

HOUSE BILL 372

J3, J1

6lr2273
CF SB 169

By: **Delegate Lopez**

Introduced and read first time: January 19, 2026

Assigned to: Health

A BILL ENTITLED

1 AN ACT concerning

2 **Hospitals – Emergency Pregnancy–Related Medical Conditions – Procedures**

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

12 BY adding to

13 Article – Health – General

14 Section 19–342.1

15 Annotated Code of Maryland

16 (2023 Replacement Volume and 2025 Supplement)

17 BY repealing and reenacting, with amendments,

18 Article – Health – General

19 Section 20–214(b)

20 Annotated Code of Maryland

21 (2023 Replacement Volume and 2025 Supplement)

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

24 **Article – Health – General**

25 **19–342.1.**

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS
2 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:

7 (I) PLACING THE HEALTH OF THE PATIENT IN SERIOUS
8 JEOPARDY;

9 (II) SERIOUS IMPAIRMENT TO BODILY FUNCTIONS; OR

10 (III) SERIOUS DYSFUNCTION OF ANY BODILY ORGAN OR BODY
11 PART.

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

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

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

27 (2) TRANSFER THE PATIENT TO ANOTHER MEDICAL FACILITY.

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

31 (E) (1) A HOSPITAL IS CONSIDERED TO HAVE MET THE REQUIREMENTS
32 OF THIS SECTION IF, AFTER OFFERING FURTHER EXAMINATION AND TREATMENT OR

1 TRANSFER TO THE PATIENT OR THE PATIENT'S REPRESENTATIVE AND INFORMING
2 THE PATIENT OR PATIENT'S REPRESENTATIVE OF THE RISKS AND BENEFITS OF
3 FURTHER EXAMINATION AND TREATMENT OR TRANSFER:

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

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

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

12 (F) IF A PATIENT HAS AN EMERGENCY PREGNANCY-RELATED MEDICAL
13 CONDITION THAT HAS NOT BEEN STABILIZED, THE HOSPITAL MAY NOT TRANSFER
14 THE PATIENT UNLESS THE TRANSFER IS DONE CONSISTENT WITH 42 U.S.C. §
15 1395DD.

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

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

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

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

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

31 (1) FOR A HOSPITAL WITH 100 OR MORE BEDS, NOT MORE THAN
32 \$50,000 FOR EACH VIOLATION; OR

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

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

18 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:

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

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

27 (i) Civil liability to another person; or

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

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