

November 3, 2025

The Honorable Shelly Moore Capito  
Chair  
Senate Appropriations Subcommittee on  
Labor, Health and Human Services,  
Education & Related Agencies  
Washington DC 20510

The Honorable Tammy Baldwin  
Ranking Member  
Senate Appropriations Subcommittee on  
Labor, Health and Human Services,  
Education & Related Agencies  
Washington, DC 20510

The Honorable Robert Aderholt  
Chair  
House Appropriations Subcommittee on  
Labor, Health and Human Services,  
Education & Related Agencies  
Washington, DC 20515

The Honorable Rosa DeLauro  
Ranking Member  
House Appropriations Subcommittee on  
Labor, Health and Human Services,  
Education & Related Agencies  
Washington, DC 20515

Dear Chair Capito, Ranking Member Baldwin, Chair Aderholt, and Ranking Member DeLauro:

The undersigned 126 organizations representing public health, health professionals, academic institutions, and families are writing to express opposition to the proposed cuts to the Title V Maternal and Child Health (MCH) Services Block Grant in the fiscal year (FY) 2026 Labor, Health and Human Services, Education and Related Agencies (Labor-HHS) bills being separately considered in both chambers.

The Title V MCH Block Grant is a cost-effective, accountable, and flexible funding source to address the most critical, pressing, and unique needs of each state's maternal and child health populations. State and local health departments use the Title V MCH Block Grant to design and implement a wide range of statewide and community-level maternal and child health programs to fit the needs of their specific populations. According to data gathered by the Health Resources and Services Administration, Title V MCH Block Grant funding provided access to health care and public health services for an estimated 59 million people in FY 2023, including 94 percent of pregnant women, 98 percent of infants, and 59 percent of children nationwide.

We appreciate the committees' recognition of the work done by individual states as reflected in the proposed level funding of the state grant portion of the Title V MCH Block Grant. However, we remain deeply concerned about the proposed reductions in funding for the Special Projects of Regional and National Significance (SPRANS) portion. While the Senate recommended a \$14 million decrease for SPRANS, the House of Representatives proposed a \$46.449 million reduction. This marks the third consecutive year that the House of Representatives has proposed substantial cuts to SPRANS funding.

SPRANS works to advance MCH by supporting research, workforce development, and systems-level innovation. These grants enable health departments and universities to develop and implement researched-based interventions, expand training opportunities, and strengthen the pipeline of skilled MCH professionals. For instance, the University of Alabama at Birmingham

receives nearly \$1 million of funding through the State Maternal Health Innovation Program to support comprehensive efforts aimed at improving maternal health outcomes across the state. Similarly, the University of Wisconsin is a recipient of the Maternal and Child Health Public Health Catalyst Program, which enhances public health curricula and prepares emerging leaders in the MCH field. These targeted investments not only bolster the capacity of academic institutions to address health gaps but also foster partnerships between universities, state health agencies, and communities to drive measurable improvements in MCH outcomes nationwide.

In FY 2024, \$210.1 million in SPRANS funding supported the work of nearly 281 grantees across 59 states and jurisdictions by funding innovation, training and workforce, technical assistance, quality improvement, and other mission-critical efforts, including genetics services, newborn screening, and treatments for sickle cell disease and hemophilia. A loss of SPRANS funding could detrimentally impact MCH populations, providers, public health professionals, and trainees in a sweeping way:

- Approximately 50,000 pregnant women, mothers, and providers would lose on-demand access to expert consultation about exposures (e.g., medications, vaccinations, chemicals, herbal products, and substances of abuse) during pregnancy each year.
- Forty communities would lose funding for Healthy Tomorrows projects that increase access to care and reduce health care costs through health promotion, prevention, and early intervention.
- More than 53,500 individuals with blood conditions, including Hemophilia, Thalassemia, Hereditary Hemorrhagic Telangiectasia, and other genetic disorders, would lose access to specialized comprehensive care, increasing the likelihood of life-threatening bleeding, severe anemia, and early death.
- More than 9,400 clinical and public health trainees would lose access to specialized undergraduate, graduate, and post-graduate MCH training, including specialized training in nutrition, public health, and care for children and youth with complex needs.
- More than 74,000 practicing clinical and public health professionals would lose access to continuing education on the aforementioned critical MCH topics.
- MCH initiatives would lose access to technical assistance that helps them more efficiently and effectively implement programs to improve the health of mothers, children, and families. For example, SPRANS funding supported the review and addition of seven new practices to the Association of Maternal & Child Health's Innovation Hub database in the spring and fall of 2025—a frequently used online platform to share effective practices and policies to improve MCH.
- A decrease in funding for the MCH Public Health Catalyst program would undermine schools of public health in building robust maternal and child health training programs, ultimately shrinking the future MCH workforce and reducing capacity to address ongoing public health challenges.
- States and jurisdictions would lose access to critical MCH data, analysis, and support.
  - The State Systems Development Initiative (SSDI) Program supports data analysis and translation of data into action at the state and jurisdictional level. Reduced funding would negatively impact data sharing and analysis necessary for state and local public health programs and health care systems to respond to evolving

- public health information, including emergencies and emerging issues/threats.
- Many states use SSDI funds to support MCH epidemiologists or access critical data to inform program planning and action related to emergencies and emerging issues and threats. With these funds, State Title V programs also link program data to data from systems such as vital records (birth and death), Medicaid, newborn screening, and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), etc. These data linkages provide essential information to state and local programs so they can effectively support the health and wellbeing of mothers, children, and families throughout the country.
- Maternal and child health programs in every state would be hindered from leveraging national and state data to assess the needs of families and measure their performance in serving families. For example, states have used information from research and analysis to evaluate the need for behavioral health services for children, produce reports on topics such as developmental disabilities, expand initiatives, and develop comprehensive early childhood health systems. Moreover, funding for research and analysis can inform clinical care guidelines and recommendations for maternal and pediatric populations.

