

Chapter 751

(House Bill 1251)

AN ACT concerning

~~Health Care Facilities~~ **Hospitals** and Medical Professional Liability Insurers –
Obstetric Services Policies
(Doula and Birth Policy Transparency Act)

FOR the purpose of requiring certain ~~health care facilities~~ hospitals to adopt and provide evidence to the Maryland Department of Health that the ~~health care facility~~ hospital has ~~a certain policy~~ certain policies relating to obstetric services; requiring the Maryland Department of Health to provide certain policies to the public on request; requiring insurers that issue or deliver medical professional liability insurance policies in the State, on request, to provide the Maryland Department of Health with information regarding the insurer’s policy regarding coverage of obstetric services; and generally relating to obstetric services.

BY adding to

Article – Health – General

Section 19–2601 and 19–2602 to be under the new subtitle “Subtitle 26. ~~Health Care Facility~~ Hospital Obstetric Services Policy”

Annotated Code of Maryland

(2023 Replacement Volume and 2024 Supplement)

BY adding to

Article – Insurance

Section 19–104.1

Annotated Code of Maryland

(2017 Replacement Volume and 2024 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That the Laws of Maryland read as follows:

Article – Health – General

SUBTITLE 26. ~~HEALTH CARE FACILITY~~ HOSPITAL OBSTETRIC SERVICES POLICY.

19–2601.

(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

~~(B) “FREESTANDING AMBULATORY CARE FACILITY” HAS THE MEANING STATED IN § 19-3B-01 OF THIS TITLE.~~

~~(C) “HEALTH CARE FACILITY” MEANS A HOSPITAL OR FREESTANDING AMBULATORY CARE FACILITY THAT PROVIDES OBSTETRIC CARE.~~

~~(D) “HOSPITAL” HAS THE MEANING STATED IN § 19-301 OF THIS TITLE.~~

(B) “DOULA” MEANS A NONMEDICAL PROFESSIONAL WHO PROVIDES CONTINUOUS PHYSICAL, EMOTIONAL, AND INFORMATIONAL SUPPORT TO THE BIRTHING PARENT THROUGHOUT THE PRENATAL, LABOR, AND POSTPARTUM PERIODS.

(C) “HOSPITAL” MEANS A HOSPITAL, AS DEFINED IN § 19-301 OF THIS TITLE, THAT PROVIDES OBSTETRIC CARE.

(D) “SIGNIFICANT MEDICAL INTERVENTION” MEANS A CESAREAN SECTION, INDUCTION OF LABOR, AUGMENTATION OF LABOR, OPERATIVE VAGINAL DELIVERY, OR EPISIOTOMY.

19-2602.

(A) A ~~HEALTH CARE FACILITY~~ HOSPITAL SHALL ADOPT AND PROVIDE EVIDENCE TO THE DEPARTMENT THAT THE ~~HEALTH CARE FACILITY~~ HOSPITAL HAS A POLICY THAT:

(1) A DOULA POLICY THAT ALLOWS EVERY BIRTHING PARENT TO HAVE AT LEAST ONE DOULA PRESENT DURING BIRTH IN ADDITION TO AUTHORIZED GUESTS;

(2) AN INFORMED CONSENT POLICY FOR SIGNIFICANT MEDICAL INTERVENTION FOR THE BIRTHING PARENT; AND

(3) A TRANSFER ACCEPTANCE POLICY THAT INCLUDES THE HOSPITAL’S PROCESS FOR RECEIVING:

(I) A PATIENT FROM A HEALTH CARE PRACTITIONER REGULATED UNDER TITLE 8 OF THE HEALTH OCCUPATIONS ARTICLE WHO HAD PROVIDED SERVICES TO A BIRTHING PARENT IN A HOME BIRTH SETTING;

(II) A BIRTHING PARENT’S OR NEWBORN’S MEDICAL INFORMATION FROM THE HOME BIRTH PROVIDER; AND

(III) A TRANSFER FROM A LICENSED DIRECT-ENTRY MIDWIFE THAT IS CONSISTENT WITH THE REQUIREMENTS OF § 8-6C-08 OF THE HEALTH OCCUPATIONS ARTICLE.

