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TO: The Honorable Delores G. Kelley, Chair

Members, Senate Finance Committee The Honorable Charles E. Sydnor, III

FROM: Pamela Metz Kasemeyer

J. Steven Wise Danna L. Kauffman Christine Krone

DATE: March 15, 2022

RE: **OPPOSE** – Senate Bill 843 – Perinatal Care – Drug and Alcohol Testing and Screening –

Consent

On behalf of the Maryland State Medical Society, the Maryland Chapter of the American Academy of Pediatrics, and the Maryland Section of the American College of Obstetricians and Gynecologists, we submit this letter of **opposition** for Senate Bill 843.

Senate Bill 843 would prohibit health care providers from administering a drug or alcohol test or screen to pregnant and perinatal patients and newborn infants unless the provider receives consent utilizing a specific consent form to be developed by the Maryland Department of Health (MDH). The consent form is required to describe the potential medical, legal, and collateral consequences of a positive drug or alcohol test or screen result in relation to the patient or newborn infant.

While the above-named organizations understand that the sponsor's intent is to ensure that pregnant and perinatal patients clearly understand the issues related to drug and alcohol testing and screening, the provisions of this bill could create unintended consequences and dramatically undermine the apparent objectives of this legislation. First, creating a separate consent form could actually increase stigma for these women as opposed to decreasing stigma. Failure to consent may dramatically escalate the assumption that there is a significant drug or alcohol problem. Further, the information that the bill requires to be included in a separate consent form cannot be accomplished. It is not possible to include all medical implications that could be associated with a pregnancy that are related to drug and alcohol testing nor are collateral consequences able to be adequately defined.

In addition, this bill applies to not only testing but also to screening. Newborn screening is the standard of care and essential to ensuring positive health outcomes. Similarly, health outcomes for a pregnant woman are also impacted by knowledge of underlying health issues and challenges, such as drug and alcohol use. This is not to say that pregnant women should not have the right to consent and/or decline testing but creating a separate consent form specific to this particular component of comprehensive

medical care will undermine the ability to appropriately serve the health care needs of pregnant women and their newborns.

If there is a desire to better educate pregnant women about the issues relative to drug and alcohol testing, then it would be better to focus on the creation of educational materials that could be provided to the pregnant women regarding drug and alcohol testing and interventions that may occur depending on the results of those tests. Maryland has been a leader in establishing specialized treatment and support frameworks for pregnant women and their newborns who may have substance abuse issues, such as the MD MOM initiative. Enhancing those initiatives and providing better outreach and education is a preferable approach and will not further enhance the stigmatization of these women that would result from the passage of Senate Bill 843. For the reasons stated, an unfavorable report is requested.

For more information call:

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