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Health and Government Operations Committee

Subcommittees

Government Operations and Health Facilities

Insurance and Pharmaceuticals



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THE MARYLAND HOUSE OF DELEGATES Annapolis, Maryland 21401

Maryland Medical Assistance Program - Self-Measured Blood Pressure Monitoring - HB553/SB94

Testimony of Maryland State Delegate Deni Taveras

Thank you, Chair Pena-Melnyk, Vice Chair Cullison, and esteemed committee members. I am here to request your favorable report on HB 553, Maryland Medical Assistance Program – Self-Measured Blood Pressure Monitoring It is the cross file to SB 94 by Senator Ellis.

Hypertension in pregnancy is a leading cause of maternal mortality and long-term cardiovascular complications. Between 2017 and 2019, the prevalence of hypertensive disorders in pregnancy increased from 13.3% to 15.9% nationwide, with Black women experiencing the highest rates. These conditions accounted for 6.3% of pregnancy-related deaths during this period.

This bill ensures Medicaid coverage for self-measured blood pressure monitoring for eligible recipients, including pregnant and postpartum individuals, and those with chronic conditions such as heart disease or diabetes. Through this initiative, validated home blood pressure monitors and support services will be provided, empowering patients to manage their health and enabling early detection of hypertensive disorders.

The urgency of this bill stems from the significant health disparities faced by underserved communities, rural areas where access to obstetric care is declining and in suburban areas where such care is limited. Women in these regions face a greater risk of pregnancy-related complications due to limited preventive health services. HB 553 seeks to bridge this gap, promoting health equity by providing accessible and affordable monitoring tools.

Moreover, extending Medicaid coverage for self-measured blood pressure monitoring aligns with public health goals to reduce maternal mortality and improve health outcomes. By integrating these tools into pre-pregnancy, pregnancy, and postpartum care, we can detect and manage hypertension earlier, reducing the risk of severe complications and future risks.

This is part of a broader effort to improve maternal health outcomes and address disparities within Maryland. By passing HB 553, we take a critical step toward reducing preventable maternal deaths and improving the quality of care for women across the state.

In closing, I ask this esteemed committee for your favorable report on HB 553.