

## Lobbying for women's health

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Written By  
Michelle Brown, MD

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The maternal mortality rate in the United States is on the rise, the only industrialized nation where this is the case. Between 2000 and 2014, the maternal mortality rate in the U.S. rose by 26 percent. Additionally, there are significant health care disparities in maternal mortality — non-Hispanic black women are nearly four times more likely to die from pregnancy-related complications than white women. It is estimated that approximately 50 percent of maternal deaths are from preventable causes, such as hypertensive disorders and hemorrhage.

In order to start reversing this disturbing trend, however, we need a thorough investigation into the causes and complicated factors involved in each maternal death. While 33 states, including Illinois, have initiated Maternal Mortality Review Committees (MMRCs), those committees have varying degrees of state support, and 17 states have no formal process for investigating maternal deaths at all.

Physician advocacy has become increasingly important as states have passed an array of legislation that ranges from restrictions on which

procedures can be performed to limitations on Medicaid access. The 2010 passage of the Affordable Care Act led to increased contraception access for patients, but recently there have been federal rule changes that have threatened that progress. Title X facilities, which administer federal family planning dollars, have changed their requirements for administering funding to organizations that favor less effective contraception methods. Women are especially vulnerable to legislative action, as around 42 percent of all births in the US are covered by Medicaid (and thus depend on state and federal funding).

In March 2018, myself and three other OB-GYN residents from the University of Chicago Medicine traveled to Washington D.C. to participate in the Congressional Leadership Conference (CLC), hosted by the American College of Obstetricians and Gynecologists (ACOG). The CLC is an annual meeting that aims to increase physician involvement in legislative advocacy. ACOG feels strongly that physician voices are critical in the ongoing legislative conversation around patient care and health care access, and the CLC aims to educate physicians on how to be effective advocates for their patients and practices.

The CLC serves as a “lobbying boot camp” for ACOG members, where hundreds of OB/Gyns from across the country come together to learn about ACOG’s legislative priorities and about effective techniques for legislative advocacy. We receive 2 days of education on the issues we’re lobbying for, followed by practice sessions that feature mock meetings with representatives to learn about proper Capitol Hill etiquette. We are taught techniques for crafting a compelling patient story and are counseled on tips for making the meetings most effective. On the final day of the conference, ACOG organizes the entire group of attendees to meet with our Senators, Representatives, and their staff to discuss legislative issues relevant to our patients.

This year, our legislative “asks” were focused on two key issues: Reducing the rising maternal mortality rate by establishing funding for maternal mortality review committees, and emphasizing the importance of continued support for Medicaid programs.

On our visit to Capitol Hill, we asked for co-sponsorship on S. 1112 and H.R. 1318, complimentary bills that seek to provide \$7 million of federal funding to help support Maternal Mortality Review Committees in all 50

states. With the help of federal funding, we can better support states in investigating these tragic events to gather more data on the causes of maternal deaths and start implementing measures to make the United States a safer place for pregnant women.

Our second legislative “ask” centered around emphasizing the importance of protecting Medicaid access and funding. Medicaid in this country is a women’s health success story — 42 percent of births in the US, and 50 percent in the state of Illinois, are covered by Medicaid. Without this coverage, women who are otherwise uninsured would be unable to access lifesaving prenatal care. Additionally, the Medicaid expansion that came with the passage of the Affordable Care Act has reduced the uninsured rate among women ages 18-64 by nearly half, from 19.3 percent to 10.8 percent in five years. This has allowed more women access to critical preventative care, such as annual well-woman exams, sexually transmitted infection screening and treatment, and cervical cancer screening.

Currently, Medicaid is facing a range of proposals in several states that aim to cut enrollment and limit access. These include proposals such as block grants for states, per capita maximums, and prohibiting certain women’s health providers such as Planned Parenthood from accepting Medicaid dollars for providing women’s preventive care. While meeting with our Senators and Representatives, we urged them to consider the importance of Medicaid for women’s health and to fight back against measures that limit access to healthcare.

This year, more than 600 OB-GYNs came together to learn how to be better advocates for our patients. We were proud to be among those physicians who lobbied on the Hill, and look forward to taking the lessons we learned back to Chicago to advocate for those here at home.

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Michelle Brown, MD

Michelle Brown, MD, is a resident physician in the Department of Obstetrics and Gynecology.



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