



## Coalition-Supported Women's Health Equity Policy

The Coalition for Women's Health Equity supports legislation and regulations that would advance women's health equity, including those that would:

- Promote interagency collaboration to address women's health issues and increase funding for Offices of Women's Health within the Department of Health and Human Services -- including at National Institutes of Health (NIH), the Food and Drug Administration (FDA), the Centers for Disease Control and Prevention (CDC), and the Agency for Healthcare Research and Quality (AHRQ), and the Health Resources and Services Administration (HRSA)
- Increase NIH funding for women's health research and medical research (basic and clinical) generally, including on sex differences.
- Prioritize women's health as part of disease-specific research, prevention, treatment, and other strategies
- Improve labeling on products and drugs, including information about dosage and side-effect differences for men and women.
- Expand access and ensure existing coverage of life-saving screening and preventive health services for women, including well-woman visits, mammograms, maternity care and lactation support, contraception, nutrition counseling, and more.
- Address health outcome inequities, access and coverage gaps, especially for women of color and veterans
- Increase data collection on women's health outcomes
- Improve access to prenatal care and maternal health services

**115th Congress (2017 - 2018).** Various coalition members are supporting the following legislation to address specific diseases, conditions, and health inequities:

### Research

- [Triple-Negative Breast Cancer Research and Education Act of 2017 \(H.R. 1984\)](#). Introduced by Rep. Sheila Jackson Lee (D-TX-18), this bill requires the National Institutes of Health (NIH) to expand and improve programs for research on triple-negative breast cancer (the cells of these breast cancers are negative for estrogen receptors, progesterone receptors, and excess HER2 protein).

The Centers for Disease Control and Prevention (CDC) must develop and share information with the public on: (1) the incidence and prevalence of triple-negative breast cancer among women, (2) the elevated risk for women of color, and (3) the availability of a range of treatment options.

The Health Resources and Services Administration must develop and share information on triple-negative breast cancer with health care providers.

- [Feminine Hygiene Product Safety Act of 2017 \(H.R. 2379\)](#). Introduced by Rep. Carolyn Maloney (D-NY-12) and 57 original sponsors, the bill would direct NIH to test and research feminine hygiene products for toxicity and identify if chemicals used in hygiene products are linked to cervical cancer, endometriosis, infertility, and ovarian cancer. The bill would also encourage the FDA to publicly disclose these chemicals to the public.

## Prevention and Treatment

- [Health Equity and Accountability Act of 2017 \(H.R. 5942, S. 3660\)](#). Introduced by Rep. Barbara Lee from California (D-CA-13) and 57 original sponsors and Senator Mazie Hirono and 10 cosponsors, the Health Equity and Accountability Act (HEAA) addresses health disparities among racial and ethnic groups. Supported and co-sponsored by the Congressional Black, Hispanic and Asian and Pacific American Caucuses, this bill would eliminate access barriers to affordable, quality health care by requiring investments in medical technology and methods, increasing the number of resources to aid in data collection that reflects America's diverse communities, and enhancing language access services and culturally competent care.
- [Protect Access to Birth Control Act \(S.1985\)](#). Introduced by Sen. Patty Murray (D-WA) and 37 original sponsors, the Protect Access to Birth Control Act would repeal the rules that were established by the Department of Labor, the Department of the Treasury, and the Department of Health and Human Services that allow employers to be excluded from covering their employees' contraceptive services due to religious or moral values.
- [Concentrating on High-Value Alzheimer's Needs to Get to an End \(CHANGE\) Act \(S.2387, H.R.4957\)](#). Introduced by Sen. Shelley Moore Capito (R-WA), Sen. Debbie Stabenow (D-MI), Sen. Roger F. Wicker (R-MS), and Sen. Robert Menendez (D-NJ), this bipartisan bill would help improve early detection and prevention of Alzheimer's, promote caregiver support, and help establish a continuum of care for patients—from prevention to diagnosis and treatment. The bill would also increase investments in research and clinical trials.
- [BOLD Infrastructure for Alzheimer's Act \(S. 2076, H.R. 4256\)](#). Introduced by Sen. Susan Collins (R-ME), Sen. Catherine Cortez Masto (D-NV), Sen. Shelley Moore Capito (R-WV), and Sen. Tim Kaine (D-VA), this bipartisan bill encourages timely and accurate assessment, detection and diagnosis, supports innovative approaches to support family caregivers, and removes regulatory barriers to disease modifying treatments. It would aim to support the establishment of national and regional centers that specialize in Alzheimer's disease, as well as support state public health departments, Native American tribes, and other entities in addressing cognitive impairment. The bill would also require reporting on the state and national levels of cognitive decline, caregiving, and health disparities in the Department of Health and Human Services' Healthy People 2020 report.

