

117TH CONGRESS
2D SESSION

H. R. 6612

To amend title XIX of the Social Security Act to provide a higher Federal matching rate for increased expenditures under Medicaid for maternal health care services.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 4, 2022

Ms. MANNING (for herself, Ms. ADAMS, Ms. UNDERWOOD, Ms. ROSS, Mrs. MCBATH, Ms. SCANLON, Ms. ROYBAL-ALLARD, Mrs. LAWRENCE, Ms. BASS, Ms. BARRAGÁN, Ms. LEE of California, Ms. JACOBS of California, Ms. SEWELL, Ms. MENG, Ms. GARCIA of Texas, Mrs. HAYES, Ms. MOORE of Wisconsin, and Ms. CLARKE of New York) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend title XIX of the Social Security Act to provide a higher Federal matching rate for increased expenditures under Medicaid for maternal health care services.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Advancing Maternal
5 Health Equity Under Medicaid Act”.

1 **SEC. 2. HIGHER FMAP FOR INCREASED EXPENDITURES**
2 **UNDER MEDICAID FOR MATERNAL HEALTH**
3 **SERVICES.**

4 Section 1903 of the Social Security Act (42 U.S.C.
5 1396b) is amended—

6 (1) in subsection (a)(5)—

7 (A) by striking “an amount equal” and in-
8 serting “(A) an amount equal”; and

9 (B) by adding at the end the following:
10 “and

11 “(B) for calendar quarters beginning on or
12 after January 1 of the year beginning after one
13 year after the date of the enactment of this
14 subparagraph, an amount equal to 90 percent
15 of the amounts by which—

16 “(i) the sum of the amounts expended
17 which are attributable to the offering, ar-
18 ranging, and furnishing (directly or on a
19 contract basis) under the State plan (or
20 waiver of the plan) of maternal health care
21 services (as described in subsection
22 (b)(6)(B)) for such quarter, exceeds

23 “(ii) the sum of the amounts ex-
24 pended which are attributable to the offer-
25 ing, arranging, and furnishing (directly or
26 on a contract basis) under the State plan

1 (or waiver of the plan) of such services for
2 the corresponding quarter in the four-quar-
3 ter period ending on December 31, 2021,
4 plus”; and

5 (2) in subsection (b), by adding at the end the
6 following new paragraph:

7 “(6) ACCOUNTABILITY AND MAINTENANCE OF
8 EFFORT REQUIREMENTS FOR ADDITIONAL FEDERAL
9 FUNDING FOR INCREASED EXPENDITURES FOR MA-
10 TERNAL HEALTH CARE SERVICES.—

11 “(A) IN GENERAL.—As conditions for re-
12 ceiving the funds the Secretary is otherwise ob-
13 ligated to pay to a State under subsection
14 (a)(5)(B), a State shall meet the following re-
15 quirements:

16 “(i) SUPPLEMENT, NOT SUPPLANT.—
17 The State shall use the funds received
18 under such subsection to supplement, not
19 supplant, the level of State funds expended
20 for the offering, arranging, and furnishing
21 (directly or on a contract basis) under the
22 State plan (or under a waiver of the plan)
23 of maternal health care services (as de-
24 scribed in subparagraph (B)) through pro-

grams and activities in effect as of January 1, 2022.

“(ii) USE OF FUNDS FOR ACTIVITIES THAT IMPROVE DELIVERY OF MATERNAL HEALTH CARE SERVICES.—The State shall use the funds received under such subsection for activities that increase the capacity, efficiency, and quality in the provision of maternal health care services.

“(B) DEFINITIONS.—For purposes of this paragraph and subsection (a)(5)(B):

“(i) MATERNAL HEALTH CARE SERVICES.—Maternal health care services described in this subparagraph are services furnished by a maternity care provider or perinatal health worker, such as the following:

“(I) Prenatal, labor and delivery, and postpartum health care services that are furnished in a licensed and accredited hospital, birth center, midwifery practice, or other health care practice that provides prenatal services, labor and delivery services, and postpartum services.

1 “(II) Telehealth services during
2 the prenatal and postpartum periods.

3 “(III) Home visiting services dur-
4 ing the prenatal and postpartum peri-
5 ods.

6 “(IV) Mental or behavioral health
7 care services for individuals during
8 the prenatal and postpartum periods.

9 “(ii) MATERNITY CARE PROVIDER.—
10 The term ‘maternity care provider’ means
11 a health care provider who—

12 “(I) is a physician, physician as-
13 sistant, midwife who meets at a min-
14 imum the international definition of
15 the midwife and global standards for
16 midwifery education as established by
17 the International Confederation of
18 Midwives, nurse practitioner, or clin-
19 ical nurse specialist; and

20 “(II) has a focus on maternal or
21 perinatal health.

22 “(iii) PERINATAL HEALTH WORKER.—
23 The term ‘perinatal health worker’ means
24 a doula, community health worker,
25 breastfeeding and lactation educator or

1 counselor, nutritionist or dietitian, child-
2 birth educator, social worker, home visitor,
3 or language interpreter.

4 “(iv) POSTPARTUM AND POSTPARTUM
5 PERIOD.—The terms ‘postpartum’ and
6 ‘postpartum period’ each refer to the 1-
7 year period beginning on the last day of
8 the pregnancy of an individual.”.

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