

# Congress of the United States

## House of Representatives

COMMITTEE ON OVERSIGHT AND ACCOUNTABILITY

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December 19, 2024

Jennifer Shuford, MD, MPH  
Commissioner of Public Health  
Texas Department of State Health Services  
1100 West 49th Street  
Austin, TX 78756-3199

Dear Commissioner Shuford:

We write to express our deep concerns regarding the Texas Maternal Mortality and Morbidity Review Committee's (MMMRC) recent decision to forgo a review of pregnancy-related deaths between 2022 and 2023, contrary to Texas state law.<sup>1</sup> In September 2021, Texas enacted a law—Senate Bill 8—that effectively banned abortion after six weeks gestation followed by an even stricter ban in June 2022 in the wake of the Supreme Court's decision in *Dobbs v. Jackson Women's Health Organization*.<sup>2</sup> We are concerned that the MMMRC is choosing to forego data review for the period after Texas imposed these restrictions on abortion due to a chilling effect on reproductive care in Texas that means fewer women are able to access emergency, life-saving reproductive health care services.<sup>3</sup>

Access to reproductive health care and abortion care has declined significantly in recent years due to abortion restrictions upheld and enabled by the U.S. Supreme Court. In September 2021, the State of Texas' Senate Bill 8 went into effect, banning abortion at approximately six weeks and allowing private citizens to report on the reproductive health care decisions of their friends and neighbors.<sup>4</sup> In 2021, Texas also enacted a “trigger law” that would make performing

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<sup>1</sup> *Texas Committee Won't Examine Maternal Deaths in First Years After Abortion Ban*, Washington Post (Nov. 26, 2024) (online at [www.washingtonpost.com/investigations/2024/11/26/texas-committee-wont-examine-maternal-deaths-first-years-after-abortion-ban/](https://www.washingtonpost.com/investigations/2024/11/26/texas-committee-wont-examine-maternal-deaths-first-years-after-abortion-ban/)).

<sup>2</sup> See *Texas Law Banning Abortion as Early as Six Weeks Goes into Effect as the U.S. Supreme Court Takes No Action*, Texas Tribune (Sept. 1, 2021) (online at [www.texastribune.org/2021/08/31/texas-abortion-law-supreme-court/](https://www.texastribune.org/2021/08/31/texas-abortion-law-supreme-court/)); *New Texas Law Increasing Penalties for Abortion Providers Goes into Effect Aug. 25*, Texas Tribune (July 27, 2022) (online at [www.texastribune.org/2022/07/26/texas-abortion-ban-dobbs/](https://www.texastribune.org/2022/07/26/texas-abortion-ban-dobbs/)).

<sup>3</sup> *Texas Committee Won't Examine Maternal Deaths in First Years After Abortion Ban*, Washington Post (Nov. 26, 2024) (online at [www.washingtonpost.com/investigations/2024/11/26/texas-committee-wont-examine-maternal-deaths-first-years-after-abortion-ban/](https://www.washingtonpost.com/investigations/2024/11/26/texas-committee-wont-examine-maternal-deaths-first-years-after-abortion-ban/)).

<sup>4</sup> *Texas Law Banning Abortion as Early as Six Weeks Goes into Effect as the U.S. Supreme Court Takes No Action*, Texas Tribune (Sept. 1, 2021) (online at [www.texastribune.org/2021/08/31/texas-abortion-law-supreme-court/](https://www.texastribune.org/2021/08/31/texas-abortion-law-supreme-court/)).

an abortion a felony punishable by up to life in prison and would take effect if the U.S. Supreme Court overturned *Roe v. Wade*.<sup>5</sup> On June 24, 2022—the same day the U.S. Supreme Court overturned *Roe v. Wade*—Texas’ trigger law went into effect.<sup>6</sup> The law is extremely restrictive and only provides exceptions in cases where there is “a life-threatening physical condition aggravated by, caused by, or arising from a pregnancy that places the [pregnant] female at risk of death or poses a serious risk of substantial impairment of a major bodily function unless the abortion is performed or induced.”<sup>7</sup>

Despite global progress over the past two decades, maternal deaths in the United States have risen—particularly in Texas and other states with abortion restrictions.<sup>8</sup> The Texas Health and Safety Code requires MMMRC to study and review “trends, rates, or disparities in pregnancy-related deaths and severe maternal morbidity; factors that disproportionately affect the most at-risk population; and best practices and programs operating in other states with reduced pregnancy-related death rates.”<sup>9</sup> According to MMMRC’s most recent report, in 2020 the number of women in Texas who experienced a pregnancy-related death rose sharply to the highest numbers since Texas began tracking maternal deaths in 2013, jumping from 17.2 deaths per 100,000 live births in 2019 to 27.7 deaths per 100,000 live births in 2020.<sup>10</sup>

