



NEW REPORT: Pregnancy and Delivery Complications Cost the United States Billions in Health Care Expenses, Lost Productivity, and Social Support Services

When Looking at Babies Born in 2019 from Conception to Age 5, Report Found \$32.3 Billion in Societal Costs

Health complications that result from pregnancy and delivery, also known as maternal morbidity, cost the United States tens of billions of dollars each year and engender multigenerational consequences, according to a new report from Mathematica and the Commonwealth Fund. But the scarcity of comprehensive, relevant data suggests that maternal morbidity may exact an even higher toll on society.

The report, *The High Costs of Maternal Morbidity Show Why We Need Greater Investment in Maternal Health*, discusses findings from a new mathematical model that quantified the monetary costs of select maternal morbidity outcomes for all 2019 U.S. births. The model accounts for medical and nonmedical impacts on both birthing person and child from pregnancy through five years postdelivery.

Among the key findings:

- **The projected cost of maternal morbidity for all births in 2019, from conception through age 5, is \$32.3 billion.** That estimate accounts for medical costs, including those for treatment and hospitalizations, as well as nonmedical costs, including loss of economic productivity and increased use of social services. The researchers say their model likely underestimates the full financial burden of maternal morbidity to society. Similarly, it is unable to capture the human toll, which can have ongoing effects on birthing people and their family members that shape workforce participation, nutrition, schooling, and much more.
- **Seventy-four percent of maternal morbidity costs stem from child outcomes versus maternal outcomes.** Two-thirds of costs occur during the child's first year of life.
 - Child outcomes with the highest costs included preterm birth (\$13.7 billion), developmental disorders (\$6.5 billion), and respiratory distress (\$2.1 billion).
 - The costliest maternal health outcomes included lost productivity (\$6.6 billion), cesarean section delivery (\$895 million), and increased hospital stays shortly before or following childbirth (\$350 million).

EMBARGOED
NOT FOR RELEASE BEFORE
12:01 a.m. E.T., Friday,
November 12, 2021

For further information,
contact:

Bethanne Fox
212.606.3853
bf@cmwf.org

Maya Brod
301.467.4917
mbrod@burness.com

 [@commonwealthfund](https://twitter.com/commonwealthfund)

The Commonwealth Fund is a private, nonprofit foundation supporting independent research on health policy reform and a high-performance health system.

- **Maternal mental health disorder represented the highest medical driver of both medical and nonmedical costs (\$18.1 billion).** That is followed by hypertensive disorders (\$7.5 billion), gestational diabetes (\$4.8 billion), and hemorrhage (\$1.8 billion).

POLICY IMPLICATIONS

The scarcity of comprehensive data suggests that maternal morbidity has the potential to exact a much higher toll on society than the report can describe, rivaling that of expensive chronic conditions like diabetes that cost the U.S. hundreds of billions of dollars a year.

The authors say there is a pressing need for more comprehensive and culturally appropriate maternal care. Also critical is ensuring that birthing people have access to health care before pregnancy, allowing them to enter pregnancy healthier, begin prenatal care earlier, and avoid developing conditions that can lead to severe maternal morbidity. Additionally, policies that extend postpartum Medicaid coverage for up to one year would help expand opportunities to address key physical and mental health needs following birth.

To make progress, these interventions must specifically address the root causes of inequities in maternal health, including structural racism.

When the embargo lifts, the full report will be available at: <https://www.commonwealthfund.org/publications/issue-briefs/2021/nov/high-costs-maternal-morbidity-need-investment-maternal-health>

STUDY DETAILS

The study analyzed nine maternal morbidity conditions: amniotic fluid embolism, cardiac arrest, gestational diabetes mellitus, hemorrhage, hypertensive disorders, maternal mental health conditions, renal disease, sepsis, and venous thromboembolism. Of the 31 total maternal morbidity conditions identified by the study, only those nine had documented outcomes and associated costs — meaning that the researchers had data for fewer than one-third of conditions contributing to maternal morbidity costs.

ADDITIONAL PERTINENT RESEARCH

[Severe Maternal Morbidity in the United States: A Primer](#)

[Maternal Mortality and Maternity Care in the United States Compared to 10 Other Developed Countries](#)

[Maternal Mortality in the United States: A Primer](#)

[State Policies to Improve Maternal Health Outcomes](#)

FROM THE EXPERTS:

So O’Neil, lead study author and Mathematica Senior Researcher and Director, Health Philanthropy Portfolio

“We show that the costs of maternal morbidity affect not only birthing people and their families but also all of us. Our findings highlight the need for more societal investments in maternal health, an area where the United States performs poorly in comparison to other developed nations, despite having the resources to prevent morbidity and mortality.”

Laurie Zephyrin, M.D., study coauthor and Commonwealth Fund Vice President for Advancing Health Equity

“Addressing pregnancy and childbirth complications is key to resolving our country’s maternal health crisis. We know that lack of investment in maternal health and wellness hurts families across the country. Now this study allows us to understand the enormous, long-term societal and financial impacts of that neglect. Prioritizing health system investments in maternal health and ensuring equitable access to care will be critical, as will further research on maternal morbidity and resulting inequities.”