

Congress of the United States

House of Representatives

COMMITTEE ON OVERSIGHT AND REFORM

2157 RAYBURN HOUSE OFFICE BUILDING

WASHINGTON, DC 20515-6143

MAJORITY (202) 225-5051
MINORITY (202) 225-5074
<https://oversight.house.gov>

Opening Statement Rep. Robin Kelly Committee on Oversight and Reform “Birthing While Black: Addressing America’s Black Maternal Health Crisis” May 6, 2021

Thank you, Chairwoman Maloney, for inviting me to co-chair this very important hearing as we take action to address the black maternal mortality crisis within our nation.

To Ranking Member James Comer and my colleagues on both sides of the aisle, thank you for your attentiveness and efforts to address the maternal health crisis.

The maternal mortality rate in the United States is an issue that reaches into communities across our nation, but it is especially concerning for communities of color.

Black women are three times more likely and Indigenous women are more than twice as likely to die from pregnancy-related causes as non-Hispanic white women.

Recently, the Center for Disease Control and Prevention (CDC) released a report which showed that the maternal mortality rate continues to rise.

Even worse, more than two-thirds of the deaths are preventable. For every maternal death in the U.S., there are approximately 100 women who experience severe maternal morbidity, or a “near miss.”

This is all unacceptable, and the time for action is now.

The federal government has a critical role to play in addressing this crisis and the unacceptable racial inequities in health care delivery and outcomes. Specifically, the federal government should:

- Support access to and the provision of patient-centered, data-driven, quality maternity care;
- Enhance coverage and support for birthing people during the postpartum period and;
- Address social determinants of health, including structural and systemic inequities in the country’s healthcare, economic, social, and criminal legal systems.

I have been advocating for evidence-based solutions through legislation to address the maternal mortality crisis since 2015.

Despite all the hard work to address this issue, there is still a long way to go in preventing maternal deaths.

In the recently passed American Rescue Plan, language from my Helping Moms bill was included which provided states the option of expanding postpartum coverage from 60 days to one full year after giving birth.

Let me explain why this is such an important step forward.

The American College of Obstetricians and Gynecologists recommends that women have access to continuous health coverage to increase preventive care, reduce avoidable adverse health outcomes, increase early diagnosis of disease and reduce maternal mortality rates.

There are major risks associated with becoming uninsured shortly after experiencing pregnancy. Lapses in insurance coverage is one of many contributing factors in the maternal mortality crisis, with one-third of all pregnancy-related deaths occur as late as one year after delivery.

Women of color are also disproportionately affected by disruptions in insurance coverage; nearly half of all non-Hispanic Black women had discontinuous insurance from pre-pregnancy to postpartum and half of Hispanic Spanish-speaking women became uninsured in the postpartum period.

Earlier this year, I led my colleagues in a letter urging HHS Secretary Becerra to approve Illinois' waiver to allow for additional Medicaid coverage beyond the current 60-day allowance. Secretary Becerra approved the waiver making Illinois the first state that allows women to receive the postpartum care they deserve.

Additionally, I reintroduced my Supporting Best Practices for Healthy Moms Act. This bill would require CMS to publish guidance for hospitals, and other maternal care providers on ways to reduce maternal mortality and morbidity under Medicaid and the Children's Health Insurance Program.

In the next few weeks, I will reintroduce my key maternal health legislation – the Mothers and Offspring Mortality and Morbidity Awareness Act, also known as the MOMMA's Act. This bill will help standardize data collection, provide grants to improve maternal and infant health, and establish regional centers of excellence, which will improve how our health care professionals are educated in implicit bias and delivering culturally competent health care.

As we go into Mother's Day weekend, let us recommit our efforts and support to ensure that every birthing person across this nation is empowered and feels safe when making that wonderful and exciting decision to become a mother.

This hearing today is a testament to the hard work of advocates and researchers, who have fought so long to elevate this issue.

I look forward to hearing from our witnesses today as well as working with all of my colleagues to address the crisis of Black maternal mortality and morbidity in this country.

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