



Maryland
Hospital Association

**House Bill 1251 - Health Care Facilities and Medical Professional Liability Insurers –
Obstetric Services Policies (Doula and Birth Policy Transparency Act)**

Position: *Support with Amendments*

February 25, 2025

House Health & Government Operations Committee

MHA Position

On behalf of the Maryland Hospital Association's (MHA) member hospitals and health systems, we appreciate the opportunity to comment in support with amendments of House Bill 1251.

HB 1251 requires hospitals to adopt policies that will allow every birthing parent to have a certified doula present during birth and to seek informed consent from the birthing parent before any significant medical intervention. Furthermore, the bill requires hospitals to adopt, and to share with the Department of Health, policies on receiving patients (and their medical records) who are receiving services from other providers in a home birth setting.

Hospitals seek to provide birthing parents with high quality care in a safe, supportive environment. To that end, policies are already in place around who may be in the delivery room, informed consent for medical interventions, and coordination with the patients' care team. Generally, patients may choose who joins them during birth including a certified doula, so long as there is no interference with or obstruction of medical care. In certain circumstances, like COVID-19, the number of people may need to be limited. Hospitals also already obtain informed consent from the patient before any medical intervention, except for in emergency situations where any delays in care could be life threatening for either the parent or the child.

As we understand from conversations with licensed direct-entry midwives (LDEMs), the intent behind this bill is to ensure that birthing parents are aware of hospital policies, can have the support of their certified doulas, and that there are clear policies that make the transfer of care between midwives and hospitals as seamless as possible. While we fully support this intent, we believe the language can be amended to better reflect it without being duplicative or overly prescriptive, enabling integrative approaches to care that are reasonable and effective.

We have been closely working with LDEMs to discuss these concerns with the bill and hope to continue to do so. For these reasons, we request a favorable with amendments report on HB 1251.

For more information, please contact:
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