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TO: The Honorable Brian E. Frosh, Chair
Members, Senate Judicial Proceedings Committee
The Honorable Christopher Shank

FROM: Pamela Metz Kasemeyer
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DATE: March 12, 2014

RE: **OPPOSE** – Senate Bill 944 – *Family Law – Controlled Dangerous Substance Use During Pregnancy and Substance-Exposed Newborns - Reporting*

On behalf of the American Congress of Obstetricians and Gynecologists, Maryland Chapter, (MDACOG), MedChi, the Maryland State Medical Society (MedChi), and the Maryland Chapter of the American Academy of Pediatrics (MDAAP), we oppose Senate Bill 944.

Senate Bill 944 amends the section of the law enacted in 2013 in response to the federal Child Abuse Prevention and Treatment Act (CAPTA) which requires states to establish policies, procedures, and programs to identify and address the needs of newborn infants who are born substance-exposed or exhibit an indication of fetal alcohol spectrum disorder. The legislation enacted in 2013 was a collaborative effort among all stakeholders. It reflected a careful balance of interests which was designed to address the challenging issues raised by reporting requirements that can often create disincentives for women to necessary prenatal care and the health care needs of the newborns found to be substance exposed. The new requirements to prohibit discharge until certain investigations by DHR are completed do not provide additional protection to the newborn and will result in unnecessary costs with no demonstrable benefit to the newborn or the family.

The legislation also, and more troubling, establishes reporting requirements for health care practitioners to report to local law enforcement pregnant woman who they discover have used a controlled dangerous substance during pregnancy. The proposed reporting requirements will create a tremendous disincentive for pregnant woman most in need of prenatal care to access those services. Avoidance of prenatal care will only result in worse birth outcomes for the very babies this legislation is purportedly intended to serve. Furthermore, pregnant women who have substance abuse issues

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are regularly referred to services to address that abuse. If they avoid prenatal care out of fear of criminal reporting requirements, they will not receive these services and the long term impact of that abuse on the woman and the newborn will be more significant.

In 2013, this General Assembly crafted the appropriate balance between reporting, intervention and access. Senate Bill 944, if enacted, would destroy that balance and significantly undermine the objectives of the law – the prompt and appropriate intervention for substance exposed newborns and their families. An unfavorable vote is requested.

For more information call:

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