



HB1169 – Hospitals – Community Benefits

Presented to the Hon. Shane Pendergrass and Members of the Health & Government Operations Committee
March 2, 2020 1:00 p.m.

POSITION: SUPPORT

NARAL Pro-Choice Maryland **urges members of the House Health & Government Operations Committee a favorable report on HB1169 – Hospitals – Community Benefits**, sponsored by Delegate Erek Barron.

Our organization is an advocate for reproductive health, rights, and justice for all Marylanders. We work to ensure every child-bearing individual has the right to decide if, when, and how to form their families and to parent in good health, in safety, and with dignity. Maternal mortality in our state is on the rise, with the 2011-2015 rate 19% higher than the previous five years.ⁱ Deaths of pregnant and postpartum patients are increasing nationally and Maryland continues to have a higher maternal mortality rate than the U.S. average. Black women in Maryland have a maternal mortality rate that is more than twice that of white women.ⁱⁱ Approximately 58% of all pregnancies in our state are unplanned.ⁱⁱⁱ

Each year, Maryland’s nonprofit hospitals get millions of dollars in tax breaks—known as “community benefits” spending—which they are required to spend on programs that make our communities healthier. However, since these investments are poorly defined and regulated, not all hospitals are paying their fair share to improve our health. The Fair Care for Maryland Bill would create a working group that sets minimum community benefits spending for each hospital, mandate meaningful public engagement in identifying community health needs, and require hospitals to clearly report their community benefit expenditures, tax exempt disclosures, and other financial measures.

We must hold tax-exempt hospitals accountable. If tax-exempt hospitals are not properly funding community health benefits, they should pay taxes to fund initiatives that will actually improve the health of our communities. Example of ideas we would like pursued by Maryland hospitals to improve family planning and pregnancy outcomes include:

- An initiative to recruit more OB/GYNs to become Medicaid contactors, as the lacking availability contributes to our state’s high poor maternal health outcomes among low-income pregnant individuals
- Pilot projects to increase access to doulas to assist pregnant individuals in underserved communities before, during, and after childbirth
- Funding to direct service providers to offer over-the-counter emergency contraception to assist patients or clients with delaying first pregnancies or help time future pregnancies with interconception care

Marylanders deserve to see the complete picture of the impact hospitals have on the communities they serve. For these reasons, **NARAL Pro-Choice Maryland urges a favorable committee report on HB1169**. Thank you for your time and consideration.

ⁱ Maryland Maternal Mortality Review (2017). *Annual Report*. Maryland Department of Health
http://healthymaryland.org/wp-content/uploads/2018/05/MMR-Report-2017_FINAL.pdf

ⁱⁱ Ibid

ⁱⁱⁱ Kost K, Unintended Pregnancy Rates at the State Level: Estimates for 2010 and Trends Since 2002 New York: Guttmacher Institute, 2015,
<http://www.guttmacher.org/pubs/StateUP10.pdf>