

HOUSE BILL 158

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6lr1438

(PRE-FILED)

By: **Delegate Woods**

Requested: October 29, 2025

Introduced and read first time: January 14, 2026

Assigned to: Health

A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Medical Assistance Program – Maternal Health Monitoring Pilot**
3 **Program**

4 FOR the purpose of establishing the Maternal Health Monitoring Pilot Program in the
5 Maryland Department of Health to support pregnant and postpartum Maryland
6 Medical Assistance Program recipients who have higher risks of pregnancy
7 complications because of maternal hypertension or maternal diabetes; and generally
8 relating to the Maternal Health Monitoring Pilot Program.

9 BY repealing and reenacting, without amendments,
10 Article – Health – General
11 Section 15–101(a) and (h)
12 Annotated Code of Maryland
13 (2023 Replacement Volume and 2025 Supplement)

14 BY adding to
15 Article – Health – General
16 Section 15–1301 and 15–1302 to be under the new subtitle “Subtitle 13. Maternal
17 Health Monitoring Pilot Program”
18 Annotated Code of Maryland
19 (2023 Replacement Volume and 2025 Supplement)

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

22 **Article – Health – General**

23 15–101.

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

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (h) "Program" means the Maryland Medical Assistance Program.

2 **SUBTITLE 13. MATERNAL HEALTH MONITORING PILOT PROGRAM.**

3 **15-1301.**

4 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS
5 INDICATED.

6 (B) "ESCALATION PATHWAY" MEANS AN AGREEMENT BETWEEN A
7 PARTICIPATING MANAGED CARE ORGANIZATION AND A TECHNOLOGY VENDOR ON
8 THE PROCEDURE TO BE USED WHEN AN ELIGIBLE PARTICIPANT'S HEALTH DATA
9 WARRANTS FURTHER REVIEW AND INVESTIGATION.

10 (C) "HEALTH CARE PROVIDER" MEANS AN OBSTETRICIAN OR A
11 MATERNAL-FETAL MEDICINE PHYSICIAN WHO IS:

12 (1) LICENSED IN THE STATE; AND

13 (2) CARING FOR A PARTICIPANT.

14 (D) "MATERNAL DIABETES" MEANS DIABETES THAT:

15 (1) DEVELOPED PRIOR TO PREGNANCY AND CONTINUES DURING
16 PREGNANCY; OR

17 (2) DEVELOPS DURING PREGNANCY.

18 (E) "MATERNAL HYPERTENSION" MEANS HYPERTENSION THAT:

19 (1) DEVELOPED PRIOR TO PREGNANCY AND CONTINUES DURING
20 PREGNANCY; OR

21 (2) DEVELOPS DURING PREGNANCY.

22 (F) "PARTICIPANT" MEANS AN INDIVIDUAL WHO MEETS THE
23 REQUIREMENTS OF § 15-1302 OF THIS SUBTITLE AND IS PARTICIPATING IN THE
24 PILOT PROGRAM.

25 (G) "PARTICIPATING MANAGED CARE ORGANIZATION" MEANS A MANAGED
26 CARE ORGANIZATION SELECTED BY THE DEPARTMENT TO ADMINISTER THE PILOT
27 PROGRAM.

1 (H) "PILOT PROGRAM" MEANS THE MATERNAL HEALTH MONITORING
2 PILOT PROGRAM.

3 (I) "REMOTE PATIENT MONITORING" MEANS THE USE OF TECHNOLOGY
4 THAT:

5 (1) COLLECTS HEALTH DATA FROM AN ELIGIBLE PARTICIPANT AND
6 ELECTRONICALLY TRANSMITS THE DATA SECURELY THROUGH CELLULAR
7 NETWORKS;

8 (2) IS AUTHORIZED BY THE FEDERAL FOOD AND DRUG
9 ADMINISTRATION; AND

10 (3) MONITORS HEALTH DATA, INCLUDING:

11 (I) BLOOD PRESSURE;

12 (II) WEIGHT;

13 (III) BLOOD GLUCOSE LEVELS; AND

14 (IV) ANY OTHER PHYSIOLOGICAL HEALTH DATA DETERMINED
15 NECESSARY BY THE PARTICIPANT'S HEALTH CARE PROVIDER.

16 (J) "TECHNOLOGY VENDOR" MEANS THE TECHNOLOGY COMPANY
17 SELECTED AND CONTRACTED WITH BY A PARTICIPATING MANAGED CARE
18 ORGANIZATION.

19 15-1302.

20 (A) THERE IS A MATERNAL HEALTH MONITORING PILOT PROGRAM IN THE
21 DEPARTMENT.

22 (B) THE PURPOSE OF THE PILOT PROGRAM IS TO SUPPORT PREGNANT AND
23 POSTPARTUM PROGRAM RECIPIENTS WHO HAVE A HIGHER RISK OF PREGNANCY
24 COMPLICATIONS BECAUSE OF MATERNAL HYPERTENSION OR MATERNAL DIABETES.

25 (C) A PROGRAM RECIPIENT IS ELIGIBLE FOR THE PILOT PROGRAM IF THE
26 PROGRAM RECIPIENT:

27 (1) IS PREGNANT;

1 (2) IS AN ENROLLEE IN A PARTICIPATING MANAGED CARE
2 ORGANIZATION; AND

3 (3) HAS BEEN DIAGNOSED WITH MATERNAL HYPERTENSION OR
4 MATERNAL DIABETES.

5 (D) (1) THE DEPARTMENT SHALL:

6 (I) SELECT AT LEAST ONE MANAGED CARE ORGANIZATION TO
7 ADMINISTER THE PILOT PROGRAM IN A MANNER DETERMINED BY THE
8 DEPARTMENT; AND

15 (E) A PARTICIPATING MANAGED CARE ORGANIZATION SHALL:

20 (3) ENSURE PARTICIPANTS HAVE ACCESS TO REMOTE MONITORING
21 SERVICES UNDER THE PILOT PROGRAM.

