

SENATE BILL 1059

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4lr2537
CF HB 1051

By: **Senator Ellis**

Introduced and read first time: February 2, 2024

Assigned to: Finance

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 2, 2024

CHAPTER _____

1 AN ACT concerning

2 **Maternal Health – Assessments, Referrals, and Reporting**
3 **(Maryland Maternal Health Act of 2024)**

4 FOR the purpose of establishing requirements on local health departments and certain
5 health care providers and facilities regarding maternal health, including
6 requirements regarding prenatal risk assessment forms and postpartum infant and
7 maternal referral forms; ~~prohibiting the Maryland Department of Health from~~
8 ~~providing Medical Assistance Program reimbursement to a hospital or freestanding~~
9 ~~birthing center unless the facility complies with certain provisions of this Act;~~
10 requiring the Secretary of Health, in collaboration with the Maryland Health Care
11 Commission, to develop a Maryland Report Card for Birthing Facility Maternity
12 Care; requiring ~~the Department to conduct a certain study of incidents of severe~~
13 ~~maternal morbidity in the State~~ hospitals and freestanding birthing centers to
14 participate in the Severe Maternal Morbidity Surveillance Program for a certain
15 purpose; and generally relating to maternal health.

16 BY repealing and reenacting, without amendments,
17 Article – Health – General
18 Section 15–101(a), (h), and (i), 19–301(a) and (f), and 19–3B–01(a) and (d)
19 Annotated Code of Maryland
20 (2023 Replacement Volume)

21 BY adding to
22 Article – Health – General

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 Section 15–155, 19–310.4, and 19–3B–03.1; and 24–2401 and 24–2402 to be under
 2 the new subtitle “Subtitle 24. Report Card for Birthing Facility Maternity
 3 Care”

4 Annotated Code of Maryland
 5 (2023 Replacement Volume)

6 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
 7 That the Laws of Maryland read as follows:

8 **Article – Health – General**

9 15–101.

10 (a) In this title the following words have the meanings indicated.

11 (h) “Program” means the Maryland Medical Assistance Program.

12 (i) “Program recipient” means an individual who receives benefits under the
 13 Program.

14 **15–155.**

15 **(A) IN THIS SECTION, “PRENATAL RISK ASSESSMENT FORM” MEANS A**
 16 **STANDARDIZED FORM DEVELOPED BY THE DEPARTMENT IN ACCORDANCE WITH**
 17 **THE CENTERS FOR MEDICARE AND MEDICAID SERVICES GUIDELINES FOR USE BY**
 18 **A LICENSED HEALTH CARE PROVIDER TO EVALUATE RISK FACTORS FOR THE**
 19 **HEALTH OF A PREGNANT PATIENT.**

20 **(B) A PROVIDER WHO RECEIVES REIMBURSEMENT FROM THE PROGRAM**
 21 **FOR PROVIDING OBSTETRIC SERVICES TO A PATIENT SHALL COMPLETE A PRENATAL**
 22 **RISK ASSESSMENT FORM FOR THE PATIENT:**

23 ~~**(1) DURING DURING THE INITIAL VISIT WITH THE PATIENT; AND**~~

24 ~~**(2) DURING THE THIRD TRIMESTER OF THE PATIENT’S PREGNANCY.**~~

25 **(C) AFTER COMPLETING A PRENATAL RISK ASSESSMENT FORM IN**
 26 **ACCORDANCE WITH SUBSECTION (B) OF THIS SECTION, THE PROVIDER SHALL**
 27 **SUBMIT THE FORM TO THE LOCAL HEALTH DEPARTMENT FOR THE COUNTY IN**
 28 **WHICH THE PATIENT RESIDES.**

29 **(D) ON OR BEFORE OCTOBER 1 EACH YEAR, EACH LOCAL HEALTH**
 30 **DEPARTMENT SHALL SUBMIT TO THE DEPARTMENT A REPORT THAT INCLUDES THE**
 31 **NUMBER AND TYPE OF REFERRALS MADE TO PATIENTS THAT WERE BASED ON THE**

1 INFORMATION FROM THE PRENATAL RISK ASSESSMENT FORM COMPLETED IN
2 ACCORDANCE WITH SUBSECTION (B) OF THIS SECTION.

3 (E) THE DEPARTMENT SHALL ESTABLISH A PROCESS FOR A PROVIDER TO
4 SUBMIT A PRENATAL RISK ASSESSMENT FORM ELECTRONICALLY.

