



Federal Legislation to Improve Maternal Health: Summary and Status

Last Updated July 16, 2020

Bipartisan legislation was enacted in the 115th Congress to support maternal mortality review committees and increase the supply of maternal health providers in underserved areas. Members of the 116th Congress have built extensively on that progress. The table below summarizes bills introduced to improve maternal health outcomes and address persistent dire inequities, including much higher rates of maternal mortality and morbidity among Black and Indigenous versus white women.

Maternal Health Bills introduced in the 116th Congress

Bill	Lead Sponsor(s)	Summary	Status
Modernizing Obstetric Medicine Standards (MOMS) Act (S. 116)	Sen. Gillibrand (D-NY)	<ul style="list-style-type: none"> Authorizes funding for the <i>Alliance for Innovation on Maternal Health</i> (AIM) grant program — a national data-driven maternal safety and quality improvement initiative to implement obstetric emergency protocols and best practices to save mothers’ lives; and other maternity care improvement initiatives. 	Intr. in Senate Intr. 1.15.19

Bill	Lead Sponsor(s)	Summary	Status
<p>Quality Care for Moms and Babies Act</p> <p>(H.R. 1551, S.1960)</p>	<p>Rep. Engel (D-NY16)</p> <p>Rep. Stivers (R-OH15)</p> <p>Sen. Stabenow (D- MI)</p> <p>Sen. Collins (R-ME)</p>	<ul style="list-style-type: none"> • Directs U.S. Department of Health and Human Services (HHS) to work with relevant providers, specialty organizations, consumer organizations and other stakeholders to identify and publish a core set of maternity care quality measures for childbearing women and newborns; • Directs states to annually report on their use of these measures; • Awards grants to create electronic versions of existing measures; • Directs Agency for Health Care Research and Quality (AHRQ) to develop and use adaptations of the generic clinician, facility and health plan Consumer Assessment of Healthcare Providers and Systems Maternity surveys for childbearing women and newborns; • Authorizes the expansion or development of perinatal quality collaboratives. 	<p>Intr. in Senate & House</p> <p>Intr. 3.6.19</p>
<p>Mothers and Offspring Mortality and Morbidity Awareness (MOMMA's) Act</p> <p>(H.R. 1897, S. 916)</p>	<p>Rep. Kelly (D-IL02)</p> <p>Sen. Durbin (D-IL)</p>	<ul style="list-style-type: none"> • Extends Medicaid and Children's Health Insurance Program (CHIP) coverage to 1 year postpartum for women who have pregnancy- related Medicaid or CHIP coverage; • Authorizes funding to establish or support Regional Centers of Excellence for implicit bias and cultural competency education; • Standardizes maternal mortality and morbidity data collection across states; • Empowers the Centers for Disease Control and Prevention (CDC) to provide technical guidance and publish best practices for maternal mortality and morbidity prevention; • Authorizes funding for the <i>Alliance for Innovation on Maternal Health</i> grant program — a national data-driven maternal safety and quality improvement initiative to implement obstetric emergency protocols and best practices to save mothers' lives; • Awards grants to perinatal quality collaboratives for quality improvement activities; • Expands Medicaid and CHIP coverage of childbearing women to include oral health; • Prohibits imposing new restrictions on Medicaid and CHIP access to childbearing women; • Requires the Secretary of Health and Human Services to create a website to inform pregnant and postpartum women of benefits available to them under the Medicaid and CHIP programs; • Authorizes funding for a grant program to help states and hospitals implement the standardized maternal safety best practices developed by AIM; • Obtains reports from grantees and submits a report to Congress evaluating these provisions; • Encourages the CDC to work with states to compile data from state maternal mortality review committees to improve national surveillance. 	<p>Intr. in Senate & House</p> <p>Intr. 3.27.19</p>

