



## Maryland Section

House Health and Government Operations Committee  
February 25, 2025

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

**POSITION: SUPPORT ONLY IF AMENDED**

The American College of Obstetricians and Gynecologists, Maryland Section (MDACOG), which represents the Maryland physicians who serve the obstetrical and gynecological needs of Maryland women and their families, supports House Bill 1251 only if the legislation is amended.

House Bill 1251 establishes requirements for obstetric policies, mandating that hospitals and freestanding ambulatory care facilities providing obstetric care adopt and submit policies to the Maryland Department of Health (MDH). These policies must address doula access, newborn bonding, informed consent for medical interventions, and patient transfers, including from home birth settings. Additionally, upon request, insurers that issue or deliver medical professional liability insurance must provide MDH with information on their coverage of obstetric services, including policies related to vaginal birth after cesarean.

MDACOG recognizes the valuable role that doulas play in providing physical, emotional, and informational support throughout pregnancy, labor, delivery, and postpartum recovery. Research indicates that doula support can enhance birthing experiences, improve communication between patients and healthcare teams, and, in some cases, reduce the likelihood of medical interventions, including cesarean birth<sup>i</sup>.

However, while MDACOG is supportive of the role doulas play in patient care, we urge caution in the details of legislation governing doula-hospital relationships. Doulas are not medical providers and should complement – not replace – the role of obstetricians, nurses, and other healthcare professionals. Policies must ensure that hospital-based standards of care, patient safety protocols, and scope of practice limitations are upheld, while fostering collaborative relationships between doulas and medical teams. For these reasons we urge a favorable vote, but only if the legislation is amended.

**For more information call:**

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<sup>i</sup> American College of Obstetricians and Gynecologists. (2014, Reaffirmed 2021). **Safe prevention of the primary cesarean delivery.** *Obstetric Care Consensus, No. 1. Obstetrics & Gynecology*, 123(3), 693–711.  
<https://doi.org/10.1097/01.AOG.0000444441.04111.1d>