



Maryland  
Hospital Association

**Senate Bill 1059 - Maternal Health – Assessments, Referrals, and Reporting (Maryland Maternal Health Act of 2024)**

**Position: *Support with Amendments***

March 14, 2024

Senate Finance Committee

**MHA Position**

On behalf of the Maryland Hospital Association's (MHA) member hospitals and health systems, we appreciate the opportunity to comment in support of Senate Bill 1059 as amended by the sponsor's amendments.

Maryland hospitals are placing a significant emphasis on collaborative efforts to counteract elevated maternal morbidity and mortality rates, as well as longstanding disparities. This includes implementing system-wide equity plans to ensure equitable access to health care for people before, during, and after pregnancy.

The independent reviews of a representative sample of cases of maternal morbidity, proposed under SB 1059, will bring additional clarity to the drivers of maternal morbidity and mortality and add to our understanding of what is needed to reduce the disparities in maternal health and foster good outcomes for all birthing parents. What we know now is that many factors influence maternal health outcomes, including the age, health and environment of the mother before pregnancy, post-partum support, and the trust and relationship with doctors and caregivers throughout the perinatal period.

The requirements of the bill build on existing programs and upgrade existing processes. We are fortunate that the MDMOM program has created the infrastructure to do the severe maternal morbidity reviews, and MHA is pleased to support and amplify that work. The bill mentions specific forms completed by hospitals and physicians in the pre-natal and post-partum period that refer high-risk patients to local health departments to connect families to local resources specific to the family's needs. We appreciate the planning underway to simplify and modernize the process. It is critical that the workflow redesign include hospitals, practices, Medicaid Managed Care Organizations and local health officers to ensure feasible workflows. As the state plans for the next in the Maryland Model, strengthening the ways in which hospitals, local health departments, MCOs and community organizations work together will be beneficial.

For these reasons, we respectfully request a *favorable* report on SB 1059 as amended by the sponsor's amendments.

For more information, please contact:

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