Bill	Lead Sponsor(s)	Summary	Status
<p>Maximizing Outcomes for Moms through Medicaid Improvement and Enhancement of Services (MOMMIES) Act</p> <p>House title: Healthy MOMMIES Act</p> <p>(S. 1343, H.R. 2602)</p>	<p>Sen. Booker (D-NJ)</p> <p>Rep. Pressley (D-MA7)</p>	<ul style="list-style-type: none"> • Extends Medicaid and CHIP coverage of childbearing women to 1 year postpartum; • Requires Medicaid and CHIP to cover full medical benefits and oral health services for pregnant and postpartum women; • Establishes a maternity care home demonstration project; • Increases Medicaid primary care payments to at least Medicare rates; • Requires guidance and reports to increase access to doula services; • Requires U.S. Government Accountability Office (GAO) reports on maternal health care in the U.S. and on the use of telemedicine to increase access to maternity care; • Provides 100% Federal Medical Assistance Percentage (FMAP) for benefits and coverage provisions in bill; • Prohibits imposing new Medicaid restrictions on access for pregnant women; • Directs GAO to study coverage gaps of pregnant and postpartum women with Medicaid and CHIP, the ability of state Medicaid agencies to transition them to new coverage, and recommendations for reducing gaps in coverage. 	<p>Intr. in Senate & House</p> <p>Intr. 5.7.19</p>
<p>Healthy Maternal and Obstetric Medicine (Healthy MOM) Act</p> <p>(H.R. 2778, S. 1481)</p>	<p>Rep. Coleman (D-NJ)</p> <p>Sen. Brown (D-OH)</p>	<ul style="list-style-type: none"> • Creates a special enrollment period for pregnancy in most private insurance plans; • Ensures comprehensive maternity care for dependent children in most employment-based insurance; • Guarantees 12-months of continuous Medicaid eligibility for postpartum women; • Ensures that eligible unenrolled pregnant individuals may enroll in a Federal Employee Health Benefit Plan; • Prevents states from lowering the Medicaid income eligibility standard for pregnant women and infants below what it was in 2014. 	<p>Intr. in Senate & House</p> <p>Intr. 5.15.19</p>
<p>Maternal Care Access and Reducing Emergencies (Maternal CARE) Act</p> <p>(S. 1600, H.R. 2902)</p>	<p>Sen. Harris (D-CA)</p> <p>Rep. Adams (D-NC12)</p>	<ul style="list-style-type: none"> • Authorizes grant funding to health professional schools and training programs to support implicit bias training with priority given for training in obstetrics and gynecology; • Authorizes funding for a demonstration project to assist up to ten states to implement and sustain pregnancy medical home programs to incentivize integrated health care services; • Directs the National Academy of Medicine to study and make recommendations for incorporating bias recognition in clinical skills testing for U.S. medical schools. 	<p>Intr. in Senate & House</p> <p>Intr. 5.22.19</p>

Bill	Lead Sponsor(s)	Summary	Status
<p>Lower Health Care Costs Act, Sections 406-410</p> <p>(S. 1895)</p>	<p>Sen. Alexander (R-TN)</p> <p>Sen. Murray (D-WA)</p>	<ul style="list-style-type: none"> • Sec. 406 awards grants to identify, develop, or disseminate best practices to improve maternal health care quality and outcomes, and infant health outcomes; • Sec. 407 authorizes funding to award grants to health professional training programs to provide training to reduce and prevent discrimination in the provision of maternal health care services; • Sec. 408 requires HHS to conduct a study and make recommendations to health professional training programs on best training practices to reduce and prevent discrimination in providing maternal health care services; • Sec. 409 requires CDC to provide grants to support perinatal quality collaboratives in quality improvement activities to improve care and outcomes for childbearing women and their infants; • Sec. 410 awards grants to states, tribes, and tribal organizations to establish or operate programs to deliver integrated health care services to childbearing women to optimize their health and that of their infants. 	<p>Intr. in Senate</p> <p>Intr. 6.19.19</p> <p>Note: other sections address non-maternity provisions</p>
<p>Midwives for Maximizing Optimal Maternity Services (Midwives for MOMS) Act of 2019</p> <p>(H.R. 3849)</p>	<p>Rep. Roybal-Allard (D-CA40)</p> <p>Rep. Herrera Beutler (R-WA3)</p>	<ul style="list-style-type: none"> • Establishes a grant program through the Title VII Health Professional Training Programs for midwifery education at accredited midwifery schools or programs; • Establishes a grant program through the Title VIII Nursing Workforce Development Programs for midwifery education at accredited nurse-midwifery schools or programs; • For both new grant programs, awards grants to 1) support students in accredited midwifery schools or programs, 2) establish or expand accredited midwifery schools or programs, and 3) increase the number of qualified preceptors in accredited midwifery schools or programs; • For both new programs, prioritizes awarding grants to programs that can increase racial and ethnic diversity in midwifery education and educate students who plan to practice in health professional shortage areas. 	<p>Intr. in House</p> <p>Intr. 7.18.19</p>