5 19-301.

6 (a) In this subtitle the following words have the meanings indicated.

7 (f) "Hospital" means an institution that:

8 (1) Has a group of at least 5 physicians who are organized as a medical
9 staff for the institution;

10 (2) Maintains facilities to provide, under the supervision of the medical
11 staff, diagnostic and treatment services for 2 or more unrelated individuals; and

12 (3) Admits or retains the individuals for overnight care.

13 **19-310.4.**

14 (A) IF A NEWBORN IS DELIVERED IN A HOSPITAL FOLLOWING A HIGH-RISK
15 PREGNANCY, THE HOSPITAL SHALL:

16 (1) COMPLETE A POSTPARTUM INFANT AND MATERNAL REFERRAL
17 FORM AND SUBMIT THE FORM TO THE LOCAL HEALTH DEPARTMENT FOR THE
18 COUNTY IN WHICH THE BIRTHING PARENT RESIDES;

19 (2) PROVIDE TO THE BIRTHING PARENT RESOURCES AND
20 INFORMATION SPECIFIC TO THE CIRCUMSTANCES OF THE BIRTHING PARENT,
21 INCLUDING INFORMATION REGARDING THE RISKS, SIGNS, PREVENTIVE MEASURES,
22 AND TREATMENT NEEDS FOR POSTPARTUM COMPLICATIONS, INCLUDING
23 CARDIOVASCULAR CONDITIONS, CHRONIC DISEASE, SUBSTANCE MISUSE, AND
24 MENTAL HEALTH CONDITIONS; AND

25 (3) CALL THE BIRTHING PARENT ~~WITHIN 12~~ AT LEAST 24, BUT NOT
26 LATER THAN 48, HOURS AFTER DISCHARGING THE PARENT TO EVALUATE THE
27 PARENT'S STATUS AND, AS NECESSARY, PROVIDE INFORMATION ABOUT
28 POSTPARTUM COMPLICATIONS.

29 (B) ON OR BEFORE ~~MAY~~ OCTOBER 1 EACH YEAR, EACH LOCAL HEALTH
30 DEPARTMENT SHALL SUBMIT TO THE DEPARTMENT A REPORT THAT INCLUDES THE
31 NUMBER AND TYPE OF REFERRALS MADE BASED ON THE REFERRAL FORMS

1 SUBMITTED TO THE LOCAL HEALTH DEPARTMENT IN ACCORDANCE WITH
2 SUBSECTION (A)(1) OF THIS SECTION.

3 ~~(C) THE DEPARTMENT MAY NOT PROVIDE MEDICAL ASSISTANCE~~
4 ~~PROGRAM REIMBURSEMENT TO A HOSPITAL FOR SERVICES RELATED TO THE~~
5 ~~DELIVERY OF A NEWBORN FOLLOWING A HIGH RISK PREGNANCY UNLESS THE~~
6 ~~HOSPITAL COMPLIES WITH SUBSECTION (A)(1) OF THIS SECTION.~~

7 19-3B-01.

8 (a) In this subtitle the following words have the meanings indicated.

9 (d) (1) “Freestanding birthing center” means a facility that provides nurse
10 midwife services under Title 8, Subtitle 6 of the Health Occupations Article.

11 (2) “Freestanding birthing center” does not include:

12 (i) A hospital regulated under Subtitle 2 of this title; or

13 (ii) The private residence of the mother.