We know your committees are faced with difficult decisions to keep total funding at certain spending levels. As you work to advance the FY 2026 Labor-HHS bill, we urge you to increase funding for the SPRANS portion of the Title V Maternal and Child Health Service Block Grant in order to support the vast needs of MCH populations across the country. For additional information on MCH programs in your state, please contact Sherie Lou Santos at the Association of Maternal & Child Health Programs at 202-964-2411 or [SSantos@amchp.org](mailto:SSantos@amchp.org).

Thank you for your consideration,

2 Degrees Foundation  
 4th Trimester Arizona  
 African American Mayors Association  
 Aligned HOPE  
 Alliance for Black NICU Families  
 American Academy of Pediatrics  
 American Association of Birth Centers  
 American Association on Health and Disability  
 American College of Medical Genetics and Genomics  
 American College of Nurse Midwives Michigan Affiliate  
 American College of Obstetricians & Gynecologists  
 American College of Physicians  
 American College of Preventive Medicine  
 American Heart Association  
 American Nurses Association  
 APS Foundation of America  
 Association of Maternal & Child Health Programs  
 Association of Public Health Nurses

Association of State and Territorial Health Officials  
Association of State Public Health Nutritionists  
AWHONN-Massachusetts Section  
Baby Cafe USA  
Birth By Queens Birth and Wellness Center  
Black Midwifery Collective  
Brigham and Women's Hospital  
Catholic Health Association of the United States  
Centering Healthcare Institute  
Child and Adolescent Health Measurement Initiative  
Children Now  
Children's Defense Fund  
Collaborative Support Services Inc.Early Childhood Action Strategy  
Colorado Association of Local Public Health Officials  
Comagine Health  
Counseling for Reproductive Health & Healing  
Division for Early Childhood of the Council for Exceptional Children (DEC)  
Education Development Center  
EverThrive Illinois  
Every Mother Counts  
Families USA  
Family Connects International  
FASD United  
Fertile Ground Family Services, Inc  
Firefly  
First Focus Campaign for Children  
Futures Without Violence  
GLO Premies  
Hand to Hold  
Hawai'i Children's Action Network Speaks  
Hawai'i Maternal & Infant Health Collaborative  
HealthConnect One  
Healthy Birth Day, Inc.  
Healthy Mothers, Healthy Babies-The Montana Coalition  
Healthy Teen Network  
HealthyWomen  
Help Me Grow National Center  
Hyperemesis Education and Research Foundation  
I Be Black Girl  
Illinois Perinatal Quality Collaborative  
Institute for Perinatal Quality Improvement  
Iowa Chapter of National Association of Nurse Practitioners  
Journeys Therapy Services, PLLC  
Kansas Association of Local Health Departments  
Kentucky Health Departments Association  
Lakeshore Foundation  
Lifeline for Families Center & Lifeline for Moms program at UMass Chan Medical School

Mamaya Health  
March of Dimes  
Marillac St. Vincent Family Services  
Maternal Mental Health Leadership Alliance  
Maternity Care Coalition  
Michigan Breastfeeding Network  
Michigan Council for Maternal and Child Health  
Mindy Levin-Lee, LCSW, CCTP  
MomsRising  
Mothers & Babies Perinatal Network  
National Association of Councils on Developmental Disabilities  
National Association of County & City Health Officials  
National Association of Nurse Practitioners in Women's Health  
National Association of Pediatric Nurse Practitioners  
National Birth Equity Collaborative  
National Family Planning & Reproductive Health Association  
National Healthy Start Association  
National Institute for Children's Health Quality  
National League for Nursing  
National Network of Public Health Institutes  
NC Public Health Association  
Nevada Public Health Association  
NYU Grossman School of Medicine  
Oklahoma Infant Transition Program, Dept of Neonatology, OU Health Sciences  
PCOS Challenge: The National Polycystic Ovary Syndrome Association  
Postpartum Support International  
Postpartum Support International - Delaware Chapter  
Postpartum Support International-Arizona Chapter  
Power to Decide  
Preeclampsia Foundation  
Prepared to Prosper, LLC  
Prevent Blindness  
Prevent Child Abuse Illinois  
Prevention Institute  
Primo Center for Women and Children  
Reproductive Freedom for All  
Resilient Impact Counseling Services, LLC  
Rhode Island KIDS COUNT  
Sacramento Maternal Health Collaborative  
School of Public Health, University of Illinois Chicago  
Selah's Red Tent  
Society for Maternal-Fetal Medicine  
Society for Public Health Education  
Speaking of Birth  
Spina Bifida Association  
Tagata Moana Hui Foundation  
The Arc Michigan

The Children's Home Society of New Jersey  
The Honeycomb House  
The National Alliance to Advance Adolescent Health  
The National Partnership for Women and Families  
Trust for America's Health  
U.S. Breastfeeding Committee  
United Cerebral Palsy  
University at Albany Maternal and Child Health Program  
UT AAP  
Voices for Virginia's Children  
Washington State Association of Local Public Health Officials  
Wellspring Women's Counseling  
Wildflower Health  
ZERO TO THREE