Bill	Lead Sponsor(s)	Summary	Status
<p>Rural Maternal and Obstetric Modernization of Services (Rural MOMS) Act</p> <p>(S. 2373, H.R. 4243)</p>	<p>Sen. Smith (D-MN)</p> <p>Sen. Murkowski (R-AK)</p> <p>Rep. Torres Small (D-NM2)</p> <p>Rep. Newhouse (R-WA4)</p>	<ul style="list-style-type: none"> • Directs various units within HHS to improve rural maternal health and care data; • Awards grants to establish rural obstetric networks for quality improvement and innovation; • Awards grants for telehealth networks and resource centers; • Awards grants to train maternal care providers to work in rural; • Requires the Government Accountability Office to report to Congress on maternal care in rural areas. 	<p>Intr. in House</p> <p>Intr. 7.31.19.</p> <p>Notes: included in Maternal Health Quality Improvement Act (H.R. 4995)</p>
<p>Excellence in Maternal Health Act of 2019</p> <p>(H.R. 4215)</p>	<p>Rep. Bucshon (R-IN8)</p> <p>Rep. Carson (D-IN7)</p>	<ul style="list-style-type: none"> • Incorporates Sections 406-410 of the Lower Health Care Costs Act; • Adds specific funding amounts where the Lower Health Care Costs Act said "such sums as necessary." 	<p>Intr. in House</p> <p>Intr. 8.30.19</p> <p>Notes: Senate version, Maternal Outcomes Matter (MOM) Act, does not include authorization levels</p> <p>Also included in the Maternal Health Quality Improvement Act (H.R. 4995)</p>

Bill	Lead Sponsor(s)	Summary	Status
<p>Maternal Outcomes Matter (MOM) Act of 2019</p> <p>(S. 2596)</p>	<p>Sen. McSally (R-AZ)</p> <p>Sen. Jones (D-AL)</p>	<ul style="list-style-type: none"> • Incorporates Sections 406-410 of the Lower Health Care Costs Act. 	<p>Intr. in Senate</p> <p>Intr. 9.26.19</p> <p>Note: House version, Excellence in Maternal Health Act, includes authorization levels</p>
<p>Home Visiting to Reduce Maternal Mortality and Morbidity Act</p> <p>(H.R. 4768)</p>	<p>Rep. Davis (D-IL7)</p>	<ul style="list-style-type: none"> • Doubles the amount of funding annually appropriated to the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program to \$800 million by fiscal year 2022; • Prioritizes the additional MIECHV funding to address high rates of maternal mortality and morbidity and other state-identified needs; • Doubles the MIECHV tribal set-aside from 3 percent to 6 percent beginning in fiscal year 2021. 	<p>Intr. in House</p> <p>Intr. 10.21.19</p> <p>Note: included in the Elijah E. Cummings Lower Drug Costs Now Act (H.R. 3), which passed the House on 12.12.19</p>
<p>Maternal Health Quality Improvement Act of 2019</p> <p>(H.R. 4995)</p>	<p>Rep. Engel (D-NY16)</p> <p>Rep. Bucshon (R-IN8)</p>	<ul style="list-style-type: none"> • Incorporates the Rural Maternal and Obstetric Modernization of Services (MOMS) Act; • Incorporates the Excellence in Maternal Health Quality Improvement Act. 	<p>Intr. in House</p> <p>Intr. 11.8.19</p> <p>Note: approved by House Committee on Energy and Commerce on 11.19.19</p>

