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March 16, 2026

Jeffrey M. Zirger, PhD

Acting Deputy Director, Office of Public Health Ethics and Regulations
Information Collection Review Office
Centers for Disease Control and Prevention
Department of Health and Human Services
1600 Clifton Road NE, MS H21-8
Atlanta, Georgia 30329

Re: The Maternal Mortality Review Information Application (MMRIA) (OMB Control No. 0920-1294, Exp. 05/31/2026)—Revision—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Dear Dr. Zirger:

The American Psychiatric Association (APA), the national medical specialty society representing over 39,200 psychiatric physicians and their patients, appreciates the opportunity to comment on the proposed revision information collection project titled Maternal Mortality Review Information Application (MMRIA). APA recognizes that maternal mental health has a direct correlation to maternal mortality and addressing the causes will have a positive impact on families across the United States. **We are writing in strong support of the continuation of the MMRIA.**

The United States has the highest maternal mortality rate of any industrialized country, and it has more than doubled over the past two decades. Data has shown that underlying mental health conditions, including substance use disorders, are the leading cause of maternal mortality and morbidity. While one in five pregnant and postpartum women will experience mental health conditions, only 25% of them will receive treatment. Untreated maternal MH/SUD is associated with high-risk pregnancy and a range of negative outcomes for the pregnant person and their offspring, including spontaneous abortions, fetal distress, preterm birth, and negative neurodevelopmental trajectory. Furthermore, maternal mortality is costing the United States over \$30 billion a year as of 2019, which any interruption in the collection of data and research would be sure to exacerbate.

APA supports mental health screening, treatment, and support for perinatal patients and for Medicaid coverage to extend to one year post-delivery to support

improvement in both maternal and child health outcomes.^{1,2} From advocating for the National Maternal Mental Health Healthline to its Perinatal Mental Health Toolkit, APA has consistently been a champion of maternal mental health and its associated research. We have expressed strong support for the Preventing Maternal Deaths Reauthorization ACT (PMDA), legislation that supports the Maternal Mortality Review Committees (MMRCs) who are responsible for data collection and analysis for MMRIA. MMRCs consist of representatives in public health, obstetrics and gynecology, maternal-fetal medicine, nursing, midwifery, forensic pathology, mental and behavioral health, patient advocacy groups and community-based organizations. MMRCs are vitally important to help Congress and Americans understand the size and scope of the current maternal mortality crisis.

MMRCs review data from various sources including autopsy reports and informant interviews and form comprehensive conclusions using clinical and nonclinical factors.³ They examine maternal deaths up to a year postpartum, a critical period for maternal health. This collection of data is detailed, unbiased, and can inform targeted interventions. It is a multidisciplinary review that cannot be replaced solely by statistics or claims data. For example, A 2018 report was able to reveal cardiovascular and coronary conditions followed by hemorrhage as the leading cause of pregnancy death and led the committees to concrete recommendations including improvement of physician training, coordination between providers, and standards regarding assessment, diagnosis, and treatment decisions.⁴ MMRCs used mental health condition checkboxes in their data insertion which showed that mental health conditions and substance use can contribute to deaths even when they are not the underlying cause.⁴ Subsequently, a 2024 report revealed mental health conditions as the leading underlying cause of pregnancy-related deaths across race and ethnicity.⁵

These valuable results require no additional cost than the time spent by the assigned CDC jurisdictions and are foundational in the prevention of maternal mortality. The continuation of the MMRIA is essential to collect and analyze data on maternal deaths to identify disparities in maternal health outcomes, access issues, and policy solutions for future, preventable deaths, which the Centers for Disease Control and Prevention (CDC) identifies as 80% of pregnancy related deaths.⁶

APA supports the CDC's request that the Office of Management and Budget (OMB) approve the estimated 41,789 annual burden hours to continue the MMRIA data collection project.

¹ American Psychiatric Association. (Dec 2025). Position Statement on Screening and Treatment of Mood and Anxiety Disorders During Pregnancy and Postpartum. <https://www.psychiatry.org/getattachment/bf2c29a1-98f5-4c8f-9e4a-4119fa64bcca/Position-Pregnancy-Postpartum-Mood-Anxiety-Disorders.pdf>

² American Psychiatric Association. (Dec 2025). Position Statement on Medicaid Coverage for Maternal Postpartum Care. <https://www.psychiatry.org/getattachment/490aa3ec-1ff4-43b1-ac9a-f516d2a708b2/Position-Medicaid-Coverage-Postpartum.pdf>

³ The American College of Obstetricians and Gynecologists. (April 2025). Issue brief: Maternal mortality review committees. The American College of Obstetricians and Gynecologists. <https://www.acog.org/advocacy/policy-priorities/maternal-mortality-prevention/issue-brief-maternal-mortality-review-committees>

⁴ Building U.S. Capacity to Review and Prevent Maternal Deaths. (2018). Report from nine maternal mortality review committees. Retrieved from [ReportfromNineMMRCs.pdf](#)

⁵ Centers for Disease Control and Prevention. (May 2024). Pregnancy-Related Deaths: Data From Maternal Mortality Review Committees in 36 U.S. States, 2017–2019 [Pregnancy-Related Deaths: Data From Maternal Mortality Review Committees in 36 U.S. States, 2017–2019 | Maternal Mortality Prevention | CDC](#)

⁶ Centers for Disease Control and Prevention. (n.d.). Preventing pregnancy-related deaths. Centers for Disease Control and Prevention. <https://www.cdc.gov/maternal-mortality/preventing-pregnancy-related-deaths/index.html>

Thank you for the opportunity to provide, and for your consideration of, these comments. Please contact egershenson@psych.org with any questions or for more information.

Sincerely,



MD, MBA, FAPA

Marketa Wills, MD, MBA, FAPA
CEO and Medical Director
American Psychiatric Association