Congress of the United States
House of Representatives
Washington, DC 20515–1405

March 28, 2019

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

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

Dear Chairwoman DeLauro and Ranking Member Cole:

Our nation faces a growing crisis in maternal health. 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. Major disparities in maternal mortality exist, with black women three to four times more likely than white women to die during pregnancy or shortly after birth. Moreover, for every maternal death that occurs, an estimated 100 other women suffer severe complications of pregnancy or childbirth. As you develop the appropriations legislation for Fiscal Year 2020, we encourage you to prioritize the highest possible funding level for the following programs that seek to prevent maternal deaths and eliminate disparities in maternal health outcomes.

Title V Maternal and Child Health (MCH) Services Block Grant – The Title V MCH 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. This flexible and cost-effective funding source is used by states, territories, and other jurisdictions 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 to meaningful action. Title V also supports the Alliance for Innovation on Maternal Health program, a data-driven maternal safety and quality improvement initiative, and State Maternal Health Innovation Grants, a demonstration program to implement evidence-based interventions to address critical gaps in maternity care service.

Healthy Start – HRSA’s Healthy Start program provides grants to support community-based strategies to improve perinatal outcomes for women and children in high-risk communities throughout the nation. In particular, Healthy Start seeks to reduce disparities in infant mortality by empowering at-risk women and their families to identify and access maternal and infant health services in their communities. As such, the program is a critical component of federal efforts to reduce both maternal and infant mortality.
Safe Motherhood and Infant Health – This portfolio of programs at the Centers for Disease Control and Prevention (CDC) supports a broad range of activities that seek to improve the health of mothers and babies and reduce disparities in maternal and infant health outcomes. The portfolio includes implementation of the Preventing Maternal Deaths Act to provide funding, technical assistance, and guidance to state maternal mortality review committees. It also includes support for perinatal quality collaboratives, which are state or multi-state networks of teams working to improve the quality of care for mothers and babies. Among other activities, CDC staff are developing a communication campaign to increase awareness of warnings signs that could lead to pregnancy-related death or delivery complications, and to strengthen patient and provider communication.

National Institutes of Health (NIH) – 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. The vast majority of research in pregnancy in the U.S. occurs at the NIH. The Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) has consistently been the largest supporter of perinatal research in the United States. NICHD’s work includes the Maternal-Fetal Medicine Units Network (MFMU), a network of 12 centers across the country that conduct clinical studies to improve maternal, fetal, and neonatal health. Broadly, 21 of 27 Institutes at the NIH support at least one grant or project related to pregnancy.

Providing strong and sustained funding for each of these programs is critical to addressing our nation’s maternal health crisis. Thank you for your consideration of this request to prioritize the highest possible funding level for programs that seek to prevent maternal deaths and eliminate disparities in maternal health outcomes.

Sincerely,

Diana DeGette  
Member of Congress

Susan W. Brooks  
Member of Congress

David P. Roe M.D.  
Member of Congress

Debbie Dingell  
Member of Congress

Donald Payne Jr.,  
Member of Congress

Debbie Mucarsel-Powell  
Member of Congress
Henry C. "Hank" Johnson, Jr.
Member of Congress

Gwen Moore
Member of Congress

Julia Brownley
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Nydia Velázquez
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