



December 7, 2022

The Honorable Frank Pallone
Chair
House Energy and Commerce Committee
2107 Rayburn House Office Building
Washington, D.C. 20515

The Honorable Cathy McMorris Rogers
Ranking Member
House Energy and Commerce Committee
1035 Longworth House Office Building
Washington, D.C. 20515

Dear Chairman Pallone and Ranking Member McMorris Rogers,

The Joint Commission wishes to express support for certain provisions in H.R. 959, the Black Maternal Health Momnibus Act, which would improve the quality of maternal care. Founded in 1951, The Joint Commission seeks to continuously improve health care for the public in collaboration with other stakeholders, by evaluating health care organizations (HCOs) and inspiring them to excel in providing safe and effective care of the highest quality and value. An independent, not-for-profit organization with a global presence, The Joint Commission has programs that accredit or certify more than 25,000 HCOs and programs in the United States. The Joint Commission evaluates across the continuum of care, including most of the nation's hospitals. Although accreditation is voluntary, a variety of federal and state government regulatory bodies, including the Centers for Medicare and Medicaid Services (CMS), recognize The Joint Commission's decisions and findings for Medicare or licensure purposes.

Specifically, The Joint Commission supports the provisions relative to investing in telehealth to improve maternal health outcomes in underserved areas, growing and diversifying the perinatal workforce, making investments in social determinants of health that influence maternal health outcomes, and expanding access to mental health services for pregnant and postpartum mothers. We are also supportive of efforts to improve data collection and quality measures to better capture the quality of maternal care.


These efforts would build upon current initiatives to improve the quality of perinatal care in the U.S, such as those underway at CMS to support providers in delivering high quality perinatal care. CMS is encouraging hospitals to implement evidence-based best practices, including The Joint Commission's recent standards aimed at addressing maternal hemorrhage and severe hypertension, two of the leading causes of pregnancy-related deaths during and after delivery. The bill would also advance critically needed efforts to improve data collection, such as the new measures recently introduced by CMS related to maternal mortality and severe complications.

The Joint Commission applauds the 117th Congress' efforts to address the ongoing maternal mortality crisis through the American Rescue Plan's provision to allow states the option of extending Medicaid postpartum coverage from 60 days postpartum to 12 months after delivery. This important step will provide coverage for new parents to get the care they need following birth of their newborn. Importantly, we know that many serious harms can occur to mother or newborn in the months post-partum time, so mothers must feel financially confident in their

coverage so that they will not hesitate to seek services. We urge Congress to make this extension a permanent option for states. The five-year window for this extension provided by the American Rescue Plan is an essential step, but permanent action must be taken to address the nearly one-third of pregnancy-related deaths that happen in the year after delivery.

The Joint Commission is pleased to answer any questions you may have regarding our recommendations or our ongoing programs to improve perinatal care in hospitals across the country. If you have any questions, please do not hesitate to contact me or Patrick Ross, Associate Director, Federal Relations at pross@jointcommission.org or (202) 783-6655.

Sincerely,

A handwritten signature in black ink that reads "Kathryn E. Spates". The signature is written in a cursive, flowing style.

Kathryn E. Spates, JD
Executive Director, Federal Relations