14 **19-3B-03.1.**

15 (A) IF A NEWBORN IS DELIVERED IN A FREESTANDING BIRTHING CENTER
16 FOLLOWING A HIGH-RISK PREGNANCY, THE FREESTANDING BIRTHING CENTER
17 SHALL:

18 (1) COMPLETE A POSTPARTUM INFANT AND MATERNAL REFERRAL
19 FORM AND SUBMIT THE FORM TO THE LOCAL HEALTH DEPARTMENT FOR THE
20 COUNTY IN WHICH THE BIRTHING PARENT RESIDES;

21 (2) PROVIDE TO THE BIRTHING PARENT RESOURCES AND
22 INFORMATION SPECIFIC TO THE CIRCUMSTANCES OF THE BIRTHING PARENT,
23 INCLUDING INFORMATION REGARDING THE RISKS, SIGNS, PREVENTIVE MEASURES,
24 AND TREATMENT NEEDS FOR POSTPARTUM COMPLICATIONS, INCLUDING
25 CARDIOVASCULAR CONDITIONS, CHRONIC DISEASE, SUBSTANCE MISUSE, AND
26 MENTAL HEALTH CONDITIONS; AND

27 (3) CALL THE BIRTHING PARENT ~~WITHIN 12~~ AT LEAST 24, BUT NOT
28 LATER THAN 48, HOURS AFTER DISCHARGING THE PARENT TO EVALUATE THE
29 PARENT’S STATUS AND, AS NECESSARY, PROVIDE INFORMATION ABOUT
30 POSTPARTUM COMPLICATIONS.

31 (B) ON OR BEFORE ~~MAY~~ OCTOBER 1 EACH YEAR, EACH LOCAL HEALTH
32 DEPARTMENT SHALL SUBMIT TO THE DEPARTMENT A REPORT THAT INCLUDES THE

1 NUMBER AND TYPE OF REFERRALS MADE BASED ON THE REFERRAL FORMS
2 SUBMITTED TO THE LOCAL HEALTH DEPARTMENT IN ACCORDANCE WITH
3 SUBSECTION (A)(1) OF THIS SECTION.

4 ~~(C) THE DEPARTMENT MAY NOT PROVIDE MEDICAL ASSISTANCE~~
5 ~~PROGRAM REIMBURSEMENT TO A FREESTANDING BIRTHING CENTER FOR SERVICES~~
6 ~~RELATED TO THE DELIVERY OF A NEWBORN FOLLOWING A HIGH RISK PREGNANCY~~
7 ~~UNLESS THE FREESTANDING BIRTHING CENTER COMPLIES WITH SUBSECTION (A)(1)~~
8 ~~OF THIS SECTION.~~

9 SUBTITLE 24. REPORT CARD FOR BIRTHING FACILITY MATERNITY CARE.

10 24-2401.

11 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANING
12 INDICATED.

13 (B) "BIRTHING FACILITY" MEANS A FREESTANDING BIRTHING CENTER OR
14 A HOSPITAL THAT PROVIDES OBSTETRIC CARE.

15 (C) "FREESTANDING BIRTHING CENTER" HAS THE MEANING STATED IN §
16 19-3B-01 OF THIS ARTICLE.

17 (D) "HOSPITAL" HAS THE MEANING STATED IN § 19-301 OF THIS ARTICLE.

18 (E) "REPORT CARD" MEANS THE MARYLAND REPORT CARD FOR BIRTHING
19 FACILITY MATERNITY CARE DEVELOPED UNDER § 24-2402 OF THIS SUBTITLE.

20 24-2402.

21 (A) SUBJECT TO SUBSECTIONS (B) AND (C) OF THIS SECTION, THE
22 SECRETARY, IN COLLABORATION WITH THE MARYLAND HEALTH CARE
23 COMMISSION, SHALL:

24 (1) DEVELOP A MARYLAND REPORT CARD FOR BIRTHING FACILITY
25 MATERNITY CARE; AND

26 (2) COLLECT THE NECESSARY INFORMATION TO COMPLETE AN
27 ANNUAL REPORT CARD FOR EACH BIRTHING FACILITY IN THE STATE.

