



CONGRESS OF THE UNITED STATES
HOUSE OF REPRESENTATIVES

November 15, 2023

Shalanda Young
Director
Office of Management and Budget
1650 17th St NW
Washington, DC 20500

Dear Director Young,

As you work to prepare the President's Budget for Fiscal Year 2025, we write to request the inclusion of policy priorities from the Black Maternal Health Caucus and Black Maternal Health Momnibus Act (H.R. 3305/S. 1606), a sweeping package of bills we introduced to build on existing legislation and comprehensively address the drivers of maternal mortality, morbidity, and disparities in the United States.

As you know, the United States has the highest maternal mortality rate of any high-income country and the only rate that is rising. Severe disparities exist among various racial and ethnic groups. The pregnancy-related mortality rate for Black and Native Americans is two to four times higher than the rate for White Americans.¹ Hispanic and Asian American, Native Hawaiian, and Pacific Islander (AANHPI) people also experience elevated rates of maternal mortality and morbidity.² Still, even with these disparities it is important to understand that the maternal mortality crisis in our country is extensive and impacts families in every community across the nation. It is for this reason that we must address the maternal mortality crisis quickly and comprehensively.

The need to address this crisis is only becoming more urgent: a recent Government Accountability Office (GAO) report found that maternal health outcomes worsened and disparities widened during the COVID-19 pandemic.³ More alarmingly, recent CDC data show

¹ National Institutes of Health Office of Research on Women's Health: *Maternal Morbidity and Mortality*. 2019.

² Centers for Disease Control and Prevention: *Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016*. September 6, 2019.

³ U.S. Government Accountability Office: *Maternal Health: Outcomes Worsened and Disparities Persisted During the Pandemic*. October 19, 2022.

that maternal mortality rates increased by 89 percent in the United States from 2018 to 2021.⁴ In addition, in 2022, the U.S. infant mortality rate, which is inextricably linked to maternal mortality, increased 3 percent compared to 2021, which is the first significant increase to the infant mortality rate in two decades.⁵

To save moms' lives and end glaring maternal health inequities, we introduced the Black Maternal Health Momnibus Act (Momnibus) in March 2020 with then-Senator, now-Vice President Kamala Harris. In the 118th Congress, we have continued to work with now more than 190 cosponsors in the House⁶ and more than 30 cosponsors in the Senate⁷ to advance this legislative package. The Momnibus is endorsed by more than 200 organizations, including associations representing physicians, midwives, nurses, doulas, and other perinatal health workers; hospitals; insurers; health care organizations promoting maternal health, women's health, public health, mental health, and health equity; community-based organizations; and other leading national organizations.⁸

As you know, in 2022, the Biden-Harris Administration released its Blueprint for Addressing the Maternal Health Crisis: a whole-of-government approach to combatting maternal mortality and morbidity that underscores the deep commitment of the President and Vice President to our nation's mothers, babies, and families.⁹ Advancing and enacting the Momnibus is critical to the success of the Administration's Blueprint.

Given the urgency of the maternal health crisis, the Biden-Harris Administration's commitment to combatting maternal mortality, and the robust coalition of support for the Momnibus, we urge you to include the funding and policy priorities from this legislative package in the Fiscal Year 2025 budget. Specifically, we encourage you to prioritize:

Department of Health and Human Services

- \$100 million for local entities (including community-based organizations, public health departments, Indian tribes or tribal organizations, Urban Indian organizations, and public health departments or nonprofit organizations working with one of the entities listed above) to address social determinants of health during and after pregnancy, including housing, transportation, nutrition, climate change and other environmental conditions, intimate partner violence, employment, workplace conditions, and related factors.
- \$100 million specifically and exclusively for community-based organizations working to advance maternal health equity. The FY 2023 Omnibus provided \$7 million in funding for awards to community-based organizations located in geographic areas with high rates

⁴ <https://www.cdc.gov/nchs/data/hestat/maternal-mortality/2021/maternal-mortality-rates-2021.pdf>

⁵ <https://blogs.cdc.gov/nchs/2023/11/01/7479/>

⁶ <https://www.congress.gov/bill/118th-congress/house-bill/3305/cosponsors>

⁷ <https://www.congress.gov/bill/118th-congress/senate-bill/1606/cosponsors>

⁸ Black Maternal Health Caucus: *Black Maternal Health Momnibus Act of 2021*

Endorsements. https://underwood.house.gov/sites/evo-subsites/underwood.house.gov/files/evo-media-document/momnibus-endorsements-118th-congress_0.pdf. Accessed October 23, 2023.

⁹ White House: *FACT SHEET: President Biden's and Vice President Harris's Maternal Health Blueprint Delivers for Women, Mothers, and Families*. June 24, 2022.

of adverse maternal health outcomes – particularly focused on people from racial and ethnic minority groups – to achieve maternal health equity.

