

Date

Dear Senator/Representative:

On behalf of the undersigned XXX organizations, we write to express our strong support for the PREEMIE Reauthorization Act (S.1562/H.R.1197), vital legislation to reauthorize and expand research, education and intervention activities related to preterm birth, and the Preventing Maternal Deaths Reauthorization Act (PMDA) (S.2621/H.R.1909) which will strengthen federal support for Maternal Mortality Review Committees (MMRCs). Both of these bills passed the House and Senate HELP Committee by near unanimous votes during the 118th Congress.

The U.S. has one of the highest maternal mortality and morbidity rates in the developed world. Annually, more than 50,000 women experience life-threatening complications due to labor and delivery. In 2023, nearly 700 women died due to pregnancy-related causes. Additionally, the U.S. preterm birth rate has steadily increased since 2014 to 10.4% in 2023, garnering a D+ on the March of Dimes' annual [Report Card](#). This represents an increase to over 370,000 preterm births. Preterm birth also accounts for 35.8% of infant deaths in the U.S. and the annual societal economic cost (medical, educational, and lost productivity) is an estimated \$25.2 billion. Southern and Midwestern states are particularly impacted by both adverse preterm birth and maternal health trends.

Although there are some clinical predictors of preterm birth, all pregnant individuals are at risk for preterm birth. Infants born prematurely have increased risks of morbidity and death throughout childhood, especially during the first year of life. Long-term health impacts include intellectual and developmental delays, behavioral problems, neurological disorders, visual and hearing impairments, cerebral palsy, and respiratory insufficiency or intestinal insufficiency.¹

While many risk factors associated with preterm birth have been identified, the “biological basis for many of these risk factors and the underlying mechanisms remain poorly understood.”² The PREEMIE Act will help reduce preterm birth, prevent newborn death and disability caused by preterm birth, expand research into the causes of preterm birth, and promote the development, availability, and uses of evidence-based standards of care for pregnant women.

Among the programs authorized by the PREEMIE Act is the CDC's highly successful Pregnancy Risk Assessment Monitoring System (PRAMS). PRAMS collects site-specific, population-based data tracking maternal attitudes and experiences before, during, and shortly after pregnancy on 81% of births and is used by researchers and state, territorial, and local governments to plan and review programs and policies aimed at reducing health problems among mothers and infants. This legislation will also provide for a new study on the costs, impact of non-medical factors, gaps in public health programs that lead to prematurity, and calls for recommendations to prevent preterm birth.

The Preventing Maternal Deaths Act was originally passed in 2018 to provide federal support for maternal mortality review committees. MMRCs are essential tools as we continue the work to preserve

¹ Prediction and prevention of spontaneous preterm birth. ACOG Practice Bulletin No. 234. American College of Obstetricians and Gynecologists. Obstet Gynecol 2021;138:e65–90.

² Rubens C, Sadovsky Y, LMuglia L, et al. Prevention of preterm birth: Harnessing science to address the global epidemic. Science Translational Medicine. 2014; 6(262):262sr5. doi: 10.1126/scitranslmed.3009871.

the lives and health of mothers during pregnancy, childbirth, and the postpartum period. Specifically, the bill would reauthorize, through 2030, federal support for states to collect and analyze data on every maternal death to identify policy solutions to prevent future, preventable deaths and address disparities in maternal health outcomes. This legislation would also require the CDC to work in partnership with the Health Resources and Services Administration (HRSA) to disseminate best practices for preventing maternal mortality to hospitals, physician practices, and other health care providers.

Populated by representatives in public health, obstetrics and gynecology, maternal-fetal medicine, nursing, midwifery, forensic pathology, mental and behavioral health, patient advocacy groups, and community-based organizations, MMRCs are tasked with identifying maternal deaths, analyzing factors that contributed to those deaths and translating the lessons into policy changes. CDC currently supports MMRCs in 46 states and six territories under the Enhancing Reviews and Surveillance to Eliminate Maternal Mortality (ERASE MM) Program.

MMRCs have been instrumental in reducing maternal mortality and morbidity in the US by providing detailed, unbiased reviews of pregnancy-related deaths, identifying preventable factors, and informing targeted interventions. MMRCs are a vital component to preventing many of the 80% of pregnancy-related deaths the CDC identifies as preventable.³ Continued financial support and technical assistance, data transparency, and comprehensive reviews are indispensable to preserving and enhancing their positive impact on maternal health outcomes.

