

U.S. Sen. Baldwin: Rejoins effort to improve maternal health outcomes

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WASHINGTON, D.C. – U.S. Senator Tammy Baldwin (D-WI) joined Senator Cory Booker (D-NJ) and Congresswoman Ayanna Pressley (D-MA-07) in reintroducing a comprehensive bill to improve maternal health outcomes, reverse the trend of rising maternal mortality rates, and close disparities that put Black, Indigenous, and People of Color (BIPOC) communities and their kids at greater risk of adverse health outcomes. The *Maximizing Outcomes for Moms through Medicaid Improvement and Enhancement of Services (MOMMIES) Act* would build upon [recent advancements](#) in Medicaid coverage for pregnant and postpartum people that Senator Baldwin helped secure in the recently-passed *American Rescue Plan Act*.

Specifically, the *MOMMIES Act* would expand coverage for pregnant people covered by Medicaid – which covers nearly half of all births in the U.S. – by requiring states to dramatically extend postpartum coverage from two months to a full year after childbirth; ensuring that all pregnant and postpartum people have full Medicaid coverage, rather than coverage that can be limited to pregnancy-related services; and increasing access to primary care providers and reproductive health providers.

“Maternal and infant mortality rates are tragically high in Wisconsin, and they are even higher in the Black community. We need to do more to make sure families have access to quality, affordable health care,” **said Senator Baldwin**. “We know that healthier pregnancies lead to healthier babies. That’s why I’m proud to work on this important legislation to enhance Medicaid coverage so mothers and pregnant women can get the care they need.”

“We live in a nation that spends more than any other country on health care, yet we

still have the highest rate of pregnancy-related deaths of any of our peer countries,” **said Senator Booker**. “And Black women are more than three times as likely to die from complications related to pregnancy than white women — [in New Jersey they are five times as likely](#). New Jersey also has the unfortunate distinction of having the [fifth-highest rate of maternal mortality in the U.S.](#) We simply cannot continue to accept this alarming status quo — we must do something about it and this bill is an important first step. By expanding Medicaid coverage for pregnant people, we can begin to stem the rising tide of maternal mortality and close the egregious racial gaps that exist in maternal and infant health outcomes.”

“A safe and healthy pregnancy should be a fundamental human right but far too many people in America —particularly Black women—still find themselves without the high-quality, comprehensive care they need for themselves and their babies,” **said Congresswoman Pressley**. “Our bill would help change that by promoting community-based, holistic approaches to maternity and post-partum care so that every pregnant person is treated with the dignity and respect they deserve during and after childbirth. Our fight for maternal justice continues.”

In Wisconsin, the *MOMMIES Act* is endorsed by United Way of Dane County, Wisconsin Alliance for Women’s Health, Planned Parenthood of Wisconsin, University of Wisconsin-Madison School of Medicine and Public Health, UW Health, Kids Forward, and Black Leaders Organizing for Communities (BLOC).

“In Wisconsin, the unacceptable reality is that our Black moms are five times more likely to die from pregnancy-related complications and are significantly more likely to experience severe maternal morbidities. For too long, women of color in our state have been denied access to adequate and sustained healthcare coverage. That’s why we need the *MOMMIES Act* more than ever. The strengthened Medicaid protections in the *MOMMIES Act* will enable Wisconsin to address our maternal health crisis head-on and reduce our persistent maternal health disparities. We applaud Senator Baldwin for her continued leadership on this issue,” **said Sara Finger, Founder & Executive Director, Wisconsin Alliance for Women’s Health.**

“We are facing a Black maternal health crisis in Wisconsin and across the country.

The Covid-19 pandemic's disproportionate impact on Black, Indigenous, and People of Color has greatly magnified the urgency we must act with to tackle the root causes of racial health inequities. We know that increasing access to affordable, high-quality, and culturally responsive health care services is important when closing severe racial gaps in maternal and infant health. With the pandemic-driven economic crisis resulting in many families losing employment and health insurance coverage and experiencing increased financial hardship in making ends meet, now is the time to strengthen and expand maternal health support for pregnant people and their families and turn the tide on the maternal health crisis. The *MOMMIES Act* will help move us on a path towards maternal health equity by expanding postpartum health coverage, increasing maternal health services, and promoting community-based and antiracist approaches to equitable maternity care. United Way of Dane County is grateful to Wisconsin's own Senator Baldwin for cosponsoring this bill. We applaud her continued leadership in advancing solutions to eliminate racial disparities in maternal health outcomes," **said Renee Moe, President & CEO, United Way of Dane County.**

"We applaud Senator Booker, Senator Baldwin, and Congresswoman Pressley's efforts to prioritize maternal health and reduce racial inequities by increasing access to prenatal and postnatal care, including coverage for doula services," **said Michele Mackey, CEO of Kids Forward.** "Wisconsin has some of the worst racial disparities in the country for maternal and infant health outcomes. Women of color and their infants are facing a state of emergency. Due to inequitable health care rooted in systemic racism and structural barriers that exacerbate disparities, Black, Brown and Indigenous women in Wisconsin are three to five times more likely to suffer pregnancy-related deaths than white women. In the face of these shameful disparities, Wisconsin only provides Medicaid coverage to people for sixty days after pregnancy, not even enough time to complete recommended follow-up exams. Extending access to postpartum care, better coordination of maternity care, and increasing access to doula services are necessary first steps to improving health outcomes for moms and babies."

The *MOMMIES Act* is also endorsed by the following organizations: Ancient Song Doula Services, Black Mamas Matter Alliance, Center for American Progress, Center for Reproductive Rights, Dr. Jamila Taylor, Director of Health Care Reform and Senior Fellow at The Century Foundation, Every Mother Counts, In Our Own Voice: National, Black Women's Reproductive Justice Agenda, March of Dimes, National

Asian Pacific American Women's Forum (NAPAWF), National Birth Equity Collaborative, National Health Law Program, Planned Parenthood Federation of America, and the Association of Maternal & Child Health Programs.