28 (B) THE REPORT CARD SHALL INCLUDE THE FOLLOWING INFORMATION
29 FOR EACH BIRTHING FACILITY, DISAGGREGATED BY RACE AND AGE IN ACCORDANCE
30 WITH BEST PRACTICES FOR DATA SUPPRESSION:

1 (1) **THE NUMBER AND RATE OF VAGINAL DELIVERIES PERFORMED;**

2 (2) **THE NUMBER AND RATE OF CESAREAN DELIVERIES PERFORMED;**

3 (3) **THE AGE-ADJUSTED RATE OF COMPLICATIONS AND THE TOTAL**
 4 **NUMBER OF COMPLICATIONS EXPERIENCED BY A PATIENT RECEIVING OBSTETRIC**
 5 **CARE FOR:**

6 (I) **A VAGINAL DELIVERY AT THE BIRTHING FACILITY,**
 7 **INCLUDING MATERNAL HEMORRHAGE, LACERATION, INFECTION, OR ANY OTHER**
 8 **COMPLICATION AS REQUIRED BY THE SECRETARY; OR**

9 (II) **A CESAREAN DELIVERY AT THE BIRTHING FACILITY,**
 10 **INCLUDING MATERNAL HEMORRHAGE, INFECTION, OPERATIVE COMPLICATION, OR**
 11 **ANY OTHER COMPLICATION AS REQUIRED BY THE SECRETARY; AND**

12 (4) **QUALITATIVE MEASURES BASED ON PATIENT INPUT REGARDING**
 13 **THE PATIENT'S RECEIPT OF RESPECTFUL OBSTETRIC CARE.**

14 (C) **THE REPORT CARD SCORE SHALL BE BALANCED FOR THE RISKS**
 15 **ASSOCIATED WITH THE LEVEL OF ACUITY CARE PROVIDED FOR OBSTETRIC**
 16 **PATIENTS SERVED BY THE BIRTHING FACILITY.**

17 (D) **THE DEPARTMENT SHALL INCLUDE THE MOST RECENT REPORT CARD**
 18 **ON THE DEPARTMENT'S WEBSITE.**

19 (E) (1) **AT LEAST ~~ANNUALLY~~ ONCE EVERY 3 YEARS, THE SECRETARY**
 20 **SHALL:**

21 (I) **REVIEW THE CRITERIA EVALUATED IN THE REPORT CARD;**
 22 **AND**

23 (II) **REVISE THE COMPLICATIONS OR OTHER FACTORS TO BE**
 24 **INCLUDED IN THE REPORT CARD.**

25 (2) **THE SECRETARY SHALL CONSIDER EXPERT GUIDANCE WHEN**
 26 **REVIEWING THE CRITERIA EVALUATED IN THE REPORT CARD.**

27 SECTION 2. AND BE IT FURTHER ENACTED, That:

28 (a) ~~The Maryland Department of Health, in collaboration with the Maryland~~
 29 ~~Hospital Association and local health departments, shall study the incidents of Severe~~
 30 ~~Maternal Morbidity (SMM) in the State~~ Each hospital and freestanding birthing center
 31 shall participate in the Severe Maternal Morbidity Surveillance and Review Program to:

1 (1) identify the contextual drivers ~~and trends in the~~, risk factors ~~associated~~
2 ~~with individuals experiencing~~, and causes of SMM; and

3 (2) study quality improvement efforts of hospitals and freestanding
4 birthing centers regarding SMM based on the reviews; and

5 (3) make recommendations to reduce the ~~incidents~~ prevalence of SMM in
6 the State.

7 (b) On or before December 1, 2025, the ~~Department~~ Severe Maternal Morbidity
8 Surveillance and Review Program shall report the findings and recommendations from the
9 study conducted under subsection (a) of this section to the Governor and, in accordance
10 with § 2-1257 of the State Government Article, the General Assembly.

11 SECTION 3. AND BE IT FURTHER ENACTED, That Section 1 of this Act shall take
12 effect July 1, 2025.

13 SECTION 4. AND BE IT FURTHER ENACTED, That Section 2 of this Act shall take
14 effect October 1, 2024.

15 SECTION ~~3~~ 5. AND BE IT FURTHER ENACTED, That, except as provided in
16 Sections 3 and 4, this Act shall take effect ~~October~~ July 1, 2024.

Approved:

Governor.

President of the Senate.

Speaker of the House of Delegates.