



Bill Summary

Maryland Maternal Health Act of 2024

[Senate Bill 1059 / House Bill 1051](#)

BILL SUMMARY

SB 1059/HB 1051 requires local health departments, certain health care providers, and hospitals to complete prenatal risk assessment forms and postpartum infant and maternal referral forms. The bill also requires the Secretary of Health to develop a Maryland Report Card for Birthing Facility Maternity Care, as well as hospitals to participate in the Severe Maternal Morbidity Surveillance Program, run by MDMOM, to identify risk factors and causes of severe maternal morbidity.

WHAT'S NEXT

- All hospitals must participate in SMM reviews by Oct. 1, 2024; all other provisions will go into effect July 1, 2025
- The Maryland Department of Health is tasked with establishing a process by which providers can submit referral forms electronically. MDH committed to include MHA and others in a working group to streamline the form completion and submission process.
- The Severe Maternal Morbidity Surveillance and Review Program must report its findings and recommendations to the Governor by Dec. 1, 2025

WHAT YOU CAN DO

Inform your maternal health leadership and staff on the standardized prenatal risk assessments and postpartum referral forms required under the law. Review all SMM data including what is reported to CMS and provided by MHA based on data submitted to HSCRC. Review your performance on patient experience of care questions related to respectful care. MHCC is likely to use these sources for its public report card. Ensure staff are aware of resources related to postpartum complications that they can direct birthing parents to and that there are people and processes in place to ensure compliance with reporting and survey requirements. For more information, contact mha@mhaonline.org.

KEY TAKEAWAYS

- Obstetric service providers caring for Medicaid patients must complete a standardized prenatal risk assessment and submit it to the local health department (LHD)
- For newborns delivered in hospitals following a high-risk pregnancy, the hospital must complete and submit a postpartum infant and maternal referral form to the LHD
- Hospitals must provide the birthing parent with resources and information related to the risks, signs, preventive measures, and treatment needs for postpartum complications, such as cardiovascular conditions, chronic disease, substance misuse, and mental health conditions.
- Hospitals must follow up with the birthing parent 24-48 hours after discharge to evaluate the patient's status and provide further information as needed
- The Secretary of Health, in collaboration with the Maryland Health Care Commission, must develop a Maryland Report Card for Birthing Facility Maternity Care that includes the following information for each birthing facility, disaggregated by race and age:
 - The number and rate of vaginal and cesarean deliveries performed
 - The age-adjusted rate and the total number of complications (including maternal hemorrhage, laceration, infection, or others) experienced by a patient receiving obstetric care for vaginal or cesarean delivery at the birthing facility
 - Qualitative measures based on patient input regarding the receipt of respectful obstetric care
- The report card score will be risk-adjusted based on the acuity level for obstetric patients. The most recent report card will be published on the Department's website.
- Once every three years the Secretary will review the criteria and make revisions
- Each hospital will be required to participate in the Severe Maternal Morbidity Surveillance and Review Program