

SUPPORTING BEST PRACTICES FOR HEALTHY MOMS ACT

U.S. SENATORS PAT TOOMEY & SHERROD BROWN

In the United States, about 700 women tragically die each year from complications resulting from pregnancy and childbirth, with Black, American Indian, and Alaska Native (AI/AN) women two to three times more likely to die from pregnancy-related causes than white women.^{1,2} The Centers for Disease Control and Prevention (CDC) has determined that two-thirds of these deaths are preventable.³ The most common preventable complications are postpartum hemorrhage, severe hypertension, and venous thromboembolism.⁴

In 2018, Medicaid financed nearly half of all US births, and in some states, provided coverage for more than 60 percent of births.⁵ While the Medicaid program plays a critical role in addressing our nation's maternal mortality crisis, the nonpartisan Medicaid and CHIP Payment and Access Commission (MACPAC) reports that pregnant beneficiaries are more likely to experience higher rates of severe maternal morbidity and mortality than pregnant individuals with private insurance.⁶

Medicaid beneficiaries, overrepresented by low-income communities and people of color, experience higher rates of chronic illnesses, and are at higher risk of adverse health challenges. These conditions, including diabetes, cardiovascular disease, obesity, and cigarette smoking, are known risk factors that contribute to adverse maternal health outcomes. While states are attempting to address these poor health outcomes for moms, the federal government must do more to assist states and health care providers in their efforts.

For these reasons, Senators Toomey and Brown have introduced the Supporting Best Practices for Healthy Moms Act, which would:

- Create a diverse, representative National Advisory Committee on Reducing Maternal Deaths to:
 - Establish best practices for all Medicaid-covered maternal care providers and clinicians to screen, monitor, and treat at-risk pregnancies;
 - Generate culturally competent materials to help inform pregnant women of potential risks during pregnancy, birth, and postpartum; and
 - Identify best practices for tracking maternal mortality and severe maternal morbidity trends.
- Report to Congress on potential payment disincentives or regulatory barriers to the transfer of pregnant women between facilities before and during birth, as well as postpartum.

¹<https://www.cdc.gov/reproductivehealth/maternal-mortality/index.html>

²<https://www.cdc.gov/media/releases/2019/p0905-racial-ethnic-disparities-pregnancy-deaths.html>

³https://www.cdc.gov/reproductivehealth/maternal-mortality/erase-mm/MMR-Data-Brief_2019-h.pdf

⁴<https://www.nejm.org/doi/full/10.1056/NEJMp1810649>

⁵<https://www.macpac.gov/wp-content/uploads/2020/01/Medicaid%E2%80%99s-Role-in-Financing-Maternity-Care.pdf>

⁶<https://www.macpac.gov/wp-content/uploads/2020/06/Chapter-5-Medicaid%E2%80%99s-Role-in-Maternal-Health.pdf>