



**House Human Services Committee  
Testimony by Moss Hampton, MD  
In Favor of House Bill 744 by Rep. Toni Rose  
March 19, 2019**

Testimony submitted on behalf of  
Texas Medical Association  
Texas Academy of Family Physicians  
Texas Pediatric Society  
American College of Obstetricians and Gynecologists – District XI (Texas)  
Texas Association of Obstetricians and Gynecologists

Good afternoon Chairman Frank, Vice Chair Hinojosa, and Committee Members. Thank you for the opportunity to testify in favor of House Bill 744. I am Moss Hampton, MD, a practicing obstetrician-gynecologist from Lubbock speaking today on behalf of the Texas Medical Association, Texas Association of Obstetricians and Gynecologists, American College of Obstetricians and Gynecologists-Texas Chapter, and the societies representing family physicians and pediatricians.

Every day across Texas, there are heartbreaking stories of mothers taken from their families due to preventable, pregnancy-related deaths. Or stories of new mothers so overwhelmed by postpartum depression that they are unable to nurture and care for their babies. These stories are not fiction. They are happening here in Texas, and we must act now to improve birth outcomes.

According to the state's September 2018 report on maternal mortality and morbidity,<sup>i</sup> **women's lack of access to regular preventive, primary, and specialty care before and after pregnancy contributes to Texas' high rates of poor maternal health outcomes.** Moreover:

- The vast majority of pregnancy-related deaths are potentially preventable.
- Most maternal deaths occur 60 days or more postpartum, a time when many women lose their pregnancy-related Medicaid services.
- Drug overdoses continue to be the No. 1 cause for maternal death after 60 days postpartum.
- Smoking during pregnancy or the presence of an underlying chronic condition(s), such as diabetes or hypertension, puts women at greater risk of maternal death or postpartum complications, key indicators that prepregnancy coverage remains a barrier to improving women's health.
- Black women experience the highest rate of maternal death and severe illness.
- Factors that contribute to health inequities, including low educational attainment, contribute to poor maternal health outcomes.

***Maternal deaths are only one part of the story. For every one maternal death, 50 to 100 women suffer a severe illness or complication.***

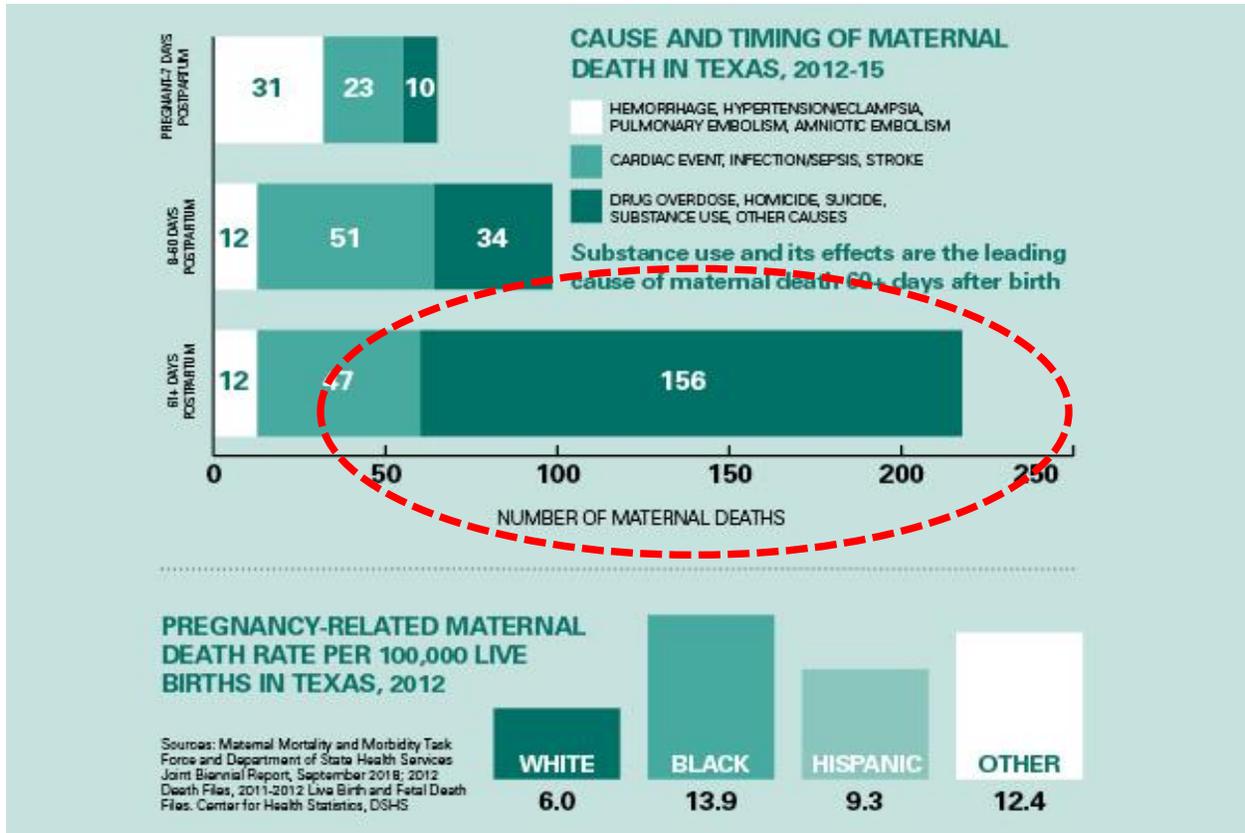
Let's discuss how untreated diabetes or hypertension affects mothers and babies. The prevalence of both diseases among young women continues to grow. When uncontrolled, these illnesses are devastating for anyone. However, among women of reproductive age the effect is magnified. **Unmanaged diabetes, for example, increases several fold the risk of birth defects, such as neural tube abnormalities, miscarriage, and preterm birth.** Yet if women receive early diagnosis and comprehensive treatment and management of chronic diseases **before** pregnancy, these poor birth outcomes can be dramatically reduced, thus improving the lives of mothers and babies while also reducing Medicaid costs.

Healthy pregnancies begin in the years and months before conception. While low-income Texas women do have access to preventive and *basic* primary care through the Healthy Texas Women's program – a program we support – the program does not provide the full array of benefits needed to ensure women get the care they need to promote positive birth outcomes for themselves and their babies.

Through the legislature's ongoing bipartisan commitment to improving maternal health, Texas has the will and ability to change. And it is making strides. **Nevertheless, to make dramatic gains in maternal health outcomes, the legislature also must build on previous maternal health initiatives, starting with ensuring that women have access to preventive, primary, and specialty care before and after pregnancy.**

**To that end, we ask you to support HB 744.**

Thank you for the opportunity to testify.



<sup>i</sup> Joint Biennial Report of the Maternal Mortality and Morbidity Task Force and the Department of State Health Services, September 2018, [https://www.dshs.texas.gov/mch/maternal\\_mortality\\_and\\_morbidity.shtm](https://www.dshs.texas.gov/mch/maternal_mortality_and_morbidity.shtm)