

July 12, 2022

The Honorable Frank Pallone  
Chair  
House Energy & Commerce Committee  
Washington, DC 20515

The Honorable Cathy McMorris-Rodgers  
Ranking Member  
House Energy & Commerce Committee  
Washington, DC 20515

The Honorable Anna Eshoo  
Chairwoman  
House Energy & Commerce Committee  
Subcommittee on Health  
Washington, DC 20515

The Honorable Brett Guthrie  
Ranking Member  
House Energy & Commerce Committee  
Subcommittee on Health  
Washington, DC 20515

Dear Chairman Pallone, Ranking Member McMorris-Rodgers, Chairwoman Eshoo, and Ranking Member Guthrie:

We the undersigned support the following legislation introduced in the 117<sup>th</sup> Congress and referred to the Energy and Commerce Committee, and we urge you to hold a hearing on these two bills this year:

**Midwives for Maximizing Optimal Maternity Services (Midwives for MOMS) Act (H.R. 3352)** This legislation will address maternity care provider shortages in rural and underserved areas throughout the country with a goal of improving maternal and child health outcomes, especially among underrepresented Black, Indigenous, Latinx and Asian women, and scale up and diversify the midwifery workforce. This bill will establish two new funding streams for accredited midwifery education programs under Health Resource and Services Administration's Title VII Health Professions Training Program and Title VIII Nursing Workforce Development Programs. Grant funding would be prioritized for midwifery programs whose students commit to practicing in a maternity care provider shortage area upon graduation and certification and/or are from underrepresented groups. Funding could also be awarded to programs to help preceptors who train midwifery students, and funding could also be awarded to colleges and universities, including HBCUs, for the establishment or expansion of midwifery education programs.

Poor birth outcomes, overuse of obstetric procedures, and high costs of care require urgent action by Congress to improve quality and lower costs associated with maternal health care. Up to 50% of maternal deaths could be prevented based on quality-of-care improvements at the patient, system, and provider levels.<sup>1</sup> A scaling up and diversifying of midwifery-led care can lead to a significant improvement in birth outcomes.<sup>2</sup> Studies have

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found that women cared for by midwives have excellent birth outcomes, including lower episiotomy, cesarean birth, and preterm birth rates.<sup>3</sup>

Providing scholarship opportunities to a more diverse cohort of people interested in becoming midwives and providing evidence-based midwifery care is essential to any comprehensive expansion in midwifery participation in our nation's maternal care continuum. Please contact Debbie Jessup in Representative Roybal-Allard's office at [Debbie.jessup@mail.house.gov](mailto:Debbie.jessup@mail.house.gov) or Adrianna Lagorio in Representative Herrera Beutler's office at [adrianna.lagorio@mail.house.gov](mailto:adrianna.lagorio@mail.house.gov).

**Birth Access Benefiting Improved Essential Facility Services Act (BABIES) Act (H.R.3337).** The bill would establish a Medicaid demonstration program to develop and advance innovative payment models for freestanding birth center services for women with a low-risk pregnancy. The BABIES Act would set up demonstration model Birth and Health Centers in 6 states. The demonstration would consist of implementing prospective payment systems for care provided in these facilities. The demonstration also will include in-depth evaluation of the centers, their outcomes, and realized savings to the Medicaid program. The goal will be to provide access to high quality midwifery-led care to more women who currently lack this care..

Childbearing people of color, particularly Black/African Americans, Native Americans, and people of lower socioeconomic status, including those living in rural and inner-city areas, experience disparities during and after childbirth with higher rates of poor outcomes for both mothers and infants. Rates for maternal mortality and morbidity, infant mortality, preterm and low birth weight births are all significantly higher among vulnerable populations. Midwifery-led care in the birth center has been shown through the Strong Start for Mothers and Newborns evaluation to improve outcomes for mothers and infants, lowering preterm birth, low birth weight, and cesarean births. Increasing access for more women will lead to better health. Please contact Woo Lim in Representative Katherine Clarke's office at [Woo.lim@mail.house.gov](mailto:Woo.lim@mail.house.gov).

Freestanding birth centers were overwhelmed by requests for services during the pandemic as many sought to stay away from acute care facilities due to infection concerns related to COVID-19. Birth centers met the increase in demand and once again showed that our health care system will benefit from increasing access to midwives, evidence based midwifery-led care, and freestanding birth centers.

The United States has the highest burden of maternal and neonatal death among high-income countries, and yet midwifery remains underused as a proven strategy to improve outcomes and increase access to care. To this end, we strongly encourage the committee

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to hold a hearing on these two critical pieces of legislation, *the Midwives for MOMS Act* (H.R. 3352) and *the BABIES Act* (H.R. 3337) during this Congress.

Thank you for considering our request. We look forward to working with the committee on policy solutions that improve maternal and child health in the United States.

Sincerely,

American Association of Birth Centers  
American College of Nurse-Midwives  
National Association of Professional Midwives  
2020 Mom  
Accreditation Commission for Midwifery Education  
American Association of Colleges of Nursing  
American Nurses Association  
Ancient Song Doula Services  
Association of Maternal & Child Health Programs  
Black Mamas Matter Alliance, Inc. (BMMA)  
Carpe Diem Counseling, LLC  
Every Mother Counts  
Frontier Nursing University  
Grow Midwives, LLC  
Healthy Mothers Healthy Babies PBC  
HealthyWomen  
ImprovingBirth  
Inner Nature Therapy  
LA Best Babies Network  
Lamaze International  
Lighting lives Counseling  
March for Moms  
March of Dimes  
Maternal Mental Health Leadership Alliance  
Mom Congress  
Mom Life Counseling, LLC  
MomsRising  
National Association of Nurse Practitioners in Women's Health  
National Association of Pediatric Nurse Practitioners  
National Birth Equity Collaborative  
National Health Law Program  
National League for Nursing

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National Partnership for Women & Families  
National Rural Health Association  
Pearl Psychiatry  
Postpartum Support International  
Postpartum Support International TN  
Sacramento Maternal Mental Health Collaborative  
Sisters in Birth, Inc.  
The Commission for the Accreditation of Birth Centers  
Wildflower Center for Emotional Health PLLC  
Works of Faith Wellness and Co  
Yakima Valley Memorial

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<sup>1</sup> Howell EA, Zeitlin J. Improving hospital quality to reduce disparities in severe maternal morbidity and mortality. *Semin Perinatol.* Aug 2017;41(5):266-272.

<sup>2</sup> <https://www.marchofdimes.org/materials/Final%20midwifery%20position%20statement%20August%2029%202019.pdf>

<sup>3</sup> DeJoy SA, Bohl MG, Mahoney K, Blake C. Estimating the Financial Impact of Reducing Primary Cesareans. *J Midwifery Womens Health.* Jan 2020;65(1):56-63.  
doi:10.1111/jmwh.13010