Even if MMMRC refuses to analyze pregnancy-related deaths from 2022 and 2023, surveys of obstetricians and gynecologists and patient stories illustrate that strict abortion restrictions in Texas are limiting care for pregnant women and increasing maternal mortality. A recent medical survey of Texas obstetricians and gynecologists details the impact of the state’s abortion laws on maternal patients. For example, more than 70% of practicing Texas obstetricians and gynecologists reported that Texas’ laws negatively affected their work and prohibited them from providing high quality, evidence-based care for their patients.<sup>11</sup> Availability and access to maternal care in Texas is already sparse, with 46.5% of its counties

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<sup>5</sup> *New Texas Law Increasing Penalties for Abortion Providers Goes into Effect Aug. 25*, Texas Tribune (July 27, 2022) (online at [www.texastribune.org/2022/07/26/texas-abortion-ban-dobbs/](http://www.texastribune.org/2022/07/26/texas-abortion-ban-dobbs/)); 597 U.S. 215 (2022).

<sup>6</sup> *Texans Who Perform Abortions Now Face Up to Life in Prison, \$100,000 Fine*, Texas Tribune (Aug. 25, 2022) (online at [www.texastribune.org/2022/08/25/texas-trigger-law-abortion/](http://www.texastribune.org/2022/08/25/texas-trigger-law-abortion/)).

<sup>7</sup> Texas Health and Safety Code Ann. §§ 170A.002-170A.004.

<sup>8</sup> Giuliana Grossi, *New Report Shows Worsening Health Outcomes for Women in States with Abortion Bans*, American Journal of Managed Care (July 18, 2024) (online at [www.ajmc.com/view/new-report-shows-worsening-health-outcomes-for-women-in-states-with-abortion-bans](http://www.ajmc.com/view/new-report-shows-worsening-health-outcomes-for-women-in-states-with-abortion-bans)).

<sup>9</sup> Texas Health and Safety Code. §§34.001.

<sup>10</sup> Texas Department of Health and Human Services, *Texas Maternal Mortality and Morbidity Review Committee and Department of State Health Services Joint Biennial Report* (Revised Feb. 2022) (online at [www.dshs.texas.gov/sites/default/files/legislative/2020-Reports/DSHS-MMMRC-2020.pdf](http://www.dshs.texas.gov/sites/default/files/legislative/2020-Reports/DSHS-MMMRC-2020.pdf)). Even excluding COVID-related deaths, the rate of maternal mortality still dramatically increased in 2020 (at 24.2 deaths per 100,000 live births).

<sup>11</sup> Manatt Health, *The Texas OB/GYN Physician Workforce Early Assessment of the Impact of Abortion Restrictions on the Workforce Pipeline* (Oct. 2024) (online at [www.manatt.com/Manatt/media/Documents/Articles/FINAL-TX-OBGYN-Workforce-Study\\_2024-10\\_f.pdf](http://www.manatt.com/Manatt/media/Documents/Articles/FINAL-TX-OBGYN-Workforce-Study_2024-10_f.pdf)).

categorized as “maternity care deserts.”<sup>12</sup> Texas is also experiencing an exodus of doctors leaving the state. Of the 44% of respondent obstetricians and gynecologists who indicated they have considered changing how and/or where they practice medicine as a direct result of Texas’ new abortion restrictions, 21% said they thought about leaving Texas to practice in another state, 14% said they want to leave Texas to practice in another state but are not able to, and another 13% plan to retire early.<sup>13</sup> By 2030, Texas is expected to have a 15% obstetrician and gynecologists workforce shortage, which will undoubtedly result in an even higher maternal mortality rate.<sup>14</sup>

National news outlets have reported the horrific details surrounding the preventable deaths of three pregnant Texas women due to the state’s abortion restrictions. Each story illustrates that to evaluate and address the rise in Texas maternal deaths, we must record each case and evaluate its causes.<sup>15</sup>

- Just days after the first of Texas’ restrictive abortion laws went into effect in 2021, Josseli Barnica, a 28-year-old mother of three, died from an infection due to a miscarriage complication after doctors delayed treatment for over 40 hours.<sup>16</sup> Because Texas had not clarified what constitutes a “medical emergency” under its abortion ban, doctors refused to perform a medical abortion, instead leaving her cervix open and exposed to bacteria for nearly two days—a decision which independent medical experts and maternal-fetal medicine specialists agreed violated professional medical standards.<sup>17</sup>
- After seeking emergency medical care on three separate occasions, Nevaeh Crain, an 18-year-old first time mother, died after doctors failed to further investigate her abdominal pain.<sup>18</sup> On her second visit, Ms. Crain was diagnosed with sepsis but was again sent home. On her third and final hospital visit, despite her blood pressure dramatically dropping and her vital signs clearly pointing to worsening sepsis, Ms. Crain was forced to wait hours to receive intensive care because her doctor insisted on conducting two ultrasounds to “confirm fetal demise.”<sup>19</sup>

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<sup>12</sup> March of Dimes, *Where You Live Matters: Maternity Care in Texas* (2023) (online at [www.marchofdimes.org/peristats/assets/s3/reports/mcd/Maternity-Care-Report-Texas.pdf](http://www.marchofdimes.org/peristats/assets/s3/reports/mcd/Maternity-Care-Report-Texas.pdf)).

