

Department of Legislative Services
Maryland General Assembly
2025 Session

FISCAL AND POLICY NOTE
Third Reader - Revised

House Bill 334

(Delegate Kerr, *et al.*)

Health and Government Operations

Finance

Workgroup on Newborn Nurse Home Visiting Services - Establishment

This bill establishes a Workgroup on Newborn Nurse Home Visiting Services. The workgroup must (1) compile updated participant data and expenditures per participant from home visiting for families with newborns programs operating in the State; (2) compare that data to data for evidence-based models for universal nurse home visiting for families with newborns; (3) identify specified service gaps, opportunities to align evidence-based models with home visiting for families with newborns programs operating in the State, and potential funding sources to close identified service gaps; and (4) identify workforce needs for evidence-based models for universal newborn nurse home visiting for families with newborns and recommendations to address such needs. The Maryland Family Network, in collaboration with the Maryland Department of Health (MDH), may provide staff for the workgroup. A member of the workgroup may not receive compensation but is entitled to reimbursement for expenses under standard State travel regulations. The workgroup must report, by December 31, 2025, its findings and recommendations to the Governor and the General Assembly. **The bill takes effect July 1, 2025, and terminates June 30, 2026.**

Fiscal Summary

State Effect: MDH can collaborate with the Maryland Family Network using existing budgeted resources. Any expense reimbursement for workgroup members is assumed to be minimal. Revenues are not affected.

Local Effect: None.

Small Business Effect: None.

Analysis

Bill Summary: The workgroup comprises (1) one member of the Senate of Maryland; (2) one member of the House of Delegates; (3) the Secretary of Health (or their designee); and (4) the following members appointed by the Governor: one representative of the Maryland Hospital Association; one representative from each certified site in the State implementing an evidence-based universal nurse home visiting model for families with newborns; one representative from an organization in the State implementing at least two approved Maternal, Infant, and Early Childhood Home Visiting models; one representative of a private insurance carrier; one representative of the Maryland Nurses Association; one representative of the B'More for Healthy Babies Initiative; one representative from a local health department; one pediatrician licensed in the State; one nurse midwife licensed in the State; one obstetrician licensed in the State; and one representative of a federally qualified health center.

Current Law: MDH currently has a Maternal, Infant, and Early Childhood Home Visiting program supported by a federal funding formula, which is allocated to 10 Maryland jurisdictions with communities that meet the highest need for maternal and child intervention: Baltimore City and Allegany, Baltimore, Caroline, Dorchester, Harford, Prince George's, Somerset, Washington, and Wicomico counties. 14 sites in these 10 jurisdictions receive funding. The federal government has approved 19 home visiting models that meet federal evidence-based criteria. In Maryland, 7 of these evidence-based home visiting programs are in use (Nurse-Family Partnership, Healthy Families America, Parents as Teachers, Home Instruction for Parents of Preschool Youngsters, Early Head Start, Family Connects, and Attachment Biobehavioral Catch-Up). In fiscal 2024, 337 infants received home visiting services through this program.

Maryland Medicaid currently offers two evidence-based home visiting models, Healthy Families America and Nurse-Family Partnership. Services are available to Medicaid enrollees who are pregnant or have delivered a child within three months. A Medicaid enrollee can obtain services through a provider in their managed care organization network. Approximately 200 households receive home visiting services through Medicaid annually.

Additional Information

Recent Prior Introductions: Similar legislation has not been introduced within the last three years.

Designated Cross File: SB 156 (Senator Lewis Young) - Finance.

Information Source(s): Maryland Association of County Health Officers; Department of Budget and Management; Maryland Department of Health; Maryland Health Benefit Exchange; Maryland Insurance Administration; March of Dimes; Department of Legislative Services

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