



**HEALTHY
MOMS.
STRONG
BABIES.**



maryland families 
for safe birth

Date: March 13, 2026

Bill # / Title: House Bill 1118 - Health, Health Insurance, and Health Occupations – Perinatal Mental Health Conditions

Committee: Health Committee

Position: Favorable

Dear Chair Bagnall, Vice Chair Cullison and Members of the Health Committee,

The undersigned organizations—**Postpartum Support International - Maryland (PSI-Maryland), March of Dimes, The Doula Alliance of Maryland, and Maryland Families for Safe Birth**—strongly urge a favorable report on HB 1118. This bill is a critical first step in advancing perinatal mental health care in the state of Maryland. Our coalition represents a broad spectrum of advocates, clinical providers, birth workers, and families dedicated to improving maternal and perinatal health outcomes across the state. Together, we are committed to strengthening the continuum of care for Maryland’s birthing people.

In the United States, [one in five](#) mothers are impacted by a mental health condition during the pregnancy or postpartum period, and mental health conditions are the leading underlying cause of pregnancy-related deaths. More than 75% of women impacted by perinatal mental health conditions remain untreated.

In Maryland, the most common comorbidity of a severe maternal morbidity event, after obesity, was a mental health disorder (29.1%). The Maryland Maternal Mortality Review (MMR) [found](#) that behavioral health conditions are the leading cause of pregnancy-associated deaths, accounting for 23% of preventable deaths in 2020. The Maryland MMR also [concluded](#) that a majority of 2020 deaths (70% of pregnancy-related deaths, 78% of non-pregnancy-related deaths) were considered preventable.

Maryland continues to face significant gaps in the screening and treatment of perinatal mental health conditions. Adequate and timely screening can increase identification of those at risk for perinatal mental health conditions and ultimately save lives. Research-validated screening tools can provide a critical entry point for life-saving clinical interventions, care coordination, and ongoing support.

However, the [Policy Center for Maternal Mental Health](#) awarded Maryland with an “F” for screening and screening reimbursement in its 2025 report card. HR 1118 is a necessary and timely step toward addressing these gaps and strengthening Maryland’s maternal health infrastructure. By improving screening access and systemic support for behavioral health concerns, this legislation advances prevention, early intervention, and coordinated care, ultimately saving lives.

Thank you for your continued leadership on behalf of Maryland families. We respectfully ask the Committee for favorable report on HR 1118. If you have any questions, you can reach out to Claire Ernst at psimdadvocacy1@gmail.com.

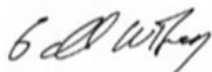
Sincerely,



Claire Ernst, JD
Advocacy Chair
Postpartum Support International - Maryland (PSI-Maryland)



Elizabeth Kielb, PhD, MS
Director, Maternal and Infant Health, March of Dimes
March of Dimes



Edward Bray
Senior Director, State Government Affairs
March of Dimes



Director of Advocacy and Public Policy
Doula Alliance of Maryland
President
Maryland Families for Safe Birth