## Opening Statement of Republican Leader Greg Walden Subcommittee on Health "Improving Maternal Health: Legislation to Advance Prevention Efforts and Access to Care" September 10, 2019

As Prepared for Delivery

The critical issue of maternal morbidity and mortality – an issue that is literally a matter of life and death for women all across the country – is a difficult topic, and one that is close to my heart.

Despite massive innovation in health care and advancements in technology, recent reports have indicated that the number of women dying due to pregnancy complications has increased in recent years. The effects of such a tragedy on any family are impossible to comprehend.

This hearing builds off the important work of our committee in the last Congress under the leadership of Dr. Burgess and the Health Subcommittee. Last year, the President signed into law H.R. 1318, the Preventing Maternal Deaths Act. This important law, led by Representatives Jaime Herrera Beutler (R-WA) and Diana DeGette (D-CO) seeks to improve data collection and reporting around maternal mortality, and develop systems at the local, state, and national level in order to better understand the burden of maternal complications. These efforts include identifying the reasons for disparities in maternal care, health risks that contribute to maternal mortality, and clinical practices that improve health outcomes for moms and babies.

We have continued to lead the way this Congress as well – and on a bipartisan basis, I might add – sending letters earlier this year to six HHS agencies asking for the latest information on what they are doing to combat maternal mortality. I hope that we finish the briefings requested in those letters soon.

Unfortunately, I'm dismayed at the way the majority handled our legislative process to get to this hearing. For an issue that is absolutely bipartisan, I'm disappointed that the majority would not allow consideration of H.R. 4215, the Excellence in Maternal Health Act, a bipartisan bill led by Dr. Bucshon that serves as the House companion to the maternal mortality provisions in Senator Alexander and Senator Murray's bipartisan Lowering Health Care Costs Act. I strongly support the bipartisan language in this bill as it demonstrates our commitment to further addressing maternal mortality. The bill authorizes grants to identify, develop, and disseminate maternal health quality best practices, supports training at health professions schools to reduce and prevent discrimination and implicit biases, enhances Federal efforts to establish or support perinatal quality collaboratives, and authorizes grants for establishing and/or operating innovative evidence-informed programs that deliver integrated services to pregnant and postpartum women. The language in this bill passed the U.S. Senate Committee on Health, Education, Labor and Pensions as a part of Senator Alexander and Senator Murray's bipartisan package. I truly don't understand why the majority refused to include H.R. 4215 in today's hearing.

Regarding the four bills that we ARE reviewing today, only one of the bills has a Republican cosponsor. I am also concerned that despite coming off of a six week district work period we didn't have witnesses agreed to until last Thursday and Members weren't able to review testimony until yesterday. Such a broken process is disrespectful of this important issue.

Some of today's bills would expand Medicaid and CHIP coverage for pregnant and postpartum women from 60 days to one year. This would be a significant policy change and one we need to carefully consider before we advance such a policy through the Committee. Importantly, several states have already undertaken such initiatives and understanding that state experience will be critical as we move forward.

Given the huge impact that some of these bills will have on HHS, I would also note that HHS is not here today to discuss what they have already been doing to address maternal mortality, nor to provide their thoughts on the incomplete list of bills before us today. Given this absence, I call on the majority to schedule a second legislative hearing before moving to a markup. And I strongly urge the majority to include H.R. 4215 in such a hearing. It's a good faith, bipartisan bill that deserves consideration, too.

Despite my concerns about this process, I have no concerns about our distinguished witnesses here today. I'd like thank our witnesses for being here and sharing your stories and expertise. I know we will learn much about the landscape of maternity care and what more we can do to improve the health outcomes in expectant or new mothers across the country.