We look forward to working with you this year to advance these two critical pieces of legislation. For more information, please contact Andrew Fullerton (afullerton@marchofdimes.org).

Sincerely,

4Kira4Moms

AdvaMed

AFT: Education, Healthcare, Public Services

Alliance for Black NICU Families

American Academy of Nursing

American Academy of Ophthalmology

American Academy of Pediatrics

American Association for Pediatric Ophthalmology and Strabismus

American Association of Birth Centers

American College of Nurse-Midwives

American College of Obstetricians and Gynecologists

³ Centers for Disease Control and Prevention. (n.d.). Preventing pregnancy-related deaths. Centers for Disease Control and Prevention. <https://www.cdc.gov/maternal-mortality/preventing-pregnancy-related-deaths/index.html>

American Medical Women's Association
American Society for Reproductive Medicine
Anese B. Consulting
Apple Seeds, Inc
Association of Maternal & Child Health Programs
Bobbie
Brooklyn Perinatal Network, Inc.
California Chapter of Postpartum Support International
Calming Nature Doula Service & Center Inc.
Catholic Health Association of the United States
CDH International
Center For Civic And Public Policy Improvement
Center for the American Family
Central Jersey Family Health Consortium
Chamber of Mothers
Concord Therapy LLC
Dsm-firmenich na
EverThrive Illinois
Every Mother Counts
Family Voices National
Family Voices NJ
Family-Centered Care Taskforce
First Focus Campaign for Children
Galactosemia Foundation
GLO Preemies
Gold Coast Doulas
Hand to Hold
Handful of Pearls Birthing Services
Harlum Health Consulting

Haven Midwifery Collective

Healthy Mothers, Healthy Babies- The Montana Coalition

HealthyWomen

Houston's Lift Off

Hyperemesis Education and Research Foundation

Immune Deficiency Foundation

Institute for Women's Policy Research

Jennifer Aist Lactation Services

Journeys Therapy Services

Kansas Breastfeeding Coalition

Kasey Mathews Coaching

Kindred 360

Konnected Thru 22

La Leche League Alliance

Labor of Love Consulting

League of Women Voters Metropolitan Des Moines

Legacy Community Health

Lily's Hope Foundation

Maine Medical Association

March of Dimes

Mass. PPD Fund

Maternal and Child Health Access

Maternal Mental Health Leadership Alliance

MCH Impact Partners

MEAC

Mental Health America of Ohio

Michigan Council for Maternal and Child Health

MomsRising

National Association of Nurse Practitioners in Women's Health

National Association of Pediatric Nurse Practitioners

National Coalition for Infant Health

National Hispanic Health Foundation

National League for Nursing

National Perinatal Association

NEC Society

Nemours Children's Health

NETWORK Lobby for Catholic Social Justice

New Jersey Citizen Action

NICU Parent Network

Nurture KC

Oklahoma Healthcare Authority

Paid Leave for All

Partnership for Maternal & Child Health of Northern New Jersey

People Power United

Postpartum Support International

Preeclampsia Foundation

PREEMIEWORLD FOUNDATION INC

Project NICU

Project Sweet Peas

Prolacta Bioscience

PSI

Public Advocacy for Kids (PAK)

PUSH for Empowered Pregnancy

Rhode Island KIDS COUNT

Rising Sun Therapy

Sacramento Maternal Mental Health Collaborative

Saul's Light

Serving at-risk families everywhere Inc.

SHE MATTERS & COCNJ

SiX Action

Society for Birth Defects Research and Prevention

Society for Maternal-Fetal Medicine

Society for Public Health Education

Society for Public Health Education

South Carolina Appleseed Legal Justice Center

SPAN Parent Advocacy Network

Spina Bifida Association

Symonette Strategies & Solutions

Tennessee Health Care Campaign

The Black Maternal Health Federal Policy Collective

The Colette Louise Tisdahl Foundation

The HIVE Maternal Wellness Center

The National Partnership for Women and Families

The Postpartum Adjustment Center

The Salvador E. Alvarez Institute for Non-Violence

The Skylar Project

The Society of Thoracic Surgeons

The Tender Foundation

The tiny miracles foundation

The Urban Child Institute

United Way of Buffalo & Erie County

Wild Lavender Counseling

Women Employed

Works of Faith Wellness and Consultation, LLC

ZERO TO THREE