



Maryland
Hospital Association

House Bill 837 – Public Health- Maternal Mortality and Morbidity- Implicit Bias Training and Study

Position: *Support as Amended in the House*

March 16, 2020

Senate Finance Committee

MHA Position

Maryland's 61 nonprofit hospitals and health systems care for millions of people each year, treating 2.3 million in emergency departments and delivering more than 67,000 babies.

The United States, sadly, has the highest maternal mortality rate among developed countries.ⁱ Given this concerning trend, Maryland is working to improve maternal health outcomes, including through the [Alliance for Innovation on Maternal Health \(AIM\)](#), a federally-funded, national initiative to align quality improvement efforts at the national, state and hospital levels. Maryland most recently received a \$10.3 million federal grant that established the Maryland Maternal Health Innovation Program. This five-year initiative will be led by Johns Hopkins University, along with partners from the Maryland Department of Health, the Maryland Patient Safety Center (MPSC) and the University of Maryland, Baltimore County. The goal of the initiative is to help the state comprehensively improve maternal health outcomes through a statewide task force, improved data collection, and the implementation of quality improvement programs for health care providers and hospitals.

As part of this work, MPSC will facilitate training on implicit bias for hospital-based perinatal health care providers. HB 837 complements these efforts and is fully supported by Maryland hospitals. The data is clear: There are disparities in maternal health outcomes for women of color—especially for black women. These disparities persist regardless of income, level of education, socio-economic status, and access to care.ⁱⁱ Maryland hospitals are committed and eager to partner with the Maternal Health Innovation Program to learn about the issues, monitor the effectiveness of implicit bias training and engage in other quality improvement programs established under the grant.

In addition to this statewide effort, there are local teams working to improve maternal health outcomes. The Maryland Hospital Association is partnering with Baltimore Healthy Start, Baltimore City hospitals, and other stakeholders to implement the Safer Childbirth Cities Initiative, part of Merck for Mothers.ⁱⁱⁱ Under this initiative, the Patients as Partners effort will acknowledge the experience of maternal health patients who had negative outcomes, and incorporate their voices into the quality improvement process. These stakeholders will also work closely with the Maryland Maternal Health Innovation Program to collect data.

Improving maternal health will take a comprehensive, all-hands on deck approach that engages diverse stakeholders. Between the two grants alone, there will be a range of interventions to

address important issues, such as access and engagement through community-based outreach, improved data tracking, root cause analysis and telemedicine pilots. Maryland's hospitals will continue to engage in efforts to improve maternal health outcomes.

Sponsor amendments were added to include the Maryland Maternal Health Innovation Program (MHIP) in undertaking a study on severe maternal morbidity. MHA fully supports MHIP's inclusion in these efforts.

For these reasons, we urge a *favorable* report on HB 837 as amended in the House.

For more information, please contact:
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ⁱ Alliance for Innovation on Maternal Health. "About AIM." safehealthcareforeverywoman.org/aim-program-3/about-aim/

ⁱⁱ Centers for Disease Control and Prevention. (September 6, 2019). "Racial/Ethnic Disparities in Pregnancy-Related Deaths- United States, 2007-2016." www.cdc.gov/mmwr/volumes/68/wr/mm6835a3.htm?s_cid=mm6835a3_w

ⁱⁱⁱ Merck For Mothers. "Safer Childbirth Cities Initiative." www.merckformothers.com/SaferChildbirthCities/