



Wes Moore, Governor · Aruna Miller, Lt. Governor · Meena Seshamani, M.D., Ph.D., Secretary

March 25, 2026

The Honorable Heather Bagnall  
Chair, House Health Committee  
Room 241, House Office Building  
Annapolis, Maryland 21401

**RE: Senate Bill 394 – Public Health – Expedited Partner Therapy – Bacterial Vaginosis and Licensed Certified Midwives – Letter of Support As Amended**

Dear Chair Bagnall and Committee members:

The Maryland Department of Health (the Department) respectfully submits this letter of support as amended for Senate Bill (SB) 394 – Public Health – Expedited Partner Therapy – Bacterial Vaginosis and Licensed Certified Midwives. This bill would add bacterial vaginosis to the list of diagnoses for which certain health care practitioners, including licensed certified midwives, may prescribe, dispense, or otherwise provide antibiotic therapy to a sexual partner of a diagnosed patient without first conducting a personal physical assessment of that partner.

Bacterial vaginosis is highly prevalent among reproductive-age individuals and is associated with increased risk of adverse reproductive health outcomes, highlighting the public health benefit of partner treatment.

Expedited partner therapy (EPT) is a public health strategy currently authorized in Maryland for chlamydia, gonorrhea, and trichomoniasis. SB 394 would expand this existing framework by permitting, but not requiring, EPT for bacterial vaginosis, consistent with evolving clinical evidence and practice considerations.<sup>1</sup>

In December 2025, the American College of Obstetricians and Gynecologists recommended supporting partner evaluation and treatment in certain cases, particularly when partners face barriers to accessing care.<sup>2</sup> Currently, statutory restrictions limit the widespread adoption of EPT for bacterial vaginosis. EPT can help ensure that partners facing geographic, financial, or social barriers still receive timely treatment. SB 394 would align Maryland law with the expanding scientific literature by permitting its use where clinically appropriate. Implementation of this bill

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<sup>1</sup> Vodstrcil, L. A., Plummer, E. L., Fairley, C. K., Hocking, J. S., Law, M. G., Petoumenos, K., Bateson, D., Murray, G. L., Donovan, B., Chow, E. P., Chen, M. Y., Kaldor, J., & Bradshaw, C. S. (2025a). Male-partner treatment to prevent recurrence of bacterial vaginosis. *New England Journal of Medicine*, 392(10), 947–957. <https://doi.org/10.1056/nejmoa2405404>

<sup>2</sup> American College of Obstetricians & Gynecologists. (2025). *Concurrent sexual partner therapy to prevent bacterial vaginosis recurrence*. *Obstetrics & Gynecology*. <https://doi.org/10.1097/AOG.0000000000006102>

would primarily involve updating regulations and related materials for health care practitioners, which the Department can accommodate with existing resources. The Department is supportive of the amendments that make technical changes and that add Licensed Certified Midwives to the list of health care practitioners who may prescribe, dispense, or otherwise provide antibiotic therapy.

If you would like to discuss this further, please do not hesitate to contact Meghan Lynch, Director of Governmental Affairs at [meghan.lynch@maryland.gov](mailto:meghan.lynch@maryland.gov).

Sincerely,

A handwritten signature in blue ink, appearing to read 'Meena Seshamani', with a stylized flourish at the end.

Meena Seshamani, M.D., Ph.D.  
Secretary of Health