

Chapter 788

(Senate Bill 169)

AN ACT concerning

Hospitals – Emergency Pregnancy–Related Medical Conditions – Procedures

FOR the purpose of requiring a hospital to conduct screening on a patient presenting at an emergency department of the hospital to determine whether the patient has an emergency pregnancy–related medical condition; establishing requirements and prohibitions related to the treatment and transfer of a patient who has an emergency pregnancy–related medical condition; requiring a hospital to allow the termination of a pregnancy in certain circumstances; prohibiting a hospital from taking adverse action against a provider for not transferring a patient who is not stabilized or against a hospital employee if the employee reports a violation of this Act; and generally relating to emergency pregnancy–related medical conditions and hospitals.

BY adding to

Article – Health – General
Section 19–342.1
Annotated Code of Maryland
(2023 Replacement Volume and 2025 Supplement)

BY repealing and reenacting, with amendments,

Article – Health – General
Section 20–214(b)
Annotated Code of Maryland
(2023 Replacement Volume and 2025 Supplement)

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

Article – Health – General

19–342.1.

(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

(2) “EMERGENCY PREGNANCY–RELATED MEDICAL CONDITION” MEANS A MEDICAL CONDITION THAT PRESENTS IN A PREGNANT PATIENT THROUGH ACUTE SYMPTOMS OF SUFFICIENT SEVERITY AND FOR WHICH THE ABSENCE OF IMMEDIATE MEDICAL ATTENTION COULD BE REASONABLY EXPECTED TO RESULT IN:

- (I) PLACING THE HEALTH OF THE PATIENT IN SERIOUS JEOPARDY;**
- (II) SERIOUS IMPAIRMENT TO BODILY FUNCTIONS; OR**
- (III) SERIOUS DYSFUNCTION OF ANY BODILY ORGAN OR BODY PART.**

(3) “STABILIZE” MEANS, FOR AN EMERGENCY PREGNANCY–RELATED MEDICAL CONDITION, TO PROVIDE THE MEDICAL TREATMENT NECESSARY TO ALLEVIATE THE CONDITION OR ENSURE, WITHIN REASONABLE MEDICAL PROBABILITY, THAT NO MATERIAL DETERIORATION OF THE CONDITION IS LIKELY TO RESULT FROM OR OCCUR DURING THE TRANSFER OF THE PATIENT FROM THE FACILITY.

(B) THIS SECTION APPLIES ONLY TO A HOSPITAL WITH AN EMERGENCY DEPARTMENT.

(C) IF A HOSPITAL DETERMINES THAT A PATIENT HAS AN EMERGENCY PREGNANCY–RELATED MEDICAL CONDITION, THE HOSPITAL SHALL:

(1) USING THE STAFF AND FACILITIES AVAILABLE TO THE HOSPITAL, PROVIDE FURTHER EXAMINATION AND THE TREATMENT REQUIRED TO STABILIZE THE EMERGENCY PREGNANCY–RELATED MEDICAL CONDITION, INCLUDING THE TERMINATION OF A PREGNANCY WHEN THE TERMINATION IS MEDICALLY NECESSARY TO STABILIZE THE PATIENT; OR

(2) TRANSFER THE PATIENT TO ANOTHER MEDICAL FACILITY.

(D) A HOSPITAL SHALL ALLOW THE TERMINATION OF A PREGNANCY AT THE HOSPITAL IF THE PATIENT’S TREATING HEALTH CARE PRACTITIONER DETERMINES TERMINATION IS MEDICALLY NECESSARY TO STABILIZE A PATIENT.

(E) (1) A HOSPITAL IS CONSIDERED TO HAVE MET THE REQUIREMENTS OF THIS SECTION IF, AFTER OFFERING FURTHER EXAMINATION AND TREATMENT OR TRANSFER TO THE PATIENT OR THE PATIENT’S REPRESENTATIVE AND INFORMING THE PATIENT OR PATIENT’S REPRESENTATIVE OF THE RISKS AND BENEFITS OF FURTHER EXAMINATION AND TREATMENT OR TRANSFER:

(I) A PATIENT OR THE PATIENT’S REPRESENTATIVE REFUSES TO CONSENT TO FURTHER EXAMINATION AND TREATMENT; OR

(II) A PATIENT OR THE PATIENT'S REPRESENTATIVE REFUSES TO CONSENT TO A TRANSFER TO ANOTHER MEDICAL FACILITY.

