



Addressing the Maternal Mortality Crisis

Maternal mortality is an issue that, unfortunately, touches every community. The [most recent data](#) from the Centers for Disease Control and Prevention (CDC) reported 18.6 deaths per 100,000 births in the U.S. This number is roughly 3 times higher among non-Hispanic/Black women, with 50.3 deaths per 100,000 in 2023 according to the CDC. The [leading causes](#) of pregnancy-related death include mental health conditions, hemorrhage, cardiovascular conditions, and infection/sepsis. On review of [Maternal Mortality Review Committee data from 2017-2019](#), the CDC concluded that more than 80% of pregnancy-related deaths were preventable.

Enhancing Collection and Dissemination of Maternal Health Data

Nearly every state has a version of a Maternal Mortality Review Committee (MMRC). These MMRCs collect maternal and infant health data, review pregnancy-related deaths to identify causes, and make recommendations for prevention of future mortalities. The Preventing Maternal Deaths Act was passed by Congress and became law in 2018. This legislation amended the Public Health Service Act to authorize funding for programs that support state and local surveillance of maternal mortality, MMRCs, through FY2023. The bipartisan Preventing Maternal Deaths Reauthorization Act of 2023, would have continued this crucial federal support for state-based maternal health efforts, including MMRCs. More specifically, the bill would reauthorize funding through FY2028, modify federal support for state-based efforts to improve MMRCs to enhance surveillance of pregnancy-associated and -related deaths and reduce disparities in maternal health outcomes. The bill also requires the CDC to annually disseminate best practices for preventing maternal mortality and morbidity to hospitals, professional societies, and perinatal quality collaboratives. Despite swiftly passing the House in the 118th Congress, the bill failed to reach a vote in the Senate.

Urge your Member of Congress to support the inclusion of the Preventing Maternal Deaths Reauthorization Act in the upcoming March appropriations package to provide funding for collecting valuable information and develop solutions to address the rising maternal mortality crisis.

Improve Access and Coverage of Remote Physiologic Monitoring Devices in Pregnancy

Remote physiologic monitoring involves the collection and analysis of patient physiologic data that is used to develop and manage a treatment plan related to a chronic and/or acute health condition. It allows patients to be closely monitored from the comfort of their homes and for providers to track patients' physiologic parameters and implement changes to treatment plans as appropriate. Examples of remote physiologic monitoring include self-measured blood pressure (SMBP) devices and blood glucose monitors. The use of remote monitoring devices is becoming more and more prevalent. In fact, the American Heart Association recommends [home blood pressure monitoring](#) for all patients with hypertension.

Hypertensive disorders in pregnancy, such as pre-eclampsia and eclampsia, account for [two to eight percent](#) of all pregnancy-related complications, contributing to over 50,000 maternal deaths and over 500,000 fetal deaths worldwide. Early diagnosis and prompt management is essential to preventing associated morbidity and mortality.

While SMBP monitoring is known to improve hypertension control and outcomes for both pregnant and nonpregnant patients, Medicaid coverage is insufficient in many states, creating a barrier to access for patients. Medicaid pays for roughly half of all births in the U.S and plays a critical role in the provision of maternity-related services. Medicaid is particularly essential for patients in rural areas and those facing limited healthcare access, making expanded coverage crucial to improving maternal health outcomes.

Expanding Medicaid coverage of remote physiologic monitoring devices will make these management options more widely available and subsequently improve maternal and infant health outcomes. This is exactly what the Connected Maternal Online Monitoring (Connected MOM) Act, [S. 141](#), aims to accomplish. Specifically, this bill requires the Centers for Medicare & Medicaid Services to provide resources for states and report on coverage of remote physiologic devices and related services under Medicaid to improve maternal and infant health outcomes for pregnant and postpartum patients.

Urge your Senators to take action to increase access to remote physiologic monitoring devices for pregnant patients by cosponsoring the Connected MOM Act (S. 141) and implore your Representative to support the companion bill when it is reintroduced in the House of Representatives.