



March 11, 2022

To: The Honorable Shane E. Pendergrass, Chair, House Health & Government Operations Committee

Re: Letter of Information- HB 1335 - Perinatal Care - Drug and Alcohol Testing and Screening -

Consent Dear Chair Pendergrass:

On behalf of the Maryland Patient Safety Center, I appreciate the opportunity to offer information regarding House Bill 1335.

The Maryland Patient Safety Center (MPSC) has worked diligently over the past 18 years to improve the safety of health care in our state. We have led collaboratives to improve all aspects of healthcare safety, including those involving pregnancy, delivery and newborn care. Our c-section collaborative was successful in reducing – and maintaining reduction in- primary c-sections for Maryland women. And our recent neonatal abstinence syndrome (NAS) collaborative was successful in reducing transfer of babies of mothers with Opioid Use Disorder to a higher level of care, allowing them to stay with their mothers. As a Center of patient safety innovations, we convene providers of care to accelerate our understanding and implement evidence-based solutions for preventing avoidable harm. MPSC has a long history of working on quality improvement initiatives for maternal health through our former role as the facilitator of the Maryland Perinatal-Neonatal Quality Collaborative.

As President and CEO of the Maryland Patient Safety Center and a board-certified pediatrician, I appreciate the opportunity to provide feedback on House Bill 1335 which would prohibit a health care provider from administering a drug or alcohol test or screen to pregnant or perinatal patients and to newborns unless a separate consent form is signed. Most of Maryland's birthing hospitals include consent for drug and alcohol screening on women admitted to labor and delivery. This process reduces provider bias by requiring screening for all patients admitted for delivery. HB 1335 could unintentionally introduce bias into this process. Regarding the safety of newborns of mothers with Opioid Use Disorder, without testing, a newborn could be suffering from neonatal abstinence syndrome but be sent home without the proper treatment. The current process for universal screening used by Maryland hospitals is effective for ensuring mothers are properly tested and their infants treated accordingly. A change in the current process could result in harm to a newborn by not identifying a treatable condition in a timely manner.

Thank you for allowing me the opportunity provide information regarding House Bill 1335.

Sincerely.

Blair M. Eig, M.D., M.B.A., M.A.

President & CEO

Maryland Patient Safety Center