<sup>13</sup> Manatt Health, *The Texas OB/GYN Physician Workforce Early Assessment of the Impact of Abortion Restrictions on the Workforce Pipeline* (Oct. 2024) (online at [www.manatt.com/Manatt/media/Documents/Articles/FINAL-TX-OBGYN-Workforce-Study\\_2024-10\\_f.pdf](http://www.manatt.com/Manatt/media/Documents/Articles/FINAL-TX-OBGYN-Workforce-Study_2024-10_f.pdf)).

<sup>14</sup> *Id.*

<sup>15</sup> *Id.*

<sup>16</sup> *A Woman Died After Being Told It Would be a “Crime” to Intervene in Her Miscarriage at a Texas Hospital*, Pro Publica (Oct. 30, 2024) (online at [www.propublica.org/article/josseli-barnica-death-miscarriage-texas-abortion-ban](http://www.propublica.org/article/josseli-barnica-death-miscarriage-texas-abortion-ban)).

<sup>17</sup> *Id.*

<sup>18</sup> *A Pregnant Teenager Died After Trying to Get Care in Three Visits to Texas I Emergency Rooms*, Pro Publica (Nov. 1, 2024) (online at [www.propublica.org/article/nevaeh-crain-death-texas-abortion-ban-emptala](http://www.propublica.org/article/nevaeh-crain-death-texas-abortion-ban-emptala)).

<sup>19</sup> *Id.*

Independent experts agreed that Ms. Crain should have never been sent home after being admitted the second time, stating that “this is how these restrictions kill women.”<sup>20</sup>

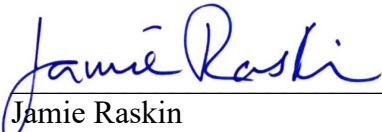
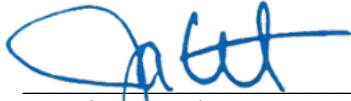
- Porsha Ngumezi, another pregnant mother who suffered from a miscarriage, died after hemorrhaging in a Texas emergency department for roughly six hours and after having received two blood transfusions.<sup>21</sup> Rather than ordering an emergency dilation and curettage, a common procedure for first-trimester miscarriages and abortions, the physician gave Ms. Ngumezi medication to try and help her body pass the tissue despite her having a blood clotting disorder. Three hours later, she passed away. Had the doctor acted quicker, she would have likely survived.

State and local MMMRCs are widely considered to be the gold standard for helping us understand the drivers of maternal mortality and pregnancy complications, as well as associated disparities. As the first and largest state to implement a strict abortion ban, Texas can offer extensive insight into the effect of abortion bans. Analyzing maternal mortality data and sharing findings with the CDC and other states should be a top priority for the MMMRC. Ignoring pregnancy-related deaths during one of the deadliest periods in Texas for pregnant women directly contradicts MMMRC’s statutorily required mission of eliminating preventable maternal deaths in Texas.

To better understand the decision by the State of Texas and the Texas MMMRC to break with past precedent and not review all maternal deaths, we request that the Texas MMMRC provide a staff-level briefing to the Committee no later than January 2, 2025.

The Committee on Oversight and Accountability is the principal oversight committee of the House of Representatives and has broad authority to investigate “any matter” at “any time” under House Rule X. If you have any questions regarding this request, please contact Committee staff at (202) 225-5051.

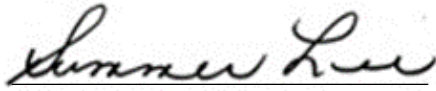
Sincerely,

  
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Jamie Raskin  
Ranking Member  
\_\_\_\_\_  
Jasmine Crockett  
Member of Congress

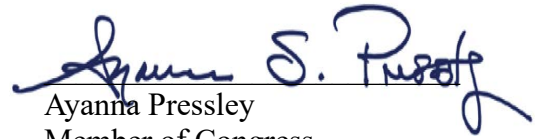
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<sup>20</sup> *Id.*

<sup>21</sup> *A Third Woman Died Under Texas’ Abortion Ban. Doctors Are Avoiding D&Cs and Reaching for Riskier Miscarriage Treatments*, Pro Publica (Nov. 25, 2024), (online at [www.propublica.org/article/porsha-ngumezi-miscarriage-death-texas-abortion-ban](http://www.propublica.org/article/porsha-ngumezi-miscarriage-death-texas-abortion-ban)).

A handwritten signature in blue ink that reads "Summer Lee". The signature is fluid and cursive, with the first name "Summer" and the last name "Lee" clearly distinguishable.

Summer Lee  
Member of Congress

A handwritten signature in blue ink that reads "Ayanna S. Pressley". The signature is fluid and cursive, with the first name "Ayanna", the middle initial "S.", and the last name "Pressley" clearly distinguishable.

Ayanna Pressley  
Member of Congress

cc: The Honorable James Comer, Chairman