- [Breast Cancer Patient Protection Act of 2017 \(H.R.3338\)](#). Introduced by Rep. Rosa DeLauro (D-CT-03) and 33 original sponsors, this bill amends the Employee Retirement Income Security Act of 1974 (ERISA), the Public Health Service Act, and the Internal Revenue Code to require that health plans provide coverage for a minimum hospital stay for mastectomies, lumpectomies, and lymph node dissection for the treatment of breast cancer and coverage for secondary consultations.
- [South Asian Heart Health Awareness and Research Act \(H.R. 3592\)](#). Introduced by Rep. Pramila Jayapal (D-WA-07) and Rep. Joe Wilson (R-SC-02), this bill would raise awareness of and increase research on cardiovascular disease among those in the United States who are of Indian, Pakistani, Bangladeshi, Sri Lankan, or Nepalese descent. This bill will focus on prevention efforts specific to South Asian communities, by providing funds through the CDC to States that develop tools and strategies that promote heart-healthy nutrition and directing NIH to conduct heart health research.

## Maternal Health

- [Preventing Maternal Health Deaths Act of 2017 \(H.R. 1318\)](#). Introduced by Rep. Jaime Herrera Beutler (WA-03), Rep. John Conyers, Jr. (D-MI-13), Rep. Ryan Costello (R-PA-06), and Rep. Diana DeGette (D-CO-01), this bipartisan bill would mandate the Department of Health and Human Services to investigate pregnancy-related or maternal deaths. The bill would grant states funding for reviewing maternal deaths, establish a maternal mortality review committee, and ensure that health state departments implement plans for families to be educated on maternal care. The bill would also require specific research on maternal outcomes in diverse communities.
- [Quality Care for Moms and Babies Act \(S.2637\)](#). Introduced by Sen. Debbie Stabenow (D-MI), Sen. Sherrod Brown (D-OH), Sen. Jack Reed (D-RI), Sen. Richard Blumenthal (D-CT), Sen. Martin Heinrich (D-NM), and Sen. Robert Menendez (D-NJ), this bill would direct the Centers of Medicare and Medicaid (CMS) to publish a core set of maternal and infant quality measures for women and children, including those that would apply to mothers and infants under the Children's Health Insurance Program (CHIP). The bill allows CMS to make grants to groups for the development of new state and regional maternity and infant care quality collaboratives and expand the activities of existing collaboratives. The bill would also establish a Maternal and Infant Quality Measurement Program and a website with resources for groups working to improve maternity and infant care quality.
- [The Mothers and Offspring Mortality and Morbidity Awareness \(MOMMA's\) Act \(H.R. 5977\)](#). Introduced by Rep. Robin Kelly (D-IL-02), this bill requires the Director of the Centers for Disease Control and Prevention (CDC) to provide technical assistance to states that report on maternal mortality and issue best practices to state maternal mortality review committees.

The Secretary of Health and Human Services (HHS) will develop a grant program to assist eligible entities in maternal safety bundles and research.

This bill would also expand and extend Medicaid and CHIP coverage for pregnant and postpartum women from 60 days to 1 year, and would prevent states from creating more restrictive eligibility requirements for these benefits.

### **Coverage for Women Veterans**

- [Women Veterans Access to Quality Care Act of 2017 \(S. 804\)](#). Introduced by Sen. Dean Heller (R-NV) and Sen. Patty Murray (D-WA), this bipartisan bill directs the Department of Veterans Affairs (VA) to ensure that all VA medical facilities have the structural characteristics meet the health care needs -- including privacy, safety, and dignity -- of women veterans. The Department would also be required to report on these standards.
- [Veterans Preventive Health Coverage Fairness Act of 2017 \(S. 1161\)](#). Introduced by Sen. Tammy Duckworth (D-IL), Sen. Susan Collins (R-ME), and Sen. Richard Blumenthal (D-CT), this bipartisan bill would stop making veterans to pay out-of-pocket costs for essential preventive health medications and prescription drugs and add preventive medications and services to the list of no-fee treatments that VA covers. Under current law, veterans must pay co-pay for preventive health care services that military retirees and civilians with private insurance plans receive for free.