Bill	Lead Sponsor(s)	Summary	Status
<p>Helping Medicaid Offer Maternity Services (Helping MOMS) Act</p> <p>(H.R. 4996)</p>	<p>Rep. Kelly (D-IL02)</p> <p>Rep. Burgess (R-TX26)</p>	<ul style="list-style-type: none"> • Allows states to extend Medicaid and CHIP eligibility to 1 year postpartum and provides a 5 percent increase to a state's Federal Medical Assistance Percentage (FMAP) for the first year a state adopts the option; • Requires MACPAC to publish a report on the coverage of doula care under state Medicaid programs. 	<p>Intr. in House</p> <p>Intr. 11.8.19</p> <p>Note: approved by the House Committee on Energy and Commerce on 11.20.19.</p>
<p>Birth Access Benefitting Improved Essential Facility Services (BABIES) Act</p> <p>(H.R. 5189)</p>	<p>Rep. Clark (D-MA5)</p> <p>Rep. Carter (R-GA1)</p>	<ul style="list-style-type: none"> • Creates a Medicaid demonstration program to identify ways to improve access, quality, and scope of freestanding birth center services for women with low-risk pregnancies in underserved areas. This includes publishing criteria for participation, developing guidance for a potential payment evaluation, awarding planning grants, selecting up to 6 states, and writing a report to Congress; • Identifies sustainable payment models for birth center care. 	<p>Intr. in House</p> <p>Intr. 11.20.19</p>
<p>Data Mapping to Save Moms' Lives Act</p> <p>(S. 3152, H.R. 5640)</p>	<p>Sen. Rosen (D-NV)</p> <p>Sen. Fischer (R-NE)</p> <p>Rep. Butterfield (D-NC1)</p> <p>Rep. Gianforte (R-MT)</p>	<ul style="list-style-type: none"> • Uses data mapping tools developed by the Federal Communications Commission (FCC), with input from the CDC, to map areas in the U.S. that have both limited internet access and high rates of poor maternal health outcomes. 	<p>Intr. in Senate & House</p> <p>Intr. 1.16.20</p>

Bill	Lead Sponsor(s)	Summary	Status
<p>Black Maternal Health Momnibus Act of 2020: Title I. Social Determinants for Moms Act</p> <p>(H.R. 6132, S. 3424)</p>	<p>Rep. McBath (D-GA6)</p> <p>Rep. Underwood (D-IL14)</p> <p>Rep. Adams (D-NC12)</p> <p>Sen. Harris (D-CA)</p>	<ul style="list-style-type: none"> • Creates a task force that includes relevant HHS agencies, relevant federal departments, and essential community stakeholders to develop strategies to address social determinants of health that influence maternal health outcomes; • Authorizes National Academies of Sciences, Engineering, and Medicine to examine and analyze the impact of water and air quality, pollution levels, and exposure to extreme temperatures on maternal and infant health outcomes, with a particular focus on women of color; • Creates a grant program to support state, local, and Tribal health departments to address the social determinants of health needs of pregnant and postpartum women in their communities. 	<p>Intr. in Senate & House</p> <p>Intr. 3.9.20</p>
<p>Black Maternal Health Momnibus Act of 2020: Title II. Kira Johnson Act</p> <p>(H.R. 6144, S. 3424)</p>	<p>Rep. Adams (D-NC12)</p> <p>Rep. Underwood (D-IL14)</p> <p>Sen. Harris (D-CA)</p>	<ul style="list-style-type: none"> • Creates a grant program to support community-based organizations committed to preventing adverse maternal health outcomes for Black women through such efforts as perinatal health worker training, doula services, and investment in programs and services to alleviate adverse social risk; • Creates a grant program to implement training to address bias, racism, and discrimination in maternity care settings that impact Black women; • Authorizes a Government Accountability Office report to evaluate which hospitals have implemented Respectful Maternity Care Compliance Offices and assess the impact of the office have on maternal health outcomes. 	<p>Intr. in Senate & House</p> <p>Intr. 3.9.20</p>
<p>Black Maternal Health Momnibus Act of 2020: Title III. Protecting Moms Who Served Act</p> <p>(H.R. 6141, S. 3424)</p>	<p>Rep. Underwood (D-IL14)</p> <p>Rep. Bilirakis (R-FL12)</p> <p>Rep. Adams (D-NC12)</p>	<ul style="list-style-type: none"> • Provides funds to VA facilities for Maternity Care Coordination; • Requires states to list the veteran status of a mother in fetal death records and maternal mortality review committee (MMRC) reviews; • Authorizes a study on the scope of the maternal health crisis among women veterans, with a focus on women of color veterans. 	<p>Intr. in Senate & House</p> <p>Intr. 3.9.20</p>

