



May 18, 2022

The Honorable Frank Pallone Jr.  
Chair, Energy and Commerce Committee  
2125 Rayburn House Office Building  
Washington, DC, 20515

The Honorable Anna Eshoo  
Chair, Energy and Commerce Subcommittee on  
Health  
2125 Rayburn House Office Building  
Washington, DC, 20515

The Honorable Cathy McMorris Rodgers  
Ranking Member, Energy and Commerce  
Committee  
2322 Rayburn House Office Building  
Washington, DC, 20515

The Honorable Brett Guthrie  
Ranking Member, Energy and Commerce  
Subcommittee on Health  
2322 Rayburn House Office Building  
Washington, DC, 20515

Dear Chairwoman Eshoo and Ranking Member Guthrie,

On behalf of March of Dimes, a leader in maternal health, mental health, and infant health care policy, we write to express our gratitude for the inclusion of provisions from H.R. 7073, the Into the Light for Maternal Mental Health and SUD Act of 2022 and H.R. 4217, the TRUIMPH for New Moms Act of 2021, as part of the bipartisan Restoring Hope for Mental Health and Well-Being Act of 2022. Both of these bills will make a measurable difference in addressing maternal mental health and substance use.

The bipartisan Into the Light Act, led by Assistant Speaker Katherine Clark (D-MA), Representatives Jaime Herrera Beutler (R-WA), Michael Burgess, M.D. (R-TX), Yvette Clarke (D-NY), Doris Matsui (D-CA), and Young Kim (R-CA), will reauthorize and expand the Health Resources and Services Administration's (HRSA) grant program for Screening and Treatment for Maternal Mental Health under the 21st Century Cures Act (P.L. 114-255) and authorize the maternal mental health hotline established under the Consolidated Appropriations Act, 2021 (P.L. 116-260).

As you know, the most common complication of pregnancy is a mental health condition, and the leading causes of death for new mothers are suicide and overdose.<sup>1,2,3</sup> Maternal mental health conditions – including depression, anxiety, obsessive compulsive disorder, post-traumatic stress disorder, and substance use disorder – are serious illnesses that begin during pregnancy or the year following

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<sup>1</sup> Davis NL, Smoots AN, Goodman DA. Pregnancy-related deaths: data from 4 U.S. Maternal Mortality Review Committees, 2008-2017 [Internet] Atlanta (GA): Centers for Disease Control and Prevention; 2019.

<sup>2</sup> Goldman-Mellor D, Margerison CE. Maternal drug-related death and suicide are leading causes of postpartum death in California. *Am J Obstet Gynecol.* 2019;221:489.e1-9.

<sup>3</sup> Metz TD, Rovner P, Hoffman MC, Alshouse AA, Beckwith KM, Binswanger IA. Maternal deaths from suicide and overdose in Colorado, 2004-2012. *Obstet Gynecol.* 2016;128(6):1233-1240.

pregnancy, and affect 1 in 5 pregnant and postpartum people.<sup>4,5,6</sup> These illnesses are the most common pregnancy complications, adversely impacting 800,000 families each year in the United States.<sup>7</sup> Unfortunately, as many as 75% of those affected never receive treatment,<sup>8</sup> resulting in potential long-term negative consequences for the health and well-being of parents, infants, and families. Moreover, the cost of untreated maternal mental health conditions is \$14.2 billion each year (or \$32,000 per mother-infant pair) in health costs as well as lost wages and productivity of affected parents.<sup>9</sup> The COVID-19 pandemic has pushed an existing maternal mental health and substance abuse crisis to catastrophic levels, with pregnant and postpartum patients reporting a threefold increase in symptoms of anxiety and depression.<sup>10,11</sup>

The timely and bipartisan Into the Light Act would take simple steps to scale up and fortify the programs that support, screen, and treat pregnant and postpartum individuals. The bill implements recommendations from states to expand HRSA's Screening and Treatment for Maternal Mental Health grants, increasing the number of state programs from 7 to at least 25. These grants support programs such as Psychiatry Access Programs, which allow frontline healthcare providers real-time psychiatric consultation in which a specialist guides screening, brief intervention, and referral for maternal mental health conditions. The Into the Light Act further builds upon current grants by adding trainings in culturally-appropriate care and technical assistance from HRSA to help state grantees with implementation. Finally, the Into the Light Act authorizes the maternal mental health hotline, allowing for a nationally operated 24/7 real-time voice and text access resource for emotional support, information, and brief intervention for individuals and families affected by maternal mental health conditions.

We also support the creation of a task force that would address maternal mental health issues such as depression, anxiety, and suicide. Based on the bipartisan TRIUMPH for New Moms Act of 2021, sponsored by Representatives Nanette Barragan (D-CA), Larry Buschon (R-IN), Young Kim (R-CA), and Lisa Blunt Rochester (D-DE), the task force would develop a national strategy on improving maternal mental health outcomes and expand coordination with states to increase mental health prevention and treatment services for both new and expecting mothers.

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<sup>4</sup> American College of Obstetricians and Gynecologists. ACOG Committee Opinion 7575: Screening for Perinatal Depression. *Obstet Gynecol.* 2018;132(5):E208-12.

<sup>5</sup> Fawcett EJ, Fairbrother N, Cox ML, White IR, Fawcett JM. The prevalence of anxiety disorders during pregnancy and the postpartum period: a multivariate Bayesian meta-analysis. *J Clin Psychiatry.* 2019;80(4):18r12527.

<sup>6</sup> Gavin NI, Gayness BN, Lohr KN, Meltzer-Brody S, Gartlehner G, Swinson T. Perinatal depression: a systematic review of prevalence and incidence. *Obstet Gynecol.* 2005;106(5 Pt 1):1071-83.

<sup>7</sup> *Ibid.*

<sup>8</sup> Byatt N., Levin LL, Ziedonis D, Moore Simas TA, Allison J. Enhancing participation in depression care in outpatient perinatal care settings: a systematic review. *Obstet Gynecol.* 2015;126(5):1048-58.

<sup>9</sup> Societal Costs of Untreated Perinatal Mood and Anxiety Disorders in the United States ([mathematica.org](http://mathematica.org))

<sup>10</sup> Davenport MH, Meyer S, Meah VL, Strynadka MC, Khurana R. Moms Are Not OK: COVID-19 and Maternal Mental Health. *Front Glob Womens Health.* 2020 Jun 19;1:1. doi: 10.3389/fgwh.2020.00001. PMID: 34816146; PMCID: PMC8593957.

<sup>11</sup> Lebel C, MacKinnon A, Bagshawe M, Tomfohr-Madsen L, Giesbrecht G. Elevated depression and anxiety symptoms among pregnant individuals during the COVID-19 pandemic. *J Affect Disorder.* 2020;1(277):5-13.



Thank you again for including these important provisions and we look forward to working with you and your Senate counterparts to ensure this legislation is part of any final package so that it will address the continuing maternal health crisis facing the country. If we can provide further information or be of assistance, please contact KJ Hertz, Senior Director, Federal Affairs ([khertz@marchofdimes.org](mailto:khertz@marchofdimes.org), 571.969.8655).

Sincerely,

A handwritten signature in black ink that reads 'Stacey Y. Brayboy'.

Stacey Y. Brayboy  
Sr. Vice President, Public Policy & Government Affairs