

From Crisis to a Call to Action: The AAMC's Recommendations to Address the Maternal Health Crisis and Advance Birthing Equity

Rates of maternal injury and death in the United States are high — and on the rise. According to data from the Centers for Disease Control and Prevention, Black and Indigenous women continue to face unacceptable health disparities and are more likely to die from pregnancy-related causes than their white counterparts. The <u>Association of American Medical</u> <u>Colleges (AAMC)</u>'s member medical schools, teaching health systems and hospitals, and faculty physicians play a critical role in the maternal health delivery system, offering highly specialized services that are often unavailable in other settings. The AAMC is committed to addressing this crisis and ensuring that all patients have an equal chance at a safe and healthy birth.

To achieve this goal, the AAMC supports a multi-pronged strategy to help prevent maternal deaths and advance health equity. We urge Congress and the administration to consider the following investments:

• Diversify, Expand, and Extend the Perinatal Workforce

- Invest in Medicare-supported graduate medical education (GME) by passing the Resident Physician Shortage Reduction Act of 2023 (<u>H.R. 2389/S. 1302</u>), which would increase the number of Medicare-supported GME positions by 2,000 per year for seven years, for a total of 14,000 new positions. This investment in the physician workforce would translate into an increased number of maternity care providers, including obstetricians and maternal and fetal medicine specialists.
- Provide <u>\$1.51 billion</u> in fiscal year (FY) 2025 funding for the Health Resources and Services Administration (HRSA) Title VII and Title VIII workforce development programs, which play a crucial role in recruiting a diverse and culturally responsive health care workforce. These programs promote collaborative, interdisciplinary care teams — including midwives, nurses, licensed clinical social workers, mental health providers, and other professionals — through interprofessional training and education.
- Leverage innovative technologies to enhance current workforce capacity and help providers more efficiently respond to patients care needs, including by extending telehealth flexibilities and expanding access to remote physiologic monitoring devices under Medicaid, per the Connected Maternal Online Monitoring (MOM) Act (<u>S. 712</u>).

• Bolster the Maternity Care System

- Address the mounting financial challenges that have forced too many hospitals across the country to shutter their maternity care units, or else close entirely.
- Ensure that teaching hospitals remain open and ready to serve pregnant patients by rejecting misguided cuts to hospital outpatient departments (HOPDs), preserving the 340B Drug Pricing Program, and eliminating scheduled reductions to the Medicaid Disproportionate Share Hospital (DSH) Program.

• Ensure Access to Coverage and Care

- Advance policies that promote Medicaid coverage for pregnant patients by addressing the coverage gap and guaranteeing universal access to 12 months of continuous postpartum Medicaid coverage.
- Reduce barriers to care for pregnant patients by limiting payers' use of prior authorization during the prenatal and post-partum periods.

• Promote Whole-Person Health

- Raise awareness of perinatal behavioral health conditions and their impact on the health and well-being of pregnant patients and their families.
- Expand access to comprehensive, patient-centered mental health care for pregnant patients by investing in evidence-based integrated behavioral health (IBH) models, which accelerate the coordination and integration of physical and behavioral health care.

• Foster Cross-Sector Partnerships

- Promote policies that help medical schools and teaching hospitals address the social determinants of health through investments in affordable housing, social services, and community health programs.
- Provide researchers, policymakers, and communities with the data they need to understand the root causes of maternal deaths by investing in and enhancing maternal mortality review committees (MMRCs).

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