



A Voice for Advanced Practice Clinicians in Maryland



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Support

HB1349 Public Health – Maryland Prenatal and Infant Care Grant Program Fund

March 17, 2021

The Maryland Academy of Advanced Practice Clinicians supports passage of Del. Sheree Sample-Hughes HB 1349 Public Health--Maryland Prenatal and Infant Care Grant Program Fund.

I am a family nurse practitioner with over forty years providing obstetric and gynecology services to women throughout the life span in Maryland and DC. My practice was in Southern Maryland for thirty years, where there continues to be access-to-care issues for many people, but particularly vulnerable populations with limited financial resources.

There are few programs in critical shortage areas such as Southern Maryland, Eastern Shore Maryland and Western Maryland that will provide affordable services to pregnant women with no access to health insurance. This causes women to go their entire pregnancies with no prenatal care, or limited care based on their abilities to pay out of pocket. These women often have undiagnosed gestational diabetes or pregnancy induced hypertension, complicating the pregnancy when left untreated. These women always show up at the local hospital to deliver, often with complications that could have been addressed prior to delivery if they had access to adequate prenatal care. In Southern Maryland, there are the Amish and Mennonite communities, who in large part, do not have health insurance. Because they pay out of pocket, they have few prenatal visits, refuse labs and sonograms because the added cost is more than they can afford, and often have complicated pregnancies and deliveries. Complicated pregnancies and deliveries, in many cases, cause longer hospital stays, increased maternal and infant mortality and morbidity, and sometimes, life-long disabilities with associated high health care costs.

This bill will establish a grant program giving access to care to pregnant women who otherwise might not be able to afford adequate prenatal care and will allow them access to care from providers in their communities. Better prenatal care is known to reduce complications of pregnancy and delivery, with a concomitant reduction in maternal and infant morbidity and mortality.

We urge a favorable report on this bill. If you need further information, please contact me at LDianaart@aol.com.

Sincerely,
Lorraine Diana, CRNP
MAAPC Legislative Co-Chair

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