



MARYLAND
CATHOLIC
CONFERENCE

March 11, 2026

House Bill 1487

**Public Health – Baltimore City Mobile Infant and Maternal Health Pilot Program
House Health Committee**

Position: Favorable

The Maryland Catholic Conference (MCC) is the public policy representative of the three (arch)dioceses serving Maryland, which together encompass over one million Marylanders. Statewide, their parishes, schools, hospitals, and numerous charities combine to form our state’s second largest social service provider network, behind only our state government.

House Bill 1487 establishes the Baltimore City Mobile Infant and Maternal Health Pilot Program in the Maryland Department of Health; and requiring the Secretary to consult with the Baltimore City Health Department in the development and implementation of the Program.

Promoting women’s health at every stage of life is essential to upholding human dignity and fostering a culture that respects and promotes life. Mobile health units help remove practical barriers—such as lack of transportation—that often prevent new mothers from attending postpartum appointments. By bringing care closer to home, these units increase access and continuity of care during a critical period. Providing services within neighborhoods, mobile clinics can foster trust and make it easier for mothers to seek care in a more familiar and less intimidating setting than a hospital. They also help ensure culturally competent care that reduces stigma—particularly around mental health—and encourages early identification of postpartum depression, anxiety, and other behavioral health concerns. Early screening and timely referrals can prevent long-term challenges for both mother and child.

Providers in states such as Rhode Island that have implemented mobile postpartum care programs report improved follow-up during the “fourth trimester” —the first six weeks after birth. This period is critical, as many women are discharged from the hospital but do not see a provider again until their six-week postpartum visit. During that time, significant health issues can arise, including hypertension, diabetes complications, and wound infections.¹ Mobile care helps bridge that gap. Postpartum services are often delivered one-on-one, allowing providers to address individualized concerns such as breastfeeding support, C-section wound

¹ <https://oceanstatestories.org/community-mobile-health-clinic-meets-mothers-needs-after-giving-birth/>

management, blood pressure monitoring, diabetes management, and newborn care.² Some begin during pregnancy and resolve shortly after birth, while others may develop later and persist for years. Early intervention is therefore crucial.

By facilitating early detection, improving communication between patients and providers, and reducing barriers to timely care, mobile health units help uphold the dignity of postpartum women and protect the health of both mother and child. They support women in remaining engaged in their care, receiving interventions before complications escalate, and building healthier families—advancing Maryland’s broader maternal health goals.

For these reasons, the Maryland Catholic Conference asks for a favorable report on **HB 1487**.

Thank you for your consideration.

² <https://www.nichd.nih.gov/health/topics/maternal-morbidity-mortality/conditioninfo/causes>