"The National Birth Equity Collaborative enthusiastically supports the reintroduction of the *MOMMIES Act*! We applaud its legislative aims to enhance Medicaid benefits for low-income pregnant people by requiring uninterrupted coverage for the full length of the postpartum period, which spans one-year. We are thrilled that birth equity is a goal of the Demonstration Project and, even more, that trainings through an anti-racist lens will also be one of the required functions. Unequivocally, the inclusion of the reproductive justice framework into provider training is what sets these bills apart, marking them both transformational and timeless," **said Dr. Joia Crear Perry, Founder and President of the National Birth Equity Collaborative.**

"We need the *MOMMIES Act* now more than ever," **said Jennifer Jacoby, Senior Federal Policy Counsel at the Center for Reproductive Rights.** "This past year in particular has highlighted the devastating inequities present in our health care system, with Black and Brown families and those struggling to make ends meet disproportionately impacted by the COVID-19 pandemic. Those same communities are experiencing a crisis in maternal health, with Black and Indigenous birthing people suffering alarming rates of pregnancy-related complications and death. The *MOMMIES Act* is an essential step in reducing those health disparities."

"The National Health Law Program urges Congress to pass the *MOMMIES Act*, which would enhance Medicaid's maternal health coverage and tackle urgent racial injustices in maternal health. By setting a national floor of comprehensive pregnancy-related coverage at a year postpartum, advancing access to doula services, and emphasizing health equity-, antiracist-, and community-based reforms, the *MOMMIES Act* takes vital steps toward ending our country's Black and Indigenous maternal mortality epidemic," **said Elizabeth Taylor, Executive Director, National Health Law Program.**

"The *MOMMIES Act* would make important enhancements to Medicaid and the Children's Health Insurance Program (CHIP)—two vital publicly-funded health

programs that disproportionately serve birthing people and families of color. Health care innovations such as extending postpartum coverage to one year, Medicaid coverage of community-based doula care, and increased access to telehealth will help get the U.S. on a path to truly realizing maternal health equity. Strengthening both health care access and coverage are essential, and must go hand in hand with efforts to transform how women of color are treated within the health care system,” **said Dr. Jamila Taylor, Director of Health Care Reform and Senior Fellow at The Century Foundation.**

“Access to comprehensive, high-quality health care services has proven to improve maternal health outcomes. Without health care coverage, many pregnant and birthing people – especially people with low incomes – may be forced to forgo necessary and preventive care including recommended post-partum visits, mental health treatment, family planning services and more. The *MOMMIES Act* would help address this inequity by expanding postpartum Medicaid coverage to at least one year, among other important health care advancements. At a time when the nation is addressing a public health pandemic and economic crisis, which has resulted in unprecedented job loss, and subsequently, the loss of job-based health insurance coverage for many, improving pregnant people’s access to Medicaid is critical. We applaud Representative Ayanna Pressley and Senator Cory Booker for leading on this effort, which would move our country closer towards achieving maternal health equity, particularly for Black and Indigenous people, who have been disproportionately harmed by COVID-19, and the maternal health and economic crises,” **said Jamille Fields Allsbrook, JD/MPH, Director of Women’s Health and Rights at the Center for American Progress.**

[Between 2000 and 2014, the maternal mortality rate in the U.S. increased by 26 percent](#), while it decreased in nearly every other country. And stark disparities in maternal deaths exist, as [Black women are more than three times as likely to die from pregnancy-related causes as white women](#). Additionally, for every person who dies due to a pregnancy-related complication, dozens more suffer from unexpected outcomes from pregnancy that result in both short- and long-term consequences to a person’s health.

In the Senate, the bill is also cosponsored by Kirsten Gillibrand (D-NY) and Richard Blumenthal (D-CT). Specifically, the *MOMMIES Act* would:

- Extend Medicaid coverage for postpartum people to a full year after giving birth, rather than the current limit of 60 days that many face.
- Ensure that all pregnant and postpartum people have full Medicaid coverage, rather than coverage that can be limited to pregnancy-related services. This is particularly critical for reducing disparities, as benefits for pregnant people covered by Medicaid vary depending on their eligibility group and what state they're located in.
- Establish a Maternity Care Home demonstration project to study the effectiveness of this innovative model of maternity care. Maternity Care Homes show great promise in improving maternal health outcomes, as they are based on a model of care that is patient-centered, coordinated, and comprehensive. Maternity Care Homes have also shown early successes in reducing health care costs, increasing the number of prenatal visits, and reducing the number of low birthweight infants. Data from the pilot programs can be used to implement the model on a wider scale.
- Extend the Affordable Care Act's primary care bump to ensure that Medicaid beneficiaries have access to primary care providers, including reproductive health providers.
- Facilitate increased access to doula support. Doulas are support personnel who provide pregnant people with emotional, physical, and informational support. Doula support has been shown to improve maternal and infant health outcomes, particularly among people of color, but currently, only a handful of states have authorized Medicaid coverage for doulas. The *MOMMIES Act* would facilitate increased access to doula support by requiring the Medicaid and CHIP Payment and Access Commission (MACPAC) to publish a report on coverage of doula support under Medicaid, including recommendations for legislative and administrative actions to increase access to such support.
- Study telehealth and its potential to improve Medicaid beneficiaries' access to maternity care. Telehealth programs show promise in increasing access to maternity care, particularly in rural and other underserved areas. To learn about telehealth's potential to increase access to maternity care, the *MOMMIES Act* would require a Government Accountability Office report on states that are currently providing this coverage and recommendations for increasing access to telehealth for pregnant people.