Bill	Lead Sponsor(s)	Summary	Status
<p>Black Maternal Health Momnibus Act of 2020: Title IV. Perinatal Workforce Act</p> <p>(H.R. 6164, S. 3424)</p>	<p>Rep. Moore (D-WI4)</p> <p>Rep. Underwood (D-IL14)</p> <p>Rep. Adams (D-NC12)</p> <p>Sen. Harris (D-CA)</p>	<ul style="list-style-type: none"> • Requires HHS Secretary to provide guidance to states to educate providers and managed care entities about models for respectful maternity care; • Requires HHS Secretary to provide guidance to states to encourage health care entities to recruit and retain a racially and ethnically diverse maternity care workforce with training in implicit and explicit bias and anti-racism; • Requires HHS Secretary to provide guidance to states in encouraging diverse workforce composition, including midwives, doulas, lactation consultants, peer supporters, community health workers and navigators; • Requires NIH Director to prepare a study on best practices for culturally congruent maternity care; • Creates a grant program to start or expand schools or programs to educate and train individuals seeking appropriate licensing or certification, such as physician assistants, doulas, community health workers, peer supporters, lactation consultants, nutritionists, social workers, home visitors, and navigators, giving preference to students from communities experiencing high rates of maternal mortality and morbidity; • Creates a grant program to provide funding to accredited nursing schools to grow and diversify the perinatal nursing workforce; • Supports comprehensive examination for the grant program, with a focus on the program’s impact on diversifying the workforce nurse practitioners and clinical nurse specialists in areas with poor maternal health outcomes and in health professional shortage areas; • Requires the Government Accountability Office to report on barriers that prevent marginalized individuals– specifically women of color and low-income women – from pursuing careers as maternity care providers. 	<p>Intr. in Senate & House</p> <p>Intr. 3.9.20</p>

Bill	Lead Sponsor(s)	Summary	Status
<p>Black Maternal Health Momnibus Act of 2020: Title V. Data to Save Moms Act</p> <p>(H.R. 6165, S. 3424)</p>	<p>Rep. Davids (D-KS3)</p> <p>Rep. Underwood (D-IL14)</p> <p>Rep. Adams (D-NC12)</p> <p>Sen. Harris (D-CA)</p>	<ul style="list-style-type: none"> • Provides funding for Maternal Mortality Review Committees (MMRCs) to include community participation and representation and seek input from community members, with a focus on minority women • Provides funding to MMRCs to publicly report on their work and especially circumstances of minority women experiencing maternal mortality and diversification and community engagement of MMRCs; • Requires HHS Secretary to arrange for technical support to assist MMRCs with diversifying their membership and engaging communities. 	<p>Intr. in Senate & House</p> <p>Intr. 3.9.20</p>
<p>Black Maternal Health Momnibus Act of 2020: Title VI. Moms MATTER Act</p> <p>(H.R. 6143, S. 3424)</p>	<p>Rep. Kennedy (D-MA4)</p> <p>Rep. Underwood (D-IL14)</p> <p>Rep. Adams (D-NC12)</p> <p>Sen. Harris (D-CA)</p>	<ul style="list-style-type: none"> • Establishes a “Maternal Mental and Behavioral Health Task Force” to address issues like prenatal and postpartum depression, anxiety, and substance use disorder, with a particular focus on minority women; • Establishes a grant program, informed by recommendations from the Maternal Mental and Behavioral Health Task Force; • Establishes a grant program to support the establishment, expansion, and evaluation of group prenatal and postpartum care models; • Supports robust evaluation and reporting for activities funded through the grant program, with a particular focus on impacts on minority women. 	<p>Intr. in Senate & House</p> <p>Intr. 3.9.20</p>

