TO: The Honorable Shane E. Pendergrass, Chair
Members, House Health and Government Operations Committee
The Honorable Joseline A. Pena-Melnyk

FROM: Pamela Metz Kasemeyer
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DATE: February 26, 2020


On behalf of the Maryland State Medical Society (MedChi) and the Maryland Section of the American College of Obstetricians and Gynecologists (MDACOG), we submit this letter of support for House Bill 837.

House Bill 837 provides two important enhancements to Maryland’s commitment to address maternal mortality and enhance the provision of perinatal and postpartum care. First, the legislation amends the Cultural and Linguistic Health Care Professional Competency Program by adding a requirement that the program establish and provide an evidence–based implicit bias training program for health care professionals involved in the perinatal care of patients. The bill requires that perinatal facilities including hospitals and birthing centers provide implicit bias training to all employees who are involved in the provision of perinatal care and that the training be given at least every two years. The legislation also encourages professionals involved in perinatal care that are not employees of the perinatal facilities to also take the training. Given the significant disparity in infant and maternal mortality rates for African American and Hispanic women, it is believed that addressing implicit bias and the implications it has for birth outcomes and the health and well-being of pregnant women and their children will contribute significantly to a reduction in maternal mortality.

Secondly, House bill 837 requires the Maternal Mortality Review Program in conjunction with the Maternal Mortality Review Committee and the Local Review Teams to study how reporting on severe maternal morbidity could be added to the responsibilities of the Maternal Mortality Review Program. Like maternal mortality, statistics on severe maternal morbidity also demonstrate significant disparities based on race and ethnicity. Furthermore, severe maternal morbidity has a significant impact on the long-term health challenges of the mother. While more complicated to evaluate, the required study is structured to provide a comprehensive analysis of how best to incorporate severe maternal morbidity into the State’s efforts to reduce both maternal mortality and morbidity. The Program is to report its finding and recommendations by December 31, 2020.

Passage of House Bill 837 will advance Maryland’s ability to reduce the incidences of maternal mortality and morbidity. A favorable report is requested.

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