May 14, 2021

The Honorable Lauren Underwood
U.S. House of Representatives
1130 Longworth House Office Building
Washington, DC 20515

The Honorable Julia Brownley
U.S. House of Representatives
2262 Rayburn House Office Building
Washington, DC 20515

The Honorable Gus Bilirakis
U.S. House of Representatives
2354 Rayburn House Office Building
Washington, DC 20515

The Honorable Brian Fitzpatrick
U.S. House of Representatives
271 Cannon House Office Building
Washington, DC 20515

Dear Representatives Underwood, Bilirakis, Brownley and Fitzpatrick:

On behalf of our physician and medical student members, the American Medical Association (AMA) is writing to voice our support for H.R. 958, the “Protecting Moms Who Served Act.” The AMA believes that all women should have access to reproductive health services, especially those who have served our country. The Protecting Moms Who Served Act would require the Department of Veterans Affairs (VA) to implement the maternity care coordination program with community maternity care providers (i.e., non-VA maternity care providers) who have the necessary training to address the unique needs of pregnant and postpartum veterans. Additionally, the legislation would require the U.S. Government Accountability Office to produce reports on maternal mortality and severe maternal morbidity among pregnant and postpartum veterans, with a focus on veteran racial and ethnic disparities in maternal health outcomes.

With 1.9 million women veterans, the demand for VA maternity care is ever increasing. Approximately 4,000 women veterans are now delivering babies using their VA maternity benefits each year. Moreover, due to the intense physical demands of serving our country, women veterans often have multiple medical conditions that increase their risk for pregnancy complications. As such, it is vitally important that the VA provide appropriate information on, and access to, medical care resources for pregnant, birthing, and postpartum veterans. Through the Protecting Moms Who Served Act, women veterans would have better access to maternity care coordination programs, which have been shown to increase the use of beneficial health services, improve maternal and birth outcomes, and decrease costs, especially for women with chronic or pregnancy-related physical or mental health conditions or social vulnerabilities. To help ensure that veteran mothers receive the best possible care before, during, and after pregnancy, it is imperative that the maternity care coordinator program be expanded to meet the needs of this consistently growing population.

The U.S. has the highest maternal mortality rate among developed countries, and according to the U.S. Centers for Disease Control and Prevention (CDC), 60 percent or more of these maternal deaths are preventable. Furthermore, CDC data shows that Black women are three to four times more likely to die

1 https://www.va.gov/HEALTHEQUITY/Women_Veterans_and_Pregnancy_Complications.asp.
2 Id.
3 Id.
from pregnancy-related causes than White women.\textsuperscript{4} As such, it is important that data are gathered and information is disseminated that identifies the causes and potential solutions for our nation’s high maternal mortality rate, with special emphasis being placed on the even higher rate of maternal mortality among racial and ethnic minorities. The data that would be gathered thanks to the Protecting Moms Who Served Act would help to create care solutions for women veterans, and potentially women in general, throughout the birthing process.

Pregnancy, childbirth, and the postpartum period will always carry some degree of risk. We as a nation must do all we can to minimize that risk and help ensure that veteran mothers and their babies thrive throughout pregnancy and for the rest of their lives. We appreciate your leadership on this important issue and look forward to working with you to advance this legislation.

Sincerely,

James L. Madara, MD

\textsuperscript{4} CDC, Morbidity and Mortality Weekly Report (MMWR), Racial/Ethnic Disparities in Pregnancy-Related Deaths — United States, 2007–2016. \url{https://www.cdc.gov/mmwr/volumes/68/wr/mm6835a3.htm?s_cid=mm6835a3_w}.  