22 (F) THE TECHNOLOGY VENDOR SHALL:

23 (1) PROVIDE PREPROGRAMMED TECHNOLOGY SPECIFIC TO EACH
24 PARTICIPANT; AND

25 (2) ENSURE THAT:

26 (I) REMOTE PATIENT MONITORING OCCURS DURING THE
27 PARTICIPANT'S SECOND AND THIRD TRIMESTERS AND FOR UP TO 3 MONTHS
28 POSTPARTUM;

3 (III) EACH PARTICIPANT IS TRAINED ON HOW TO USE THE
4 REMOTE PATIENT MONITORING DEVICE.

5 (G) (1) THE TECHNOLOGY VENDOR SHALL EMPLOY A CLINICAL TEAM
6 THAT INCLUDES:

7 (I) A NURSE LICENSED IN THE STATE;

8 (II) A DIETITIAN–NUTRITIONIST LICENSED IN THE STATE; AND

9 (III) A CERTIFIED DIABETES CARE AND EDUCATION SPECIALIST.

10 (2) THE CLINICAL TEAM EMPLOYED UNDER PARAGRAPH (1) OF THIS
11 SUBSECTION SHALL SUPPORT EACH PARTICIPANT BY:

12 (I) MONITORING AND REVIEWING THE PARTICIPANT'S HEALTH
13 DATA;

14 (II) ESTABLISHING, IN COLLABORATION WITH A
15 PARTICIPATING MANAGED CARE ORGANIZATION, AN ESCALATION PATHWAY TO BE
16 COMPLIED WITH IF THE PARTICIPANT'S REMOTE PATIENT MONITORING READINGS
17 AND SYMPTOMS REQUIRE IMMEDIATE ATTENTION FROM THE PARTICIPANT'S
18 HEALTH CARE PROVIDER; AND

19 (III) PROVIDING HEALTH COACHING TO EACH PARTICIPANT
20 REGARDING:

1. CONDITION MANAGEMENT:

2. HEALTH BEHAVIOR MODIFICATION: AND

3. NUTRITION.

24 (H) THE TECHNOLOGY VENDOR SHALL ASSIGN A PROGRAM MANAGER TO:

(1) SUPPORT IMPLEMENTATION OF THE PILOT PROGRAM; AND

1 **(I) THE DEPARTMENT SHALL ENSURE THAT PARTICIPATION IN THE PILOT**
2 **PROGRAM REPRESENTS THE GEOGRAPHIC DIVERSITY OF THE STATE AND INCLUDES**
3 **A STATISTICALLY RELEVANT NUMBER OF PARTICIPANTS.**

4 **(J) FOR FISCAL YEAR 2028, THE GOVERNOR SHALL INCLUDE IN THE**
5 **ANNUAL BUDGET BILL AN APPROPRIATION OF \$600,000 TO THE PROGRAM.**

6 **(K) THE PILOT PROGRAM SHALL OPERATE DURING FISCAL YEARS 2027**
7 **AND 2028.**

8 **(L) (1) ON OR BEFORE OCTOBER 1, 2028, THE DEPARTMENT, IN**
9 **CONJUNCTION WITH THE PARTICIPATING MANAGED CARE ORGANIZATIONS AND THE**
10 **TECHNOLOGY VENDORS, SHALL REPORT ITS FINDINGS AND RECOMMENDATIONS TO**
11 **THE GOVERNOR AND, IN ACCORDANCE WITH § 2-1257 OF THE STATE GOVERNMENT**
12 **ARTICLE, THE GENERAL ASSEMBLY.**

13 **(2) IN ACCORDANCE WITH PARAGRAPH (3) OF THIS SUBSECTION, THE**
14 **REPORT REQUIRED UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL PROVIDE**
15 **INFORMATION ON THE IMPACT OF THE PILOT PROGRAM ON:**

16 **(I) MARYLAND MEDICAL ASSISTANCE PROGRAM COSTS;**

17 **(II) MATERNAL OUTCOMES, INCLUDING:**

18 **1. THE RATE OF:**

19 **A. MATERNAL MORTALITY;**

20 **B. SEVERE MATERNAL MORBIDITY;**

21 **C. CAESAREAN SECTIONS;**

22 **D. INTENSIVE CARE UNIT (ICU) ADMISSIONS; AND**

23 **E. POSTPARTUM HOSPITAL READMISSIONS;**

24 **2. THE MEAN LENGTH OF HOSPITAL STAY; AND**

25 **3. PREECLAMPSIA; AND**

26 **(III) FETAL AND NEONATAL OUTCOMES, INCLUDING:**

27 **1. THE RATE OF:**

- A. FETAL MORTALITY;
- B. FETAL GROWTH RESTRICTION;
- C. NEONATAL MORTALITY; AND
- D. NEONATAL INTENSIVE CARE UNIT (NICU)

- 2. THE MEAN LENGTH OF STAY IN THE NICU;
- 3. NEONATAL HYPOGLYCEMIA;
- 4. PRETERM BIRTHS;
- 5. GESTATIONAL AGE AT DELIVERY; AND
- 6. BIRTHWEIGHT.

- (I) CLAIMS DATA;**
- (II) VITAL STATISTICS DATA;**
- (III) ELECTRONIC HEALTH RECORDS; AND**
- (IV) ELECTRONIC MEDICAL RECORDS.**

21 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July
22 1, 2026. It shall remain effective for a period of 3 years and, at the end of June 30, 2029,
23 this Act, with no further action required by the General Assembly, shall be abrogated and
24 of no further force and effect.