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House Health and Government Operations Committee
February 27, 2025
House Bill 1357 – *Public Health – Reproductive Health Care Data - Report*
POSITION: OPPOSE

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 opposition for House Bill 1357.

House Bill 1357 proposes the collection of annual data on the costs of birth, postpartum care, pregnancy care, and abortion in Maryland, which raises concerns. The bill mandates that the Department of Health gather detailed cost data from healthcare providers and hospitals, potentially increasing the administrative burden on already overburdened medical professionals. The collected data would include sensitive information related to abortion procedures, delivery complications, and postpartum care, potentially leading to privacy risks for patients.

Additionally, there is already reliable data available on the costs associated with reproductive health services. Organizations like the [Guttmacher Institute](#) and the [Society for Family Planning](#) regularly collect and publish accurate data on pregnancy care, abortion, and related costs. These organizations have the necessary expertise and systems in order to track this information, making it unnecessary for the state to create a separate and potentially invasive reporting system.

Finally, imposing such data collection requirements on healthcare providers would add unnecessary administrative burdens. In an already strained healthcare environment, providers would be forced to divert resources away from patient care to comply with additional reporting demands. Moreover, by implementing a system that tracks the costs of such services, the state risks intruding on the doctor-patient relationship and impeding individuals' ability to make decisions about their health without fear of external surveillance or intervention.

For these reasons MedChi and MDACOG oppose House Bill 1357.

For more information call:

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