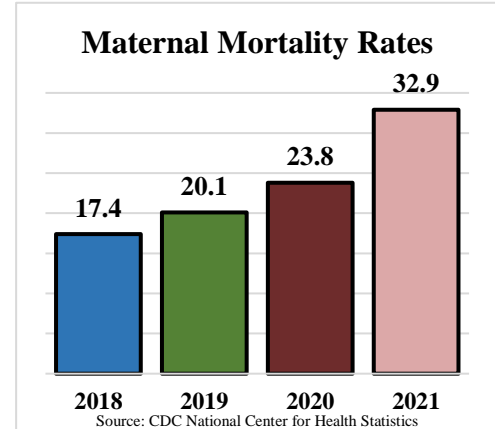


SUMMARY – HEALTHY MOMS & BABIES ACT

Senator Chuck Grassley (Iowa) & Senator Maggie Hassan (New Hampshire)

Rates of maternal mortality and morbidity are reaching crisis levels. There is widespread consensus among policy experts and stakeholders that pregnancy and childbirth too often include adverse events for women and infants, including death and other negative outcomes. The most recent reported maternal mortality rate in the United States was 32.9 deaths per 100,000 live births in 2021.¹ The United States maternal mortality rate is more than double what it is in other developed countries.² Similar disparities also exist among negative health outcomes caused or aggravated by pregnancy and childbirth.

Within the United States, the maternal health crisis particularly affects women of color and women living in rural areas. These groups experience worse maternal health outcomes, on average, when compared to other groups. The maternal mortality rate across all ages and races has increased by 47% in recent years from 17.4 per 100,000 in 2018 to 32.9 per 100,000 in 2021.³ Data indicates rates may have increased even more during the pandemic.⁴ In rural America, women often lack access to timely, high-quality maternal health care services.⁵ Women of color are at risk in both urban and rural settings.^{6, 7}



Despite these challenges, maternal mortality is preventable. Data from the Centers for Disease Control & Prevention (CDC) indicates that 80% of pregnancy-related deaths are preventable.⁸ In a Government Accountability Office (GAO) report on rural maternal mortality, cardiovascular conditions, infections, and hemorrhages were all leading causes for pregnancy-related deaths.⁹ High rates of C-sections can also put women at greater chance for death or postpartum infection.¹⁰ An estimated 50,000 women annually experience a life-threatening pregnancy complication.¹¹ A lack of obstetric services and health care workforce challenges are significant factors in determining the quality of the rural health care delivery system.¹²

With these multifaceted challenges, we must take a comprehensive approach to improving maternal and child health. The Healthy Moms and Babies Act improves maternal and child health by increasing services and supports, increasing access to high-quality coordinated care, supporting women and babies with 21st century technology, such as telehealth, and taking additional steps to reducing the maternal mortality rate.

What the Bill Does – Healthy Moms & Babies Act

The Healthy Moms and Babies Act will improve maternal and child health care by:

- Coordinating and providing “whole-person” care, supporting outcome-focused and community-based prevention efforts, and supporting stillbirth prevention activities and expanding the maternal health workforce.
- Modernizing maternal health care through telehealth to support women of color and women living in rural America.
- Reducing maternal mortality and high-risk pregnancies including C-section births, and improving our understanding of social determinants of health in pregnant and postpartum women.

¹ Centers for Disease Control and Prevention, National Center for Health Statistics, “Maternal Mortality Rates in the United States, 2021,” March 16, 2023, <https://www.cdc.gov/nchs/data/hestat/maternal-mortality/2021/maternal-mortality-rates-2021.htm>.

² World Health Organization, “Trends in maternal mortality 2000 to 2020: estimates by WHO, UNICEF, UNFPA, World Bank Group and UNDESA/Population Division,” February 23, 2023, <https://www.who.int/publications/i/item/9789240068759>.

³ Centers for Disease Control and Prevention, National Center for Health Statistics, “Maternal Mortality Rates in the United States, 2021,” March 16, 2023, <https://www.cdc.gov/nchs/data/hestat/maternal-mortality/2021/maternal-mortality-rates-2021.htm>.

⁴ Slomski A., “Maternal Death Rate Increased During Early COVID-19 Pandemic.” *JAMA*. 2022;328(5):415. doi:10.1001/jama.2022.12729.

⁵ Government Accountability Office, “MATERNAL MORTALITY: Trends in Pregnancy Related Deaths and Federal Efforts to Reduce Them,” March 2020, <https://www.gao.gov/assets/gao-20-248.pdf>.

⁶ Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report (MMWR), “Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016,” September 6, 2019, <https://www.cdc.gov/mmwr/volumes/68/wr/mm6835a3.htm>.

⁷ The Commonwealth Fund, “Restoring Access to Maternity Care in Rural America,” September 30, 2021, <https://www.commonwealthfund.org/publications/2021/sep/restoring-access-maternity-care-rural-america>.

⁸ Centers for Disease Control and Prevention, “Four in 5 pregnancy-related deaths in the U.S. are preventable,” September 19, 2022, <https://www.cdc.gov/media/releases/2022/p0919-pregnancy-related-deaths.html>.

⁹ Government Accountability Office, “MATERNAL MORTALITY: Trends in Pregnancy Related Deaths and Federal Efforts to Reduce Them,” March 2020, <https://www.gao.gov/assets/gao-20-248.pdf>.

¹⁰ Mascarello KC, Horta BL, Silveira MF. Maternal complications and cesarean section without indication: systematic review and meta-analysis. *Rev Saude Publica*. 2017;51:105. doi: 10.11606/S1518-8787.2017051000389. Epub 2017 Nov 17. PMID: 29166440; PMCID: PMC5697917.

¹¹ Government Accountability Office, “MATERNAL MORTALITY: Trends in Pregnancy Related Deaths and Federal Efforts to Reduce Them,” March 2020, <https://www.gao.gov/assets/gao-20-248.pdf>.

¹² Iowa Department of Public Health, Division of Health Promotion & Chronic Disease Prevention - Bureau of Family Health, “Access to Obstetrical Care in Iowa: A Report to the Iowa State Legislature - Calendar year 2020,” January 2022, https://hhs.iowa.gov/sites/default/files/portals/1/userfiles/88/obcareiniowa_2022legislative%20report%20submitted%20.pdf.