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THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

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The Senate Finance Committee

SB 965 – Public Health – Women’s Health Care Data - Report

Statement of Support by Bill Sponsor Senator Mary Beth Carozza

Thank you Chair Beidle, Vice Chair Hayes, and members of the distinguished Senate Finance Committee for this opportunity to present Senate Bill 965 – Public Health – Women’s Health Care Data – Report.

SB 965 would require the Maryland Department of Health to collect and compile data annually regarding the cost of birth, postpartum care, pregnancy care, and abortion to better understand the financial impact of these services on individuals, providers, and the State. This legislation would promote transparency and accountability in health care spending while safeguarding the privacy and dignity of individuals.

SB 965 strikes a balance between providing transparency and accountability in health care while protecting privacy. The bill specifically states on page 3, line 23, that “The Department is not required to collect or report data that would violate federal or State privacy laws” and additionally, on page 4, line 1, the bill states that the entities reporting to the Maryland Department of Health shall “anonymize and de-identify patient data as necessary to comply with applicable laws.”

We want to ensure privacy, but we also want to ensure that women’s health is prioritized in Maryland. The number of women who die giving birth in the United States has nearly doubled in the last two decades, and we are the only first-world country with a consistently rising maternal mortality rate. As a State with a prominent African-American population, we also must consider that African-American women are three times more likely to die from pregnancy-related complications than white women in the United States. With data collection, these disparities can be identified and addressed.

It especially was alarming to me, as I would think it would be for all of us as policymakers, to learn that Maryland is one of three states that does not collect this information. That means 47 other states have figured out a way to compile and collect this important women’s health data while still protecting privacy, but not the State of Maryland.

Federal legislation has been introduced prior to the new Administration that would mandate states to report abortion-related data as a condition for receiving Medicaid funding. To ensure Maryland remains compliant with federal funds and secures continued Medicaid funding, this state-level legislation is essential for establishing proper reporting procedures.

Informed Policy Decisions

The need to collect women's health data should go well beyond the federal pressure to collect the data to avoid losing Medicaid funding. Comprehensive data on costs for women's health and reproductive care – including pregnancy, postpartum care, birth and abortion – allows policymakers to make informed decisions based on factual evidence. Without this data, it is challenging to evaluate the impact of healthcare programs and allocate limited resources in an effective manner, especially during Maryland's current budget crisis.

Budget Transparency

Collecting and reporting cost data ensures transparency in the allocation and utilization of public funds, particularly Medicaid. This is essential for evaluating how taxpayer dollars are spent and in determining if programs are cost effective and equitable.

Identifying Gaps in Healthcare Access

Data collection can reveal disparities in healthcare access and affordability, particularly for underserved populations, such as low-income women and women of color. Understanding cost variations enables the state to address inequities and improve access to necessary care.

Support for Women and Families

By analyzing the financial burdens associated with birth, postpartum care, pregnancy and abortion, the state can identify areas where families may struggle and consider implementing support mechanisms to reduce these burdens.

Preventive Healthcare Strategies

Cost data can highlight the financial impact of preventable complications, such as untreated postpartum depression or pregnancy-related health issues. This allows for the development of preventive care programs, which are often more cost-effective and improve long-term health outcomes for women and children.

Accountability for Abortion Costs

Collecting data on Medicaid funding used for chemical and surgical abortions ensures accountability and compliance with state and federal regulations. This transparency is critical in understanding the financial and societal impact of such procedures.

Evaluation of Training Programs

Data on the costs of abortion care training programs helps assess their financial sustainability and effectiveness. This is necessary to ensure appropriate use of resources and adherence to statutory requirements.

Address Rising Healthcare Costs

Healthcare costs for pregnancy-related care have risen significantly in recent years. Tracking these costs provides a baseline for understanding trends and developing strategies to contain costs without compromising quality of care.

Promote Maternal and Child Health

Data collection helps identify areas where investments are needed to improve maternal and child health outcomes. For example, understanding the costs of postpartum mental health care can lead to targeted funding for mental health resources.

Comparison with National Benchmarks

Collecting state-level data enables comparisons with national benchmarks and other states. This can help Maryland evaluate how it performs relative to others and adopt best practices for improving women's health and reproductive care.

Ethical Considerations and Oversight

Transparent reporting on costs associated with reproductive care, especially for abortion, ensures ethical oversight and public accountability. It also provides clarity on how public funds are being used to address these sensitive issues.

Fostering Public Trust

Accurate and transparent data collection fosters trust between the public, providers, and policymakers. It demonstrates the state's commitment to responsible governance and prioritizing the health and well being of women and families.

Access to comprehensive fiscal data is essential for assessing associated health risks and ensuring that adequate support is available for women. It should be noted that the Maryland Health Department has developed a capability to create specialized public health data by using the state's data utility housed at CRISP – Chesapeake Region Information System for our Patients). It is the state-designated Health Information Exchange (HIE) by the Maryland Health Care Commission. The data utility has a board created originally by a coalition of hospitals in 2006 with board members from the Maryland Health Department's Public Health and Medicaid.

The Maryland Department of Health started using CRISP as a public health utility for a platform to support the opioid crisis mitigation, particularly for the Prescription Drug Monitoring Program

(PDMP) that was required by the legislature. During Covid, CRISP became a critical tool in monitoring cases and creating reports for public health action.

As former Maryland Health Secretary Dennis Schrader points out in his written testimony: “CRISP can readily support public health data projects cost effectively as Senate Bill 965 envisions.”

This legislation requiring the Maryland Department of Health to collect and compile data annually regarding the cost of birth, postpartum care, pregnancy care, and abortion would lead to informed policy decisions, budget transparency, identifying gaps in healthcare access, preventive healthcare strategies, accountability for abortion costs, evaluation of training programs, and using data to identify strategies to promote maternal and child health.

For all of these reasons, I ask for your kind consideration and favorable report of SB 965 – an important women’s health care bill benefitting Maryland women and families.