

Health Law & Business News

## Efforts to Shrink Maternal Death Rate Win House Panel's OK

By Shira Stein

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- Bill that would let states extend Medicaid for mothers advances to House floor
  - Conversations with Senate in progress
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Legislation to curb the U.S.'s high rate of women who die from pregnancy or childbirth-related complications appears to be on an easy path to passage in the House after the Energy and Commerce Committee passed two related bills on voice votes.

The legislation could make it all the way to the president's desk. The Senate Health, Education, Labor, and Pensions Committee is already working with the House Energy and Commerce Committee to "see what we can get signed into law," a HELP spokesperson told Bloomberg Law.

Health policy consultants and physicians say extending postpartum Medicaid coverage to one year would improve maternal mortality because Medicaid pays for 43% of births in the U.S., according to the Centers for Disease Control and Prevention.

One of the House bills (H.R. 4996), introduced by Rep. Robin Kelly (D-Ill.), would give states the option to do so.

The other bill (H.R. 4995), introduced by Rep. Eliot Engel (D-N.Y.), would create programs to improve maternal health quality and access to care in rural areas, address racial and ethnic disparities in health outcomes, and create grants to implement best practices and strengthen training programs.

An amendment by Rep. Joe Kennedy (D-Mass.) would require the Medicaid Payment Advisory Commission to review payment models that provide fixed allocations for maternal care.

Both bills have bipartisan cosponsors. They haven't been scheduled for a full House floor vote yet, but they are a priority for Democrats, Marial Saez, press secretary for House Majority Leader Steny Hoyer (D-Md.), told Bloomberg Law.

Engel's bill was amended during the hearing to include a provision that would require the Centers for Disease Control & Prevention to improve the collection of race and ethnicity maternal mortality data.

Democrats and Republicans have both expressed deep concern that the U.S. has the highest maternal death rate in the developed world, and that the rate is increasing: 26.4 women died for every 100,000 live births in the U.S. in 2015, while most other developed nations had death rates ranging from 3.8 to 9.2, according to a 2016 study. Both the House Energy and Commerce and Ways and Means Committees have held hearings on the issue in recent months.

Staffers said allowing states to extend Medicaid coverage for one year after childbirth could cost \$500 million, although they haven't received an official score from the Congressional Budget Office.

Eligibility for Medicaid differs across states, but income eligibility levels are generally higher for pregnant women than for parents. Medicaid currently covers the months during pregnancy and 60 days after giving birth for women in higher income levels. It also covers one doctor's visit for women who delivered vaginally and two visits for women who had a cesarean birth.

The visits screen for conditions like diabetes, postpartum depression, and offer help with family planning. They also provide an opportunity for women to tell their doctors about their health following delivery.

The Senate HELP Committee already approved a bill (S. 1895) that would establish grants to improve maternal care and health-care provider training and establish networks of teams to care for mothers and babies called "perinatal quality collaboratives."

Engel's bill includes those Senate HELP provisions and provisions from Sen. Tina Smith's (D-Minn.) bill (S. 2373) that would add more funding and grants for rural obstetrics care.

Sen. Lamar Alexander (R-Tenn.), the HELP Committee chairman, has expressed concern about the high rate of maternal mortality and called for action.

Kelly's office confirmed the congresswoman is having conversations with senators about next steps.

President Donald Trump's fiscal year 2020 budget included language to allow states to extend postpartum Medicaid coverage to 12 months for women with substance use disorder.

Department of Health and Human Services officials are also looking at creating a payment model through the Center for Medicare and Medicaid Innovation to address maternal mortality, CMMI acting director Amy Bassano said Nov. 4.

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