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June 27, 2018

The Honorable Jaime Herrera Beutler
U.S. House of Representatives
1107 Longworth House Office Building
Washington, D.C. 20515

The Honorable Diana DeGette
U.S. House of Representatives
2111 Rayburn House Office Building
Washington, D.C. 20515

The Honorable Ryan Costello
U.S. House of Representatives
326 Cannon House Office Building
Washington, D.C. 20515

Dear Representatives Herrera Beutler, Costello, and DeGette:

On behalf of the more than 80,000 members of the American College of Surgeons (ACS), I would like to express our support for the *Preventing Maternal Deaths Act*, H.R. 1318. This bipartisan legislation is an important step in addressing disparities in pregnancy-related mortality and identifying ways to make pregnancy safer.

The U.S. is the only industrialized nation with a rising maternal mortality rate. The U.S. saw a 26% increase in the maternal mortality rate from 18.8 deaths per 100,000 live births in 2000 to 23.8 in 2014¹. Considerable racial disparities in pregnancy-related mortality exist. According to the Centers for Disease Control and Prevention's Pregnancy Mortality Surveillance System, during 2011–2013, the pregnancy-related mortality ratios were 12.7 deaths per 100,000 live births for white women compared to 43.5 deaths per 100,000 live births for black women.

According to the CDC Foundation, the leading causes of pregnancy-related death include seven causes accounting for 72.2% of all pregnancy-related deaths. The leading underlying causes of pregnancy-related death are hemorrhage, cardiovascular and coronary conditions, cardiomyopathy, infection, embolism, mental health conditions, and preeclampsia. Variations amongst the leading causes exist among states, race-ethnicity, and age. Determining methods to address

¹ MacDorman, M., Declercq, E., Cabral, H., Morton, C., "Is the United States Maternal Mortality Rate Increasing? Disentangling trends from measurement issues: Short title: U.S. Maternal Mortality Trends." *Journal of Obstetrics and Gynecology*. September, 2016



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disparities amongst different populations by providing high quality care will help to improve health outcomes.

Currently, 33 states are studying local maternal death cases through maternal mortality review committees (MMRCs) to identify opportunities for prevention and ways to make pregnancy safer for all women. The authorization of a Department of Health and Human Services (HHS) grant program through the Centers for Disease Control and Prevention (CDC) for states to establish, maintain, or expand MMRCs is critical for improving health outcomes and reducing disparities in pregnancy-related care.

The ACS also strongly supports the provision directing HHS to research disparities in maternal health outcomes and expand access to health care services that improve quality and outcomes of maternity care for vulnerable populations. The establishment of a demonstration project to compare the effectiveness of and implement effective interventions to reduce disparities in maternity care is vital to efforts to reduce preventable pregnancy-related mortality.

Again, thank you for your leadership in introducing the *Preventing Maternal Deaths Act*. We look forward to working with you as this important legislation moves through Congress.

Sincerely,

David B. Hoyt, MD, FACS
Executive Director, American College of Surgeons

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