

September 26, 2024

The Honorable Senator Ben Ray Luján
United States Senate
498 Russell Senate Office Building
Washington, D.C. 20510

Dear Senator Luján:

We the undersigned support the BABIES Act that you have re-introduced in the 118th Congress. The bill would “address maternity care shortages and promote optimal maternity outcomes by expanding access to birth centers and exploring more effective payment models for birth center care, and for other purposes.”

“Better Availability of Birth Centers Improves Outcomes and Expands Savings Act” or the “BABIES Act.”

The bill would expand access to birth centers by providing grants administered by HRSA for start-up funding for birth centers. This funding could be used toward costs related to renovation or construction of buildings, equipment purchase, or costs related to accreditation or licensure.

The bill would also establish a Medicaid demonstration program to develop and advance innovative payment models for freestanding birth center services for women with a low-risk pregnancy. The BABIES Act would set up demonstration model Birth and Health Centers in 6 states. The demonstration would consist of implementing prospective payment systems for care provided in these facilities. The demonstration also will include in-depth evaluation of the centers, their outcomes, and realized savings to the Medicaid program. The goal will be to provide access to high quality midwifery-led care to more women who currently lack this care.

The U.S. is experiencing a crisis in maternal health care. Maternal mortality rates in the U.S. are higher than any other developed nation and are not improving. Each year, more than 815 women die due to pregnancy complications, and for every maternal death, another 70 experience a life threatening condition. Preterm birth rates among all women have increased since 2015, despite years of decline between 2007 and 2014. Preterm birth is one of the leading causes of infant mortality in the U.S.

Childbearing people of color, particularly African Americans, Native Americans, and people of lower socioeconomic status, including those living in rural and inner-city areas, experience disparities during and after childbirth with higher rates of poor outcomes for both mothers and infants. Rates for maternal mortality for African American women are 3 times the national rate. Infant mortality, preterm, and low birth weight births are all significantly higher among vulnerable populations.

The birth center model of midwifery-led care has been shown through the Strong Start for Mothers and Newborns evaluation to improve outcomes for mothers and infants, lowering preterm birth, low birth weight, and cesarean births. Increasing access for more women and families will lead to better health for all our mothers and newborns. We thank you for your leadership on this bill.

Sincerely,

American Association of Birth Centers

American College of Nurse-Midwives

National Association of Certified Professional Midwives

Ancient Song, Inc.

Birth Center Equity

Black Mamas Matter Alliance

Centering Healthcare Institute

DONA International

Every Mother Counts

Grow Midwives, LLC

In Our Own Voice: National Black Women's Reproductive Justice Agenda

International Cesarean Awareness Network

Just Us Women Productions, LLC

Maternal Mental Health Leadership Alliance

MomsRising

National Black Midwives Alliance

National Partnership for Women & Families

Our Bodies Ourselves

Policy Center for Maternal Mental Health

Purchaser Business Group on Health

The Commission for the Accreditation of Birth Centers

AABC Arizona Chapter

AABC California Chapter

Coalition of Texas Birth Centers

Healthy Start, Inc.

Mamatoto Village

MN Chapter of AABC

New York State Birth Center Association

PA Chapter of AABC

Virginia Affiliate of the American College of Nurse-Midwives

Washington Association of Birth Centers

West Virginia Nurses Association