(2) A HOSPITAL SHALL TAKE REASONABLE STEPS TO SECURE WRITTEN INFORMED CONSENT TO THE REFUSAL OF AN EXAMINATION OR TREATMENT OR TRANSFER UNDER THIS SUBSECTION FROM THE PATIENT OR THE PATIENT'S REPRESENTATIVE.

(F) IF A PATIENT HAS AN EMERGENCY PREGNANCY-RELATED MEDICAL CONDITION THAT HAS NOT BEEN STABILIZED, THE HOSPITAL MAY NOT TRANSFER THE PATIENT UNLESS THE TRANSFER IS DONE CONSISTENT WITH 42 U.S.C. § 1395DD.

(G) A HOSPITAL MAY NOT PENALIZE OR TAKE OTHER ADVERSE ACTION, INCLUDING AN ACTION RELATED TO DISCHARGE, PROMOTION, DEMOTION, SUSPENSION, COMPENSATION, TRAINING OPPORTUNITIES, STAFF PRIVILEGES, OR ADMITTING PRIVILEGES, AGAINST:

(1) A TREATING HEALTH CARE PROVIDER IF THE PROVIDER REFUSES TO AUTHORIZE THE TRANSFER OF A PATIENT WITH AN EMERGENCY PREGNANCY-RELATED MEDICAL CONDITION THAT HAS NOT BEEN STABILIZED;

(2) A TREATING HEALTH CARE PROVIDER IF THE PROVIDER'S TREATMENT OF THE PATIENT IS CONSISTENT WITH THE MEDICAL STANDARDS OF CARE THAT, IN THE PROVIDER'S CLINICAL JUDGMENT, WERE NECESSARY TO STABILIZE THE PATIENT; OR

(3) A HOSPITAL EMPLOYEE IF THE EMPLOYEE REPORTS A VIOLATION OF THIS SECTION.

(H) A HOSPITAL THAT NEGLIGENTLY VIOLATES THIS SECTION IS SUBJECT TO A CIVIL PENALTY OF:

(1) FOR A HOSPITAL WITH 100 OR MORE BEDS, NOT MORE THAN \$50,000 FOR EACH VIOLATION; OR

(2) FOR A HOSPITAL WITH FEWER THAN 100 BEDS, NOT MORE THAN \$25,000 FOR EACH VIOLATION.

(I) (1) THE DEPARTMENT SHALL STAY A FINAL DECISION ON A POTENTIAL VIOLATION IF THERE IS AN ONGOING FEDERAL INVESTIGATION UNDER 42 U.S.C. § 1395DD REGARDING THE SAME INCIDENT.

(2) IF A FEDERAL INVESTIGATION UNDER 42 U.S.C. § 1395DD RESULTS IN A FINE BEING IMPOSED FOR THE SAME INCIDENT, THE DEPARTMENT SHALL SUBTRACT THE AMOUNT OF THE FEDERAL FINE FROM THE MAXIMUM POTENTIAL FINE UNDER THIS SECTION FOR THE SAME INCIDENT.

(3) (I) SUBJECT TO SUBPARAGRAPH (II) OF THIS PARAGRAPH, IF A FEDERAL INVESTIGATION UNDER 42 U.S.C. § 1395DD RESULTS IN A FINE BEING IMPOSED FOR THE SAME INCIDENT WITHIN 2 YEARS AFTER THE DEPARTMENT IMPOSES A FINE UNDER THIS SECTION, THE DEPARTMENT SHALL REFUND THE HOSPITAL AN AMOUNT EQUAL TO THE AMOUNT OF THE FEDERAL FINE.

(II) THE AMOUNT REFUNDED UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH MAY NOT EXCEED THE AMOUNT OF THE FINE IMPOSED BY THE DEPARTMENT FOR THE SAME INCIDENT.

20–214.

(b) (1) **[A] EXCEPT AS PROVIDED IN § 19–342.1 OF THIS ARTICLE, A licensed hospital, hospital director, or hospital governing board may not be required:**

(i) To **[permit] ALLOW**, within the hospital, the performance of any medical procedure that results in artificial insemination, sterilization, or termination of pregnancy; or

(ii) To refer to any source for these medical procedures.

(2) The refusal to **[permit] ALLOW** or to refer to a source for these procedures may not be grounds for:

(i) Civil liability to another person; or

(ii) Disciplinary or other recriminatory action against the person by this State or any person.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2026.

Approved by the Governor, May 26, 2026.