



## **SB 348 - Hospitals and Freestanding Birthing Centers – High-Risk Pregnancies – Communication After Discharge**

Position: **Support**  
House Health Committee  
March 25, 2026

MedStar Health is the largest healthcare provider in the Maryland and Washington, D.C. region. MedStar Health offers a comprehensive spectrum of clinical services through over 500 care locations, including 10 hospitals, 33 urgent care clinics, ambulatory care centers, and an extensive array of primary and specialty care providers. As a not-for-profit healthcare system, MedStar Health is committed to its patient-first philosophy, emphasizing care, compassion, and clinical excellence, and is supported by a dedicated team of more than 35,000 physicians, nurses, and other clinical and non-clinical associates.

The Maryland Maternal Health Act requires hospitals to call the birthing parent at least 24 hours and no later than 48 hours after discharge, to evaluate their status and, as necessary, provide information about postpartum complications following a high-risk pregnancy. As amended, SB 348 would change the term “call” to “contact” and allow for additional outreach modalities, including text, to reach patients.

MedStar Health practitioners have struggled to connect by phone in the 24–48-hour period required by law. Most patients are “unable to reach” or “decline” in our call data. Since the implementation of the calls on July 1, 2025, the call engagement rate is only 39% for all postpartum patients at MedStar birthing hospitals across the state. Just over 60% of the calls go unanswered, leaving many birthing parents without this postpartum outreach.

The Safe Babies Safe Moms (SBSM) program at MedStar Washington Hospital Center has tested innovative approaches to improve maternal and infant health outcomes and promote health equity and shown that it is possible to reduce disparities in birth outcomes using targeted, evidence-based strategies<sup>1</sup>. SBSM uses texting to connect with postpartum mothers and has demonstrated a 67% engagement rate. In addition to higher initial engagement, the text system ensures that questions and issues are routed to the right clinicians and that individuals receive the resources they need for themselves and the baby. Our operational experience convinces us that in this cohort of young people, we will achieve a higher engagement rate by combining SMS messaging with calls, and a growing body of research supports this conclusion.

Expanding the modality will give our team the best chance to connect with patients to answer questions about themselves and their newborns, share postpartum warning signs, and discuss when to call their doctor or seek emergent care. Adding additional flexibility to the statute ensures that Maryland continues to reduce health disparities while respecting patient choice and communication preferences.

For the reasons above, MedStar Health urges a ***favorable*** report on **SB 348**.

---

<sup>1</sup> *D.C. Safe Babies Safe Moms: A Novel, Multigenerational Model to Reduce Maternal and Infant Health Disparities*, NEJM Catalyst Innovations in Care Delivery, DOI: 10.1056/CAT.24.0161, <https://catalyst.nejm.org/doi/10.1056/CAT.24.0161>