

Maternal Care Access and Reducing Emergencies (CARE) Act

Introduced by Sen. Kamala D. Harris

Background

The United States is one of only thirteen countries in the world where the rate of maternal mortality—the death of a woman while pregnant or within one year of the end of a pregnancy from any cause related to the pregnancy—is now worse than it was 25 years ago. From 2000 to 2013, maternal mortality rates in the United States increased 26.6 percent. Even more alarming are the significant racial disparities that exist in maternal mortality, an imbalance that has persisted for the past six decades. According to the CDC, Black women in America are three to four times more likely to die from pregnancy-related causes than White women. Black women are also twice as likely to suffer from life-threatening pregnancy complications. This disparity transcends income and education levels – and it is time we say enough is enough.

For decades, researchers, medical professionals, and the public believed high rates of both infant and maternal mortality in Black women could be traced to income, education level, health care access, and even genetics. Today, however, there is a growing body of evidence that indicates that racism and racial discrimination faced by Black women throughout their lifetimes contribute to higher rates of maternal mortality and morbidity. Longstanding racial bias also permeates the health care system, where Black patients often receive inadequate treatment for pain and face dismissal of legitimate concerns and symptoms. We can and must do more to ensure women have access to culturally competent, holistic care to reduce preventable maternal mortality.

Bill Summary: The Maternal CARE Act creates two new grant programs to address maternal mortality and morbidity, with a focus on reducing existing racial health disparities.

Implicit Bias Training Grants

- Establishes competitive grants directed to medical schools, osteopathic schools, nursing schools, and other training programs for health care staff and personnel to support implicit bias training.
- Prioritizes implicit bias training with respect to obstetrics and gynecology.

Pregnancy Medical Home Demonstration Project

- Establishes a demonstration project to assist up to 10 states with implementing and sustaining Pregnancy Medical Home (PMH) programs. States work with relevant stakeholders to develop and carry out the program, including state and local health and social services agencies, health care providers serving pregnant women, community-based health workers like perinatal health workers and doulas, and community-based organizations.
- PMH programs incentivize maternal health care providers to deliver integrated health care services to pregnant women and new mothers by conducting standardized medical, obstetric, and psychosocial risk assessments for each pregnant patient and connecting high-risk patients with a care manager that coordinates health care and social services.