



## ASK 1: Reverse America's Rising Rates of Maternal Mortality

Cosponsor H.R. 1318, the Preventing Maternal Deaths Act, and S. 1112, the Maternal Health Accountability Act

### The Problem – Our Nation's Rising Maternal Mortality Rate:

More women in the U.S. die from pregnancy complications than in any other developed country<sup>i</sup>. This alarming fact must be addressed; we must combat maternal mortality. In 33 states, **maternal mortality review committees (MMRCs) are doing just that**. Comprised of health experts, MMRCs study local maternal death cases to identify how to make pregnancies safer and prevent tragic outcomes. Congress can help improve the health and safety of pregnant women, and save families from devastating losses, by investing in local MMRCs.

### Maternal Mortality Facts and Figures:

- The U.S. is the only industrialized nation with a rising maternal mortality rate.
  - The U.S. saw a **26% increase in the maternal mortality rate from 18.8 deaths per 100,000 live births in 2000 to 23.8 in 2014<sup>ii</sup>**.
- African-American women are much more likely to die of pregnancy-related or associated complications in the U.S.
  - **In 2011, the maternal mortality rate for non-Hispanic white women was 12.5 deaths per 100,000 live births compared with 42.8 deaths for non-Hispanic black women, Almost four times as high<sup>iii</sup>**.
- Causes include preventable conditions like preeclampsia and obstetric hemorrhage. Mental health conditions, including suicide and overdose, are the leading cause of maternal mortality in a growing number of states<sup>iv</sup>.

### The Solution:

**State MMRCs** bring together local ob-gyns, nurses, social workers, and other health care professionals to review individual maternal deaths and recommend policy solutions to prevent them in the future<sup>v</sup>. MMRCs are essential to understanding maternal deaths and identifying opportunities for prevention. **Every state should have an MMRC.**

- Up to 17 states still have not yet established an MMRC.

### Federal Relevance:

- 48% of births are covered by Medicaid<sup>vi</sup>.
- Congress already invests to reduce infant mortality through programs addressing preterm birth, SIDS, and birth defects, and supports national infant mortality data collection. **The same investment for our nation's mothers will help save lives.**

### The Preventing Maternal Deaths Act:

Authorizes the CDC to **assist states in creating or expanding MMRCs.**

- \$7 million annual authorization for grants to states, fiscal years 2018 through 2022, for MMRCs to:
  - Collect consistent data to help our Nation understand what causes maternal mortality.
  - Recommend locally relevant strategies to State Departments of Public Health to prevent pregnancy deaths and reduce disparities.
  - Report to Congress on maternal mortality data to track successes and setbacks.
- HHS to research disparities in maternal health outcomes.

**ACOG House Ask:** Cosponsor H.R. 1318, the Preventing Maternal Deaths Act, sponsored by Reps. Jaime Herrera Beutler (R-WA), Ryan Costello (R-PA), and Diana DeGette (D-CO).

**ACOG Senate Ask:** Cosponsor S. 1112, the Maternal Health Accountability Act, sponsored by Senators Heidi Heitkamp (D-ND) and Shelley Moore Capito (R-WV).

## Frequently Asked Questions

### What is maternal mortality?

ACOG considers maternal mortality to encompass both **pregnancy-related** and **pregnancy-associated** deaths.

- **Pregnancy-related death** is death of a woman while pregnant or within one year of pregnancy, from any cause related to or aggravated by her pregnancy or its management, but not from accidental or incidental causes.
- **Pregnancy-associated death** is death of a woman while pregnant or within one year of pregnancy, regardless of the cause.

### Why are mothers dying in the United States? How can we explain this trend?

The causes of maternal mortality are wide-ranging – that’s one of the reasons we need to make sure each death is reviewed by local, interdisciplinary, maternal mortality review committee (MMRC). Some of the most common factors include conditions like preeclampsia and obstetric hemorrhage, but mental health conditions, like suicide and overdose, are the leading cause of maternal mortality in a growing number of states. We do know that over half of maternal deaths are likely preventable.

### These numbers seem pretty low. Is this really a problem?

Yes, it’s a big problem. In fact, the US is the only industrialized nation with an INCREASING rate. While global maternal death rates fell by more than a third from 2000 to 2015, the United States’ rate *increased* during this period. The U.S. ranks 47<sup>th</sup> for maternal mortality rates globally. And of course, every maternal death is devastating, especially because over half of them are likely preventable. Children are left without mothers; young lives are cut short. I can tell you from personal experience that every single maternal death should be reviewed by experts to prevent these tragic events in the future. **Share a patient story.**

### What IS a maternal mortality review committee (MMRC)?

A MMRC is a group of local, interdisciplinary, maternal health stakeholders -- ob-gyns, nurses, social workers, epidemiologists, and patient advocates -- who review individual maternal deaths and recommend solutions to prevent future deaths and complications to their State Department of Health. MMRCs help develop local solutions to local problems, informing national solutions to save mothers’ lives.

### What kinds of recommendations do MMRCs make?

MMRCs recommend solutions that are specific to that locality. For instance, if there is a growing overdose trend in the state, the MMRC might recommend increasing access to treatment for pregnant and postpartum women struggling with substance use disorder. Often, the MMRCs recommend educational and training initiatives to help health care providers treat conditions like diabetes, hypertension or obesity. Sometimes, MMRCs find unlikely patterns – for example, in Nevada, the MMRC found many women were dying in car accidents, and recommended a seatbelt law!

### If some states already have MMRCs, why does the federal government need to get involved?

ACOG, the CDC, the Association of Maternal and Child Health Programs, NIH, and HRSA recommend that every maternal death should be investigated to identify ways to improve quality of care and educate health professionals, patients, and families about preventing deaths and complications. **17 states still don’t have a maternal mortality review committee, and many states that already have them aren’t able to do all that they should, often because of lack of state funding.** The federal government can help these states prevent maternal deaths through local solutions that work.

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<sup>i</sup> Murray, J.L., Wang, H., Kassebaum, N., “Sharp Decline in Maternal and Child Deaths Globally, New Data Show.” *Institute for Health Metrics and Evaluation. University of Washington.* 2016.

<sup>ii</sup> MacDorman, M., Declercq, E., Cabral, H., Morton, C., “Is the United States Maternal Mortality Rate Increasing? Disentangling trends from measurement issues: Short title: U.S. Maternal Mortality Trends.” *Journal of Obstetrics and Gynecology.* September, 2016.

<sup>iii</sup> Pregnancy Mortality Surveillance System. Centers for Disease Control and Prevention. Available at: <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/pms.html>

<sup>iv</sup> “Report from Maternal Mortality Review Committees: A View into Their Critical Role.” CDC Foundation. February 2017. Available at: <http://www.cdcfoundation.org/sites/default/files/upload/pdf/MMRIReport.pdf>

<sup>v</sup> Agrawal, P., “States Taking Action to Break the Link Between Chronic Disease and Maternal Death.” *Health Affairs.* February 19, 2016. Available at: <http://healthaffairs.org/blog/2016/02/19/states-taking-action-to-break-the-link-between-chronic-disease-and-maternal-death/>

<sup>vi</sup> Galewitz, P., “Nearly Half of U.S. Births Are Covered By Medicaid, Study Finds.” *Kaiser Health News.* September 3, 2013. Available at: <http://khn.org/news/nearly-half-of-u-s-births-are-covered-by-medicaid-study-finds/>