



May 6, 2014

The Honorable Michael Burgess
U.S. House of Representatives
Washington, D.C. 20515

The Honorable Lois Capps
U.S. House of Representatives
Washington, D.C. 20515

Dear Representative Burgess and Representative Capps:

On behalf of the Coalition for Quality Maternity Care (CQMC), a group of national professional, consumer, and human rights organizations that promote high-quality maternity care for all women and newborns, we write to strongly support the ***“Improving Access to Maternity Care Act of 2014,” (H.R.4385)*** which you introduced on April 3, 2014. The CQMC applauds this bipartisan effort to address the needs of pregnant women and their newborns.

H.R.4385 creates a health professional shortage area (HPSA) for maternity care services. The goal of this legislation is to identify areas of the U.S. that are experiencing significant shortages of full scope maternity care professionals and make it possible for the U.S. Department of Health and Human Services to place eligible professionals within the National Health Service Corps (NHSC) in these areas to address the provider shortages. These professionals will be placed in eligible medical facilities, including hospitals, birth centers, and other appropriate facilities.

The CQMC believes expanding access to maternity care professionals in underserved areas can reduce overall maternity care costs in the U.S. by ensuring women that have access to necessary prenatal care and delivery options in the areas where they live.

In its June 2013 report, the Medicaid and CHIP Payment and Access Commission (MACPAC) highlighted that having coverage for maternity services does not guarantee access to care. Access to maternity care professionals is a significant issue in many areas of the country due to the changing demographics of

maternity care providers, variation among practice environments, and restructuring, regionalization and closure of many maternity care units.¹

Shortages of maternity care providers can result in long waiting times for appointments as well as long travel times to prenatal care and/or birthing sites. Maternity care providers have become particularly prone to workforce challenges due to concerns surrounding professional liability, low reimbursement rates, and unpredictable working hours. These factors have contributed to inadequate access to maternal and reproductive care, especially in underserved communities.

There are approximately 4 million births in the United States each year. Hospital discharges associated with birth and newborn care far outnumber discharges associated with any other major diagnostic category. This legislation will help ensure an adequate supply of maternity care providers to address the challenges we face related to the volume of births as well as those arising from uneven distribution of providers.

This cost neutral legislation does not increase the authorization of the NHSC but instead ensures that maternity care providers, including midwives, and obstetricians/gynecologists, working through the NHSC, are sent to the communities that need them the most.

You may contact Patrick Cooney at (202) 347-0034 x101 or via email at Patrick@federalgrp.com if you have questions regarding this issue.

Sincerely,

American Association of Birth Centers
American College of Nurse-Midwives
Asian & Pacific Islander American Health Forum
Association of Women's Health, Obstetric and Neonatal Nurses
Centering Healthcare Institute
Lamaze International
March of Dimes
National Association of Certified Professional Midwives
National Partnership for Women & Families
United States Breastfeeding Committee

¹ MACPAC, "Report to the Congress on Medicaid and CHIP," June 2013, page 21-22.