

**Committee on Energy and Commerce
Member Day Hearing
December 12, 2025
Testimony of Rep. Lauren Underwood**

Thank you, Chairman Guthrie and Ranking Member Pallone.

I am grateful for the opportunity to work with this committee to save moms' lives and end our nation's maternal health crisis.

The United States has the highest pregnancy-related death rate of any high-income country, and Black women are dying at the highest rate of all.¹

And the crisis is only getting worse: over the past two decades, maternal mortality rates more than doubled, and disparities worsened.²

What's both frustrating and promising is that the vast majority of these deaths are *preventable*.³

Now, these statistics are devastating, but for many Americans, this crisis is not just about data—it's personal.

As I have done this work, so many people have shared their own stories with me—losses and near misses, tragedies that should have been prevented.

Their memories motivated me to advance policy solutions to improve maternal health outcomes for ALL moms.

My team worked with public health experts, health care providers, and others on the frontlines of this crisis to develop a comprehensive solution to end these preventable deaths.

¹ <https://www.commonwealthfund.org/publications/issue-briefs/2024/jun/insights-us-maternal-mortality-crisis-international-comparison>

² <https://www.pbs.org/newshour/health/u-s-maternal-deaths-more-than-doubled-over-20-years-heres-who-fared-the-worst>

³ <https://www.cdc.gov/maternal-mortality/preventing-pregnancy-related-deaths/index.html>

It's called the Momnibus Act: a sweeping package of 14 evidence-based bills that address every driver of maternal mortality, morbidity, and disparities in America.

It includes investments to:

- Grow and diversify the perinatal workforce;
- Improve data collection;
- Fund community-based organizations;
- Address social determinants of health such as housing, nutrition, and healthy environments during and after pregnancy;
- And support moms with mental health conditions and substance use disorders.

The Momnibus is designed to SOLVE America's maternal health crisis.

Last Congress, when we introduced the Momnibus, we did so with more than TWO HUNDRED original cosponsors between the House and the Senate. And we are preparing to reintroduce it again in the coming weeks!

Eleven of the bills that make up the Momnibus are referred to this committee, and I am eager to work with you to advance them as soon as possible.

One of them, the Social Determinants for Moms Act, would provide funding to address factors that have a significant impact on health during and after pregnancy, such as housing, transportation, nutrition, and environmental conditions.

Another Momnibus bill, the Kira Johnson Act, would invest in community-based organizations working to advance maternal health equity and eliminate bias in maternity care.

The Perinatal Workforce Act would grow and diversify the maternal health workforce, including both clinical and non-clinical perinatal health workers such as nurses, midwives, physician assistants, and doulas.

If we want to save lives, we need reliable information to understand when and why complications occur, so the Data to Save Moms Act would improve maternal health data collection processes to help us advance evidence-based solutions to the mortality crisis.

The bipartisan Moms Matter Act would invest in mental health care and substance use disorder treatment during and after pregnancy—because mental health conditions, including suicide and overdoses, are one of the leading causes of pregnancy-related death.⁴

Another bipartisan bill, the Tech to Save Moms Act, would invest in digital tools like telehealth to reduce maternal mortality, morbidity, and disparities—particularly in rural and underserved communities.

The IMPACT to Save Moms Act would establish an alternative payment model demonstration project for perinatal care within the CMS Innovation Center, to promote equity and quality in maternal health outcomes for moms covered by Medicaid, which covers more than 4 in 10 births nationally and nearly half in rural communities.⁵

The Maternal Vaccination Act would fund a national campaign to increase maternal vaccination rates, particularly in communities with historically low vaccination rates, which is a proven strategy to keep moms and babies healthy.

⁴ <https://www.commonwealthfund.org/blog/2025/how-us-can-better-understand-and-prevent-maternal-deaths-related-substance-use>

⁵ <https://www.kff.org/medicaid/5-key-facts-about-medicaid-and-pregnancy/>

The Maternal Health Pandemic Response Act would strengthen federal programs that support maternal and infant health during public health emergencies like the COVID-19 pandemic, now and in the future.

The Protecting Moms and Babies Against Climate Change Act would address climate-related risks that we know are harming pregnant people, new moms, and infants, by reducing exposure to extreme heat, air pollution, and other environmental factors that impact health outcomes.

And finally, the bipartisan NIH IMPROVE Act would ensure consistent funding for research to reduce preventable causes of maternal deaths, eliminate disparities, and improve health for women before, during, and after pregnancy.

Each and every one of these bills would save lives. And if we want to end our nation's devastating maternal mortality crisis, we need to pass all of them.

Thank you again for the opportunity to work together on this urgent issue. American moms need our help—let's get this done.

I yield back.