## Congress of the United States

Washington, DC 20515

April 30, 2024

The Honorable Robert Aderholt Chair House Appropriations Subcommittee on Labor, Health and Human Services, Education & Related Agencies 2358-B Rayburn House Office Building Washington, DC 20515 The Honorable Rosa DeLauro
Ranking Member
House Appropriations Subcommittee on Labor,
Health and Human Services, Education & Related
Agencies
1036 Longworth House Office Building
Washington, DC 20515

Dear Chair Aderholt and Ranking Member DeLauro:

As you develop the appropriations legislation for Fiscal Year 2025, we encourage you to provide robust funding for the below programs that seek to prevent maternal deaths, improve maternal health, and eliminate inequities in maternal health outcomes.

More women die from pregnancy-related complications in the United States than in any other developed country, and the rate of maternal deaths continues to rise drastically. According to the Centers for Disease Control and Prevention (CDC), approximately 700 pregnancy-related deaths occur in the U.S. each year, and more than 80 percent of these deaths are preventable. Further, CDC recently released provisional data indicating that the total infant mortality rate in the U.S. increased by 3% from 2021-2022, and additional CDC data show a marked increase in maternal deaths due to the pandemic. Significant disparities in maternal mortality exist, with Black women facing three to four times higher risks than non-Hispanic white women, and Indigenous women more than twice as likely to experience pregnancy-related complications leading to death compared to non-Hispanic white women.

Title V Maternal and Child Health (MCH) Services Block Grant (Programmatic Request)— The Title V MCH Services Block Grant administered by the Health Resources and Services Administration (HRSA) is the only federal program of its kind devoted solely to improving the health of all women and children in the United States. States, territories, and other jurisdictions use this flexible and cost-effective funding source to address their most critical maternal and child health needs. This includes supporting statewide maternal mortality reviews – the gold standard in maternal mortality surveillance – and implementing strategies to translate recommendations made by maternal mortality review committees into meaningful action. Title V also supports Special Projects of Regional and National Significance (SPRANS), such as State Maternal Health Innovation Grants, a program to implement evidence-based interventions to address critical gaps in maternity care service; the MCH Leadership, Education, and Advancement in Undergraduate Pathways (LEAP) Training Program, a program to promote the development of a diverse and representative public health and health care workforce; and the Sickle Cell Disease Newborn Screening Follow-up Program to facilitate access to quality sickle cell disease care.

**Healthy Start (Programmatic Request)**— The Healthy Start program provides funding to support community-based strategies to improve perinatal outcomes for women and children in communities with acute infant mortality rates. In particular, the Healthy Start program seeks to reduce disparities in infant and maternal mortality by empowering women and their families to identify and access maternal and infant health services in their communities. Further, the Healthy Start program employs women from the impacted communities who

serve as outreach workers, peer specialists, and home visitors. This approach saves money; promotes equity, as pregnant women respond better to women with the same lived experiences; bolsters employment rates; and serves as a workforce pipeline, making the Healthy Start program a critical component of federal efforts to reduce maternal and infant mortality.

CDC Maternal and Infant Health Programs (Programmatic Request)— CDC supports a broad range of activities that seek to improve the health of moms and babies and reduce disparities in maternal and infant health outcomes. This includes implementation of the Preventing Maternal Deaths Act (P.L. 115-344) through the Enhancing Reviews and Surveillance to Eliminate Maternal Mortality (ERASE MM) Program to provide funding, technical assistance, and guidance to state maternal mortality review committees. CDC also supports perinatal quality collaboratives, which are state or multi-state networks of teams working to improve the quality of care for mothers and babies. Another example of CDC's maternal and infant health work includes the HEAR HER Campaign, a communication campaign to increase awareness of warning signs that could lead to pregnancy-related death or delivery complications and strengthen patient and provider communication.

National Institutes of Health (Programmatic Request)— Research is critically important to optimizing the health of women and their families in the United States and identifying the causes behind pregnancy-related deaths and complications. Much of the research on pregnancy in the U.S. occurs at the National Institutes of Health (NIH). Broadly, 24 of 27 institutes and centers at the NIH support at least one grant or project related to pregnancy-related research. For example, the Maternal-Fetal Medicine Units Network, a network of 12 centers across the country, conducts clinical studies to improve maternal, fetal, and neonatal health. NIH is also working to advance safe and effective therapies for pregnant and lactating women as recommended in 2019 by the federal Task Force on Research Specific to Pregnant Women and Lactating Women (authorized under P.L. 114-255). Further, NIH funding supports research to identify the best practices to support pregnant and postpartum women with a substance use disorder. Strengthened, prioritized support for maternal health research at the NIH is crucial to fully understanding maternal health outcomes, inequities, and disparities in the U.S.

Providing robust funding for each of these programs is critical to improving maternal and infant health in the U.S. Thank you for your consideration of this request to provide robust funding for programs that seek to prevent maternal deaths, eliminate inequities in maternal health outcomes, and improve maternal health.

Sincerely,

Diana DeGette

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Paus Dollate

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Earl I Bully Carte

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Member of Congress

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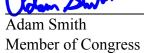
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