- \$5 million for grants for maternity care training for all employees in maternity care settings to reduce and prevent bias, racism and discrimination in maternity care.
- \$15 million for grants to grow and diversify the maternal and perinatal nursing workforce, including nurse practitioners, midwives, nurses, and other maternal health care professionals.
- \$15 million for grants to grow and diversify the perinatal workforce, including physicians, physician assistants, midwives, doulas, community health workers, peer supporters, breastfeeding and lactation educators or counselors, childbirth educators, home visitors, social workers, and other related positions.
- \$15 million for grants to grow and diversify the maternal mental and behavioral health care workforce.
- \$25 million for the establishment of a Maternal Mental Health Equity Grant Program that would address maternal mental health conditions and substance use disorders through funding for community-based organizations and nonprofits, public health departments, health care professionals, Indian tribes or tribal organizations, and Urban Indian organizations.
- \$10 million in funding for research on maternal mortality, morbidity, and disparities at Historically Black Colleges and Universities (HBCUs) and Minority-Serving Institutions. The FY 2023 Omnibus provided \$10 million to establish a research network that is comprised of and supports minority-serving institutions to study maternal health disparities.
- \$10 million in additional funding for Maternal Mortality Review Committees (MMRCs) to increase the diversity of the membership of MMRCs and to establish initiatives to conduct outreach and community engagement efforts related to the work of the MMRCs, with not less than \$1.5 million reserved for grants to Indian Tribes, Tribal organizations, or Urban Indian organizations.
- \$100 million for local entities (including community-based organizations, public health departments, Indian tribes or tribal organizations, and Urban Indian organizations) to identify climate change-related risks for pregnant people, new mothers, and infants; provide support and resources to those individuals; and mitigate levels of and exposure to climate change-related maternal and infant health risks in vulnerable communities.
- \$5 million for grants to health profession schools to support the development and integration of education and training programs for identifying and addressing climate change-related maternal and infant health risks.
- \$100 million for the Surveillance for Emerging Threats to Mothers and Babies program at the Centers for Disease Control and Prevention (CDC). The FY 2023 Omnibus provided \$23 million for CDC's Surveillance for Emerging Threats to Mothers and Babies program.
- \$30 million for the Enhancing Reviews and Surveillance to Eliminate Maternal Mortality program at CDC.
- \$45 million for the Pregnancy Risk Assessment Monitoring System at CDC.
- \$15 million for the National Institute for Child Health and Human Development to conduct or support research for interventions to mitigate the effects of public health emergencies and infectious diseases that pose a risk to maternal and infant health.

- \$43.4 million for the Implementing a Maternal health and PRegnancy Outcomes Vision for Everyone (IMPROVE) Initiative at the National Institutes of Health. The FY 2023 Omnibus funded the NIH's IMPROVE Initiative at \$43.4 million.
- \$17 million for CDC to carry out a national campaign to increase maternal vaccination rates through public awareness and education efforts.
- \$2 million through the Indian Health Service to conduct a comprehensive study on maternal mortality and severe maternal morbidity among American Indian and Alaska Native individuals.
- \$12 million for grants to expand access to digital tools related to maternal health care, including technology-enabled collaborative learning and capacity building models; digital tools for pregnant people and new mothers, such as remote patient monitoring technologies and apps; and digital tools for maternal health care professionals, such as early warning systems and clinical decision support mechanisms.

Department of Agriculture

- A policy to extend eligibility for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) from 6 months to 24 months during the postpartum period and from 12 months to 24 months during the breastfeeding period, and necessary funding to implement such policy.

Department of Justice

- \$10 million for a pilot program to improve maternal health outcomes for pregnant people and new mothers who are incarcerated in federal prisons.
- \$10 million for a pilot program to improve maternal health outcomes for pregnant people and new mothers who are incarcerated in local jails and prisons.
- A policy to reduce funding allocations to states through the Edward Byrne Memorial Justice Grant Program in states that do not have in effect by October 1, 2025 laws restricting the use of restraints on pregnant people in prison that are substantially similar to the rights, procedures, requirements, effects, and penalties set forth in section 4322 of title 18, United States Code.

Department of Veterans Affairs

- \$15 million to implement and fully resource the Protecting Moms Who Served Act (P.L. 117-69). The FY 2023 Omnibus included language to implement and fully fund the Protecting Moms Who Served Act (P.L. 117-69).

These evidence-based policies and investments are the solution to our nation's maternal health crisis and are aligned with the priorities of the Biden-Harris Administration. Therefore, we urge you to include these Momnibus provisions in the President's Budget for Fiscal Year 2025.

We are grateful for your leadership and look forward to working with you on this priority.

Sincerely,



Cory A. Booker
United States Senator



Lauren Underwood
Member of Congress



Alma S. Adams, Ph.D.
Member of Congress



Steven Horsford
Member of Congress
Chairman, Congressional
Black Caucus