

118TH CONGRESS  
2D SESSION

# H. R. 9335

To direct the Secretary of Defense to carry out a pilot program to provide services from midwives to covered beneficiaries under the TRICARE program.

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## IN THE HOUSE OF REPRESENTATIVES

AUGUST 9, 2024

Mr. KILMER (for himself, Mr. CISCOMANI, Ms. MOORE of Wisconsin, and Ms. STRICKLAND) introduced the following bill; which was referred to the Committee on Armed Services

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## A BILL

To direct the Secretary of Defense to carry out a pilot program to provide services from midwives to covered beneficiaries under the TRICARE program.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Maternal and Infant  
5 Delivery Wellness and Integration with Vital Expertise  
6 Support for Service Members Act of 2024” or the “MID-  
7 WIVES for Service Members Act of 2024”.

1 **SEC. 2. PILOT PROGRAM TO MAKE MIDWIFE SERVICES**  
2 **AVAILABLE THROUGH TRICARE.**

3 (a) PILOT PROGRAM.—Not later than one year after  
4 the date of the enactment of this Act, the Secretary of  
5 Defense shall begin a five-year pilot program to provide  
6 services from covered midwives to covered beneficiaries  
7 under the TRICARE program.

8 (b) AUTHORITY TO MAKE PERMANENT.—If the Sec-  
9 retary determines, after the termination of the pilot pro-  
10 gram that such pilot program was successful, the Sec-  
11 retary may prescribe such regulations to establish a per-  
12 manent program to make services from covered midwives  
13 available to covered beneficiaries as the Secretary deter-  
14 mines appropriate.

15 (c) REPORTS.—

16 (1) IMPLEMENTATION REPORT.—Not later than  
17 180 days after the date of the enactment of this Act,  
18 the Secretary shall submit to the Committees on  
19 Armed Services of the House of Representatives and  
20 the Senate a plan to implement the pilot program  
21 under subsection (a).

22 (2) ANNUAL REPORT.—Not later than one year  
23 after the date on which the pilot program begins and  
24 annually thereafter until the date that is 1 year  
25 after the termination of the pilot program, the Sec-  
26 retary shall submit to the Committees on Armed

1 Services of the House of Representatives and the  
2 Senate a report including:

3 (A) The total cost of the pilot program and  
4 the cost per covered beneficiary who received  
5 care under the pilot program.

6 (B) The total number of covered bene-  
7 ficiaries who received care under the pilot pro-  
8 gram.

9 (C) The race, ethnicity, age, sex, relation-  
10 ship status, Armed Force, military occupation,  
11 and rank, as applicable, of covered beneficiaries  
12 who received care under the pilot program.

13 (D) An assessment of the effects of the  
14 pilot program on quality of care, including—

15 (i) on maternal and fetal outcomes;

16 and

17 (ii) on the number of pre-term births,  
18 low-weight births, and rates of caesarean  
19 section, and such other data points as the  
20 Secretary determines appropriate.

21 (E) An assessment of patient satisfaction  
22 of covered beneficiaries who received care  
23 through the pilot program.

24 (F) An assessment of access to maternity  
25 and labor and delivery care for covered bene-

1           ficiaries, including average wait time for an ini-  
2           tial appointment and average travel time to the  
3           provider.

4           (G) An assessment of the effectiveness of  
5           the pilot program.

6           (H) Recommendations for adjustments to  
7           the pilot program.

8           (I) The estimated cost savings as a result  
9           of improved maternal and fetal health outcomes  
10          due to the pilot program.

11          (J) The Secretary of Defense’s rec-  
12          ommendations relating to changes to the pilot  
13          program, an extension of the pilot program, and  
14          whether the pilot program should be expanded  
15          made permanent.

16          (d) DEFINITIONS.—In this section:

17           (1) The terms “covered beneficiary” and  
18           “TRICARE program” have the meanings given such  
19           terms in section 1072 of title 10, United States  
20           Code.

21           (2) The term “covered midwife” means a cer-  
22           tified professional midwife or certified midwife who  
23           meets—

24           (A) the international definition of a mid-  
25           wife, and global standards for midwifery edu-

1 cation, established by the International Confed-  
2 eration of Midwives, and

3 (B) any professional credentialing require-  
4 ment required to practice midwifery under ap-  
5 plicable State law.

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