates on policies that serve children and families and are strongly committed to ensuring that children and their caregivers have access to high-quality, affordable programs and educational opportunities.

The first few weeks after delivery are critical for new babies and parents. Two-thirds of all maternal deaths in the United States occur during the postpartum period, with more than half in the first 42 days after birth.¹ Disparities persist in postpartum outcomes, as maternal mortality among Black women in Maryland is four times higher than the rate among White women.² Moreover, Black patients in Maryland disproportionately experience life-threatening severe maternal morbidity events at two times the rate of non-Hispanic White patients.³ All birthing parents deserve quality postpartum care, but too often families slip through cracks in health care systems and safety-net programs.

Universal newborn nurse home visiting is an evidence-based model that creates safe and healthy spaces for babies and parents. Home visiting programs can move Maryland towards more equitable outcomes for every baby born in the state. The cornerstone of these programs are in-person nurse visits, which create opportunities to conduct postpartum depression and anxiety screenings, blood pressure monitoring, wound checks, and newborn screenings. They also connect new parents to care coordination, parent support groups, and local community resources. Clinical trials show that the combination of these types of services produce long-term positive benefits for families and communities, including

¹ CDC. May 2024. *Pregnancy-Related Deaths: Data from Maternal Mortality Review Committees in 36 US States, 2017-2019*.
<https://www.cdc.gov/maternal-mortality/php/data-research/mmrc-2017-2019.html>

² Maryland Department of Health. 2021. Maryland Maternal Mortality Review.
<https://health.maryland.gov/phpa/mch/Documents/MMR/HG%20%C2%A7C2%A7%2013-1207%2013-1208%20and%20%C2%A713-1212%20-%20Maryland%20Maternal%20Mortality%20Review%202020.pdf>

³ MDMOM. July 2024. *Severe Maternal Morbidity Surveillance & Review Program in Maryland*.
https://mdmom.org/sites/default/files/documents/2024_MDMOM_SMM_Report.pdf



reduced rates of child maltreatment, lower emergency medical care use in early childhood, a stronger connection to community, and improved maternal behavioral health.^{4,5}

SB 156 is an important tool in addressing early childhood disparities and improving maternal and infant health. Families need a variety of services and interventions throughout all stages of early childhood development, and universal newborn nurse home visiting is a meaningful investment as an early touchpoint for birthing individuals and newborns. We encourage support for an array of evidence-based home visiting models to meet the needs of families who need additional interventions and longer-term support.

Maryland Family Network, in collaboration with the Maryland Department of Health, is willing and able to staff the workgroup. MFN respectfully requests the committee conform SB 156 to HB 334 and issue a favorable report.

Submitted by: Beth Morrow, Director of Public Policy

⁴ Journal of the American Medical Association. July 2021. *Effect of a Universal Postpartum Nurse Home Visiting Program on Child Maltreatment and Emergency Medical Care at 5 Years of Age*.
<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2781681>

⁵ American Journal of Public Health. 2014. *Implementation and Randomized Controlled Trial Evaluation of Universal Postnatal Nurse Home Visiting*. <https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2013.301361>