~~(1) ALLOWS EVERY BIRTHING PARENT TO HAVE A CERTIFIED DOULA, AS DEFINED IN § 15-141.4 OF THIS ARTICLE, PRESENT DURING BIRTH, IN ADDITION TO ANY AUTHORIZED GUESTS;~~

~~(2) PRIORITIZES NEWBORN BONDING WITH THE FAMILY OF THE NEWBORN;~~

~~(3) PROHIBITS THE HEALTH CARE FACILITY FROM USING SIGNIFICANT MEDICAL INTERVENTION IN THE BIRTHING PROCESS WITHOUT THE INFORMED CONSENT OF THE BIRTHING PARENT, INCLUDING:~~

~~(I) THE ADMINISTRATION OF A MEDICATION THAT WILL INDUCE LABOR;~~

~~(II) A CESAREAN SECTION; AND~~

~~(III) USE OF FORCEPS;~~

~~(4) DETAILS THE HEALTH CARE FACILITY'S PROCESS FOR RECEIVING A BIRTHING PARENT'S MEDICAL INFORMATION FROM A HEALTH CARE PROVIDER REGULATED UNDER TITLE 8 OF THE HEALTH OCCUPATIONS ARTICLE WHO HAS PROVIDED SERVICES TO THE BIRTHING PERSON; AND~~

~~(5) ESTABLISHES A PROCESS TO TRANSFER AND RECEIVE PREGNANT PERSONS ACROSS THE HEALTH CARE FACILITY'S LEVELS OF CARE WITHIN THE FACILITY'S CAPACITY AND CAPABILITY.~~

~~(B) THE PROCESS DETAILED IN THE POLICY REQUIRED UNDER SUBSECTION (A)(4) OF THIS SECTION SHALL INCLUDE A PROCESS FOR TRANSFERRING MEDICAL RECORDS WHEN THE BIRTHING PARENT WAS RECEIVING SERVICES FROM THE HEALTH CARE PROVIDER IN A HOME BIRTH SETTING.~~

~~(C) (B) A HEALTH CARE FACILITY HOSPITAL SHALL PROVIDE EVIDENCE TO THE DEPARTMENT THAT THE HEALTH CARE FACILITY HOSPITAL HAS ADOPTED A POLICY UNDER SUBSECTION (A) OF THIS SECTION:~~

~~(1) (I) ON OR BEFORE JANUARY 1, 2026; OR~~

(ii) IF THE ~~HEALTH CARE FACILITY~~ HOSPITAL IS ESTABLISHED AFTER JANUARY 1, 2026, ON THE ESTABLISHMENT OF THE ~~HEALTH CARE FACILITY~~ HOSPITAL; AND

(2) WHENEVER THE POLICY IS UPDATED.

~~(D)~~ (C) THE DEPARTMENT SHALL ADOPT REGULATIONS TO CARRY OUT THIS SECTION, INCLUDING REGULATIONS THAT ESTABLISH THE FORM AND MANNER IN WHICH A ~~HEALTH CARE FACILITY~~ HOSPITAL MAY PROVE TO THE DEPARTMENT THAT THE ~~HEALTH CARE FACILITY~~ HOSPITAL HAS ADOPTED A POLICY IN COMPLIANCE WITH THIS SECTION.

(D) THE DEPARTMENT SHALL MAKE THE POLICIES PROVIDED BY A HOSPITAL UNDER THIS SECTION AVAILABLE TO THE PUBLIC ON REQUEST AND IN A MANNER DETERMINED BY THE DEPARTMENT.

(E) THIS SECTION DOES NOT PROHIBIT A HOSPITAL FROM SETTING A POLICY THAT RESTRICTS THE NUMBER OF DOULAS OR AUTHORIZED GUESTS.

Article – Insurance

19-104.1.

ON REQUEST, AN INSURER THAT ISSUES OR DELIVERS MEDICAL PROFESSIONAL LIABILITY INSURANCE POLICIES IN THE STATE SHALL PROVIDE THE MARYLAND DEPARTMENT OF HEALTH WITH INFORMATION REGARDING THE INSURER’S POLICY RELATED TO COVERAGE OF OBSTETRIC SERVICES, INCLUDING COVERAGE FOR A VAGINAL BIRTH AFTER CESAREAN.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2025.

Approved by the Governor, May 20, 2025.