

SENATE BILL 348

J1, J3

6lr2497

By: **Senator Jackson**
Introduced and read first time: January 23, 2026
Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Hospitals and Freestanding Birthing Centers – High-Risk Pregnancies –**
3 **Communication After Discharge**

4 FOR the purpose of altering the ~~time period~~ requirement that a hospital or freestanding
5 birthing center contact the birth parent after the delivery of a newborn following a
6 high-risk pregnancy ~~in which a hospital or freestanding birthing center must call~~
7 ~~the birthing parent to evaluate the birthing parent’s status and, as necessary,~~
8 ~~provide certain information for a certain purpose to remove the requirement that the~~
9 ~~contact be made through a call and to lengthen the time period within which the contact~~
10 ~~must be made~~; and generally relating to hospitals and freestanding
11 birthing centers and high-risk pregnancies.

9 BY repealing and reenacting, with amendments,
10 Article – Health – General
11 Section 19–310.5 and 19–3B–03.1
12 Annotated Code of Maryland
13 (2023 Replacement Volume and 2025 Supplement)

14 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
15 That the Laws of Maryland read as follows:

16 **Article – Health – General**

17 19–310.5.

18 (a) If a newborn is delivered in a hospital following a high-risk pregnancy, the
19 hospital shall:

20 (1) Complete a postpartum infant and maternal referral form and submit
21 the form to the local health department for the county in which the birthing parent resides;

22 (2) Provide to the birthing parent resources and information specific to the
23 circumstances of the birthing parent, including information regarding the risks, signs,
24 preventive measures, and treatment needs for postpartum complications, including

2 REPRINT OF SENATE BILL 348 as amended by SB0348/483421/1 02/09/26 at 10:16 AM

1 cardiovascular conditions, chronic disease, substance misuse, and mental health
2 conditions; and

3 (3) ~~Call~~ CONTACT the birthing parent at least 24, but not later than [48] 72,
4 hours
5 after discharging the parent to evaluate the parent's status and, as necessary, provide
6 information about postpartum complications.

6 (b) On or before October 1 each year, each local health department shall submit
7 to the Department a report that includes the number and type of referrals made based on
8 the referral forms submitted to the local health department in accordance with subsection
9 (a)(1) of this section.

10 19-3B-03.1.

11 (a) If a newborn is delivered in a freestanding birthing center following a
12 high-risk pregnancy, the freestanding birthing center shall:

13 (1) Complete a postpartum infant and maternal referral form and submit
14 the form to the local health department for the county in which the birthing parent resides;

15 (2) Provide to the birthing parent resources and information specific to the
16 circumstances of the birthing parent, including information regarding the risks, signs,
17 preventive measures, and treatment needs for postpartum complications, including
18 cardiovascular conditions, chronic disease, substance misuse, and mental health
19 conditions; and

20 (3) ~~Call~~ CONTACT the birthing parent at least 24, but not later than [48] 72,
21 hours
22 after discharging the parent to evaluate the parent's status and, as necessary, provide
23 information about postpartum complications.

23 (b) On or before October 1 each year, each local health department shall submit
24 to the Department a report that includes the number and type of referrals made based on
25 the referral forms submitted to the local health department in accordance with subsection
26 (a)(1) of this section.

27 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
28 October 1, 2026.