May 5, 2022

The Honorable Patty Murray
Chairwoman, Senate Health, Education, Labor, and Pensions Committee
428 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Richard Burr
Ranking Member, Senate Health, Education, Labor, and Pensions Committee
428 Dirksen Senate Office Building
Washington, D.C. 20510

The Honorable Frank Pallone
Chairman, House Committee on Energy and Commerce, Subcommittee on Health
2125 Rayburn House Office Building
Washington, D.C. 20510

The Honorable Catherine McMorris Rodgers
Ranking Member, House Committee on Energy and Commerce, Subcommittee on Health
2125 Rayburn House Office Building
Washington, D.C. 20510

Dear Chairwoman Murray, Ranking Member Burr, Chairwoman Pallone, and Ranking Member McMorris Rodgers:

We, the 110+ undersigned organizations who represent and care for the health and wellness of mothers and babies in our country, are writing to urge the inclusion of three separate pieces of maternal mental health (MMH) legislation within the upcoming mental health packages to address MMH and substance use disorders (SUD) impacting individuals during pregnancy and first year following childbirth.

Tragically, suicide and overdose combined are the leading cause of death for new mothers.¹² MMH disorders are the most common complications of pregnancy and childbirth, affecting 1 in 5 pregnant women or new mothers, or 800,000 American families each year.³,⁴,⁵ However, only 25% of those impacted are identified and receive any treatment.⁶ Women who face racial or economic inequities experience MMH conditions at 2-3 times the rate of white or higher-income individuals, but are less likely to be identified or receive treatment.⁷,⁸ Untreated MMH disorders can have long-term negative impact on parent, baby, family, and society.⁹,¹⁰,¹¹,¹² The cost of not treating MMH disorders is $32,000 per mother/infant dyad, or $14 billion each year in addressing poor health outcomes of mother and baby, lost wages, and lowered productivity.¹³ The COVID-19 pandemic has fueled a three-fold increase in the number of women and childbearing individuals experiencing anxiety and depression during and following pregnancy.¹⁴

As you consider legislation to include in upcoming mental health packages, we urge you to include three bipartisan bills to address the gaps in MMH systems and care at the national, state, and local levels:

I. **TRIUMPH for New Moms Act (S. 2779 / H.R. 4217).** Currently there are no Federal Commissions, Coordinating Committees, or Task Forces that address, coordinate, or create a national strategy for maternal mental health, leaving missed cost-saving opportunities to address these disorders. This bipartisan, no cost legislation will close the gaps in current federal MMH coordination by establishing a Task Force to develop a national strategy and recommendations to Governors. This will align federal and state actors on how to utilize existing programs, eliminate duplication, and identify opportunities to integrate MMH into existing federal programs.

II. **Into the Light for Maternal Mental Health and Substance Use Disorders Act (S. 3824 / H.R. 7073).** This legislation is designed to ensure mothers continue being screened and treated by their health care providers and have mental health support in between these visits. Into the Light will reauthorize and expand Health Resources and Services Administration (HRSA) grants to states to create and maintain programs to address MMH and SUD, and maintain the dedicated 24/7/365 MMH hotline.

III. **Moms Matter Act (S. 484 / H.R. 909).** This legislation will address the unique MMH needs of racially and ethnically diverse mothers by expanding prevention, collaborative care, and access to treatment. It will also support mothers in these communities by increasing and diversifying the workforce and investing in community-based programs.

We urge you to include these three bipartisan bills within the upcoming mental health packages to help ensure that mothers will have access to the mental health care that they – and their babies – need to thrive.

Sincerely,

2020 Mom
Maternal Mental Health Leadership Alliance
Shades of Blue Project
&Mother
American Association for Psychoanalysis in Clinical Social Work
American College of Obstetricians and Gynecologists
American Counseling Association
American Foundation for Suicide Prevention
American Psychiatric Association
Arbit Counseling
Bazelon Center for Mental Health Law
Bethesda Women's Mental Health

Beyond the Baby Blues
Center for Postpartum Health
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Dartmouth Hitchcock Medical Center
EmmaWell
Every Mother Counts
Families USA
Florida State University
Forward Wellness Counseling and Consulting, LLC
Global Alliance for Behavioral Health and Social Justice
Great Lakes Perinatal Wellness
Hand to Hold
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Postpartum Support International (PSI)
Psychotherapy Action Network
RAISE Consulting
Repro Psych Trainees
Return to Zero: HOPE
RI International, Inc.
Seven Starling
Shoshana Center for Repro Health Psychology PLLC
Society for Women's Health Research
Source Psychotherapy
Star Legacy Foundation
Susan Benjamin Feingold PsyD and Associates LLC
The Colette Louise Tisdahl Foundation
The Ohio State University
UCONN Health

University of Illinois at Chicago
University of Minnesota
University of Missouri
University of Missouri School of Medicine, Department of Psychiatry
University of Nebraska-Lincoln
University of New Mexico
University of Pennsylvania
University of Pittsburgh Department of Psychiatry
University of Washington
Vermont Center for Children, Youth and Families
Virginia Affiliate of the American College of Nurse-Midwives
Waverly Health Center Behavioral Health Department
Werk it Moms LLC
Women & Infants Hospital of Rhode Island
Women's Wellbeing Program, University of Minnesota MHealth Fairview, Department of Psychiatry and Behavioral Health
Yale School of Public Health
Zero to Three