

# United States Senate

WASHINGTON, DC 20510

January 14, 2022

The Honorable Rosa DeLauro  
Chairwoman  
House Committee on Appropriations  
H-307, the Capitol  
Washington, DC 20515

The Honorable Patrick Leahy  
Chairman  
Senate Committee on Appropriations  
Room S-128, the Capitol  
Washington, DC 20510

The Honorable Kay Granger  
Ranking Member  
House Committee on Appropriations  
H-307, the Capitol  
Washington, DC 20515

The Honorable Richard Shelby  
Vice Chairman  
Senate Committee on Appropriations  
Room S-128, the Capitol  
Washington, DC 20510

Dear Chairwoman DeLauro, Ranking Member Granger, Chairman Leahy, and Vice Chairman Shelby,

As you consider a final appropriations package for Fiscal Year 2022, I respectfully request that critical investments are included to address the maternal health crisis in the United States. I was pleased to see that the Senate Appropriations Committee's released FY22 bill includes \$7 million for Implicit Bias Training Grants for Health Providers, and that both the Senate Appropriations Committee's released FY22 bill and the House-passed appropriations bill include \$25 million for a Pregnancy Medical Home Demonstration. These are two grant programs that I proposed in my *Maternal Care Access and Reducing Emergencies (Maternal CARE) Act* to reduce racial health disparities in maternal health.

The United States has the highest rate of maternal mortality of any high-income country and is the only country whose rate of maternal mortality has increased.<sup>1</sup> The pregnancy-related mortality ratio, defined as the number of pregnancy-related deaths per 100,000 live births, more than doubled between 1987 and 2017.<sup>2</sup> This translates to approximately 700 women in the United States dying from conditions related to or associated with pregnancy or childbirth each year, despite the fact that the CDC estimates that more than 60 percent of these maternal deaths are preventable.<sup>3</sup> This crisis is having a disproportionate impact on black women, who are up to three times more likely to die from complications during pregnancy or childbirth as compared to their white counterparts,<sup>4</sup> and are twice as likely to suffer from life-threatening pregnancy complications. This disparity transcends income and education status, and cannot be explained away by risk factors such as genetics or lack of health care access.

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<sup>1</sup> Martin, Nina. "U.S. Has The Worst Rate of Maternal Deaths in the Developed World." *NPR*. 2017.

<sup>2</sup> Pregnancy Mortality Surveillance System, Centers for Disease Control and Prevention, [www.cdc.gov/reproductivehealth/maternal-mortality/pregnancy-mortality-surveillance-system.htm](https://www.cdc.gov/reproductivehealth/maternal-mortality/pregnancy-mortality-surveillance-system.htm).

<sup>3</sup> Davis, Nicole L, et al. "Pregnancy-Related Deaths: Data from 14 U.S. Maternal Mortality Review Committees, 2008-2017." *Maternal Mortality Review Information App*, 2019, [https://www.cdc.gov/reproductivehealth/maternal-mortality/erase-mm/MMR-Data-Brief\\_2019-h.pdf](https://www.cdc.gov/reproductivehealth/maternal-mortality/erase-mm/MMR-Data-Brief_2019-h.pdf)

<sup>4</sup> "Racial and Ethnic Disparities Continue in Pregnancy-Related Deaths." Centers for Disease Control and Prevention, 5 Sept. 2019, <https://www.cdc.gov/media/releases/2019/p0905-racial-ethnic-disparities-pregnancy-deaths.html>.

Health equity for Black women will only happen if we recognize and address the persistent biases in our health care system, and do more to ensure that women have access to culturally competent care to reduce preventable maternal mortality. That is why I introduced the *Maternal CARE Act* which would establish a \$25 million Implicit Bias Training Grant program to address racial bias in maternal health care by providing funds for training programs for medical schools, nursing schools, and other health professionals to support evidence-based implicit bias training that will help improve care for Black women. It would also provide \$125 million to develop and implement a Pregnancy Medical Home Demonstration Program which will improve care by incentivizing maternal health care providers to deliver integrated health care services to pregnant women and new mothers to reduce adverse maternal health outcomes and racial health disparities in maternal mortality and morbidity. I urge you to ensure that the final FY22 spending package maintains the amount in the Senate Appropriations Committee's released bill for the Implicit Bias Training Grants for Health Providers, and the funding levels in the House-passed and Senate Appropriations Committee's released bills to create a Pregnancy Medical Home Demonstration Program. These provisions will go a long way to addressing the implicit biases in our health care system, improve the outcomes for Black women, and help to reduce preventable maternal deaths and complications.

I would also urge that the final spending package include at least my previous requests for funding for maternal health priorities, including:

- \$30 million to support uniform data collection through Maternal Mortality Review Committees (MMRCs) that operate in nearly every state to review individual maternal deaths to understand their causes and help identify solutions to prevent these tragic outcomes.
- \$15 million for the Alliance for Innovation on Maternal Health (AIM) Program which provides states and hospital systems with actionable, evidenced based toolkits to improve maternal health outcomes.
- \$5 million for the Maternal Mental Health Hotline, which serves as a critical lifeline for woman in need of mental health support during pregnancy and the postpartum period
- \$10 million for the Screening and Treatment of Maternal Depression and Related Behavioral Disorders Program (MDRBD) to support the training of health care providers to screen, assess, and treat for maternal mental health conditions and provide specialized psychiatric consultation to assist the providers.

Thank you for your commitment to addressing the United States' maternal health crisis by providing investments in maternal health in FY22 and for your consideration of this request.

Sincerely,



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Kirsten Gillibrand  
United States Senator