



**Department of  
Obstetrics and Gynecology**

UNIVERSITY OF WISCONSIN  
SCHOOL OF MEDICINE AND PUBLIC HEALTH

March 13, 2023

Jeffrey M. Zirger  
Information Collection Review Office  
Centers for Disease Control and Prevention  
1600 Clifton Road NE, MS H21-8  
Atlanta, Georgia 30329

RE: Maternal Mortality Review Information Application Docket No. CDC-2022-0143

Dear Mr. Zirger,

Thank you for the opportunity to comment. As the Chair of the University of Wisconsin Department of Obstetrics & Gynecology, and in consultation with key faculty and staff, I am pleased to offer my full support for the CDC's **Maternal Mortality Review Information Application (MMRIA)**.

The United States has a higher maternal mortality rate than other high-income countries; in 2020, our rate was three times higher than other high-income countries.<sup>1</sup> While maternal mortality rates are decreasing in most of the world, maternal deaths have been increasing in the United States, especially since 2015.<sup>2</sup> The overall maternal mortality rate in this country is unacceptable, even more unacceptable is the wide disparity in rate by race and ethnicity. In 2020, the maternal mortality rate for non-Hispanic Black birthing people was 2.9 times the rate for non-Hispanic White birthing people. Rates for non-Hispanic Black birthing people were significantly higher than rates for non-Hispanic White and Hispanic birthing people. The increases from 2019 to 2020 for non-Hispanic Black and Hispanic birthing people were significant.<sup>3</sup>

In Wisconsin, disparities are even worse. When considering the pregnancy-related mortality ratio (PRMR), Wisconsin has a lower PRMR than the nation, however the disparity between Black and White birthing people in Wisconsin is greater. During 2006-2010, the PRMR among non-Hispanic Black birthing people was 5.0 times the PRMR among non-Hispanic White birthing people in Wisconsin, compared to 3.2 times the PRMR among non-Hispanic White birthing people in the U.S.<sup>4</sup> Comprehensive review of these deaths is a crucial part of Wisconsin's effort to reduce maternal mortality and improve the quality of care.

The University of Wisconsin Department of Obstetrics & Gynecology is dedicated to reducing pregnancy-related deaths and optimizing the health and well-being of birthing persons by providing excellent clinical care, educating the next generation of obstetricians, and conducting cutting edge basic science, clinical and applied population research. Our department fully supports the Wisconsin Maternal Mortality Review Process. Several members of our faculty, adjunct faculty and residents have served and/or are currently serving on the Wisconsin Maternal Mortality Review Committee. The **Maternal Mortality Review Information Application (MMRIA)** is a critical component of the review process, and we support the continuation of the MMRIA as specified in the CDC's request for revision. Wisconsin and other participating states benefit from the MMRIA standardized approach to the review process, consistent data gathering and analytics, and tools for decision making and developing actionable recommendations.

MMRIA is our primary data system in Wisconsin. The Maternal Mortality Review Committee uses MMRIA for abstraction and case summaries, as well as overall mortality review data gathering. It has been a useful data system for our state health department and for our review committee. The Wisconsin Maternal Mortality Review Committee reviewed 80 pregnancy-associated deaths that occurred in 2016-2017 and determined that 41% were pregnancy-related. Nearly all of these deaths; 97%, were preventable.<sup>5</sup> Through our participation in MMRIA, Wisconsin's data was included with 35 other states in a review of pregnancy-related deaths, adding to our national understanding of the demographics, timing, causes and preventability of pregnancy-related deaths.<sup>6</sup> This is the type of data we need in order to identify the main causes and contributors to pregnancy-related deaths and to formulate appropriate recommendations and implement strategies to prevent future deaths.

In summary, most pregnancy-related deaths are preventable. It is incumbent on us to maintain a robust national reporting system to assist state review teams and to analyze what is happening to identify solutions to prevent deaths. The MMRIA is a robust system, and the proposed revisions will strengthen it further, providing high quality data for clinicians, public health experts, community advocates and researchers to further explore how to improve outcomes and eliminate inequities.

Sincerely,



Ellen Hartenbach MD

*Chair and Professor, Department of Obstetrics and Gynecology*  
*Ben Miller Peckham, MD, PhD, Chair in Obstetrics and Gynecology*  
University of Wisconsin School of Medicine and Public Health

#### References:

1. Munira Z. Gunja, Evan D. Gumas, and Reginald D. Williams II. New Data Shows U.S. Maternal Mortality Rate Exceeds That in Other High-Income Countries. *To the Point* (blog), Commonwealth Fund, Dec. 1, 2022. <https://doi.org/10.26099/8vem-fc65>
2. Global Burden of Disease 2015 Maternal Mortality Collaborators, Global, Regional, and National Levels of Maternal Mortality, 1990–2015: A Systematic Analysis for the Global Burden of Disease Study 2015, *The Lancet* 388 (2016): 1775–1812
3. Hoyert DL. Maternal mortality rates in the United States, 2020. NCHS Health E-Stats. 2022. DOI: <https://dx.doi.org/10.15620/cdc:113967>
4. Wisconsin Department of Health Services. <https://dhs.wisconsin.gov/mch/maternal-mortality-and-morbidity.htm> Accessed 3/9/2023.
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6. Trost SL, Beauregard J, Njie F, et al. Pregnancy-Related Deaths: Data from Maternal Mortality Review Committees in 36 US States, 2017–2019. Atlanta, GA: Centers for Disease Control and Prevention, US Department of Health and Human Services; 2022.