Bill	Lead Sponsor(s)	Summary	Status
<p>Black Maternal Health Momnibus Act of 2020: Title VII. Justice for Incarcerated Moms Act</p> <p>(H.R. 6129, S. 3424)</p>	<p>Rep. Pressley (D-MA7)</p> <p>Rep. Underwood (D-IL14)</p> <p>Rep. Adams (D-NC12)</p> <p>Sen. Harris (D-CA)</p>	<ul style="list-style-type: none"> • Provides non-binding resolutions for proper care and dignity of mothers that is inclusive of gender identity; • Provides federal funding to states with laws that ban the use of restraints on incarcerated pregnant individuals (“shackling”) in state’s detention facilities through the Edward Byrne Memorial Justice Grant Program; • Provides funding to federal Bureau of Prisons facilities to create resources that include access to perinatal birth worker supports, healthy food, reentry assistance, pregnancy and childbirth education and parenting training, maternal-infant bonding opportunities, and trainings for correctional officers and medical personnel to ensure that pregnant incarcerated individuals receive care that promotes their health and safety; • Creates a grant program to promote improved standards of care for pregnant and postpartum incarcerated individuals in state and local prisons and jails; • Authorizes an in-depth and detailed study on the scope of the maternal health crisis among incarcerated individuals, focusing on effects of racial and ethnic disparities on maternal health outcomes in incarcerated pregnant individuals and providing recommendations; • Authorizes a study on how Medicaid coverage termination affects individuals when they become incarcerated and the potential maternal health implications of suspending, rather than terminating, coverage. 	<p>Intr. in Senate & House</p> <p>Intr. 3.9.20</p>
<p>Black Maternal Health Momnibus Act of 2020: Title VIII. Tech to Save Moms Act</p> <p>(H.R. 6138, S. 3424)</p>	<p>Rep. Johnson (D-TX3)</p> <p>Rep. Underwood (D-IL14)</p> <p>Rep. Adams (D-NC12)</p> <p>Sen. Harris (D-CA)</p>	<ul style="list-style-type: none"> • Adds a new clause to the list of possible Center for Medicare and Medicaid Innovation (CMMI) demonstration project models that would support the adoption and use of telehealth tools to support screening for and treatment of common pregnancy-related complications; • Creates grant programs to support the use of technology to develop and disseminate training programs for maternity care providers in underserved areas and areas with significant racial and ethnic disparities in maternal health outcomes; • Creates a grant program to promote access to telehealth tools for maternal health care to reduce racial and ethnic disparities in maternal health outcomes; • Directs the National Academies of Sciences, Engineering, and Medicine to conduct a study to review current and future uses of advanced technology in maternal health care to ensure that these technologies are free of racial or ethnic biases. 	<p>Intr. in Senate & House</p> <p>Intr. 3.9.20</p>

Bill	Lead Sponsor(s)	Summary	Status
<p>Black Maternal Health Momnibus Act of 2020: Title IX. IMPACT to Save Moms Act</p> <p>(H.R. 6137, S. 3424)</p>	<p>Rep. Schakowsky (D-IL9)</p> <p>Rep. Underwood (D-IL14)</p> <p>Rep. Adams (D-NC12)</p> <p>Sen. Harris (D-CA)</p>	<ul style="list-style-type: none"> • Directs CMMI to create and implement a perinatal care alternative payment model (APM) demonstration project, with input from a variety stakeholders. In modeling the demonstration project; • Directs CMMI to consider APMs that: improve maternal health outcomes for women of color; include methods to categorize patients by pregnancy risk level; consider freestanding birth centers; consider social determinants of health; and include racially, ethnically, and professionally diverse maternity care workers; • Directs the Medicaid and CHIP Payment and Access Commission to conduct a study on continuity of health insurance coverage for pregnant and postpartum women that considers presumptive eligibility for pregnant women while their Medicaid or CHIP application is being processed, makes recommendations to prevent disruptions in coverage for pregnant or postpartum women who need to change their health insurance plan, ensure ways for women who are qualified for Medicaid or CHIP for their pregnancy to remain eligible following their pregnancy; and makes recommendations to ensure continuity of coverage from pregnancy through 1 year from the end of pregnancy. 	<p>Intr. in Senate & House</p> <p>Intr. 3.9.20</p>
<p>TRICARE Coverage for Doula Support Act</p> <p>(S. 3826)</p>	<p>Sen. Blumenthal (D-CT)</p> <p>Sen. Gillibrand (D-NY)</p>	<ul style="list-style-type: none"> • Directs the Secretary of Defense to provide pregnant TRICARE beneficiaries with doula and other maternity support services without cost sharing; • Directs the Secretary to establish a diverse multi-stakeholder advisory committee to guide the Department of Defense in offering these benefits; • Directs the Secretary to annually survey TRICARE beneficiaries about their maternity experiences, needs and preferences, including with respect to doula support; • Directs the Secretary to annually report survey results to Congress. 	<p>Intr. in Senate</p> <p>Intr. 5.21.20</p>
<p>Military Moms' Mental Health Assessment Act</p> <p>(S. 3809)</p>	<p>Sen. Blumenthal (D-CT)</p> <p>Sen. Kaine (D-VA)</p>	<ul style="list-style-type: none"> • Directs the Comptroller General to carry out a study of maternal mental health conditions and needs of TRICARE beneficiaries (service members and their dependents), with recommendations for improving the maternal mental health of this population. 	<p>Intr. in Senate</p> <p>Intr. 5.21.20</p>

The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, reproductive health and rights, access to quality, affordable health care and policies that help all people meet the dual demands of work and family. More information is available at NationalPartnership.org.

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