March of Dimes, the nation’s leading nonprofit organization fighting for the health of all moms and babies, appreciates this opportunity to submit testimony for the record on fiscal year (FY) 2021 appropriations for the Department of Health and Human Services (HHS). March of Dimes leads the fight for the health of all mothers and infants through our research, community
services, education, and advocacy. Our organization recommends the aforementioned funding levels for programs and initiatives that are essential investments in maternal and child health.

_Eunice Kennedy Shriver National Institute of Child Health and Human Development_ (NICHD): March of Dimes recommends that Congress provide at least $1.6 billion for NICHD’s groundbreaking biomedical research activities in FY 2021. Increased funding will allow NICHD to sustain vital research on preterm birth, maternal mortality, maternal substance use, prenatal substance exposure and related issues through extramural grants, Maternal-Fetal Medicine Units, the Neonatal Research Network and the intramural research program. It will also ensure that NICHD can continue research on the impact of the 2019 novel coronavirus and coronavirus disease 2019 (COVID-19) on pregnant women, new mothers, and infants. March of Dimes is strongly supportive of NICHD’s efforts to expand research identifying safe and effective therapies for pregnant and lactating women. The Task Force on Research Specific to Pregnant and Lactating Women (PRGLAC) laid the foundation for this important work by releasing recommendations in September 2018 as mandated by Congress in the _21st Century Cures Act_ (P.L. 114-255). March of Dimes is encouraged by PRGLAC’s current work to develop an implementation plan for those recommendations. NICHD funding also supports research to address gaps in our understanding of the best way to treat mothers with opioid use disorder and the long-term impact of opioid exposure in utero. March of Dimes was pleased the President’s FY 2021 budget request included $50 million specifically for research to improve outcomes for infants born too soon or born with dangerous health conditions. We support the inclusion of this dedicated funding to address the nation’s preterm birth crisis.
**Title V Maternal and Child Health Block Grant Program:** March of Dimes recommends funding the Title V Maternal and Child Health Block Grant Program (Title V Block Grant) at $715 million. States, territories and other jurisdictions use Title V Block Grant funds to support their most pressing maternal and child health needs. This increase in funding can be used to intensify state efforts to prevent maternal deaths and severe maternal morbidity, including supporting maternal mortality review committees, implementing the Alliance for Innovation on Maternal Health program, and continuing State Maternal Health Innovation Grants. We urge the Committee to increase funding for the Title V Block Grant in FY 2021 to allow states to address maternal mortality while maintaining and expanding its work to improve maternal and child health across the nation and confronting emerging issues, such as COVID-19.

**Safe Motherhood Initiative:** The mission of the Safe Motherhood Initiative at the CDC’s National Center for Chronic Disease Prevention and Health Promotion is to promote optimal reproductive and infant health. March of Dimes recommends funding of $76 million for the Safe Motherhood program, an increase of $18 million over FY 2020. The increase would be used to scale CDC’s efforts to address the nation’s alarming number of maternal deaths by supporting state-based maternal mortality review committees in all 50 states. March of Dimes also strongly urges maintenance of the preterm birth sub-line at $2 million, as authorized in the PREEMIE Reauthorization Act of 2018 (P.L. 115-328), to maintain ongoing and essential preterm birth research at CDC.

**National Center on Birth Defects and Developmental Disabilities (NCBDDD):** NCBDDD is the lead federal agency tasked with supporting vital surveillance, research, and prevention activities on birth defects and developmental disabilities. For FY 2021, March of Dimes urges the
Committee to provide at least $168.5 million for NCBDDD and apply this increase across the full range of NCBDDD activities. This increase aligns with March of Dimes’ request to increase funding for the CDC by 22 percent by FY 2022. We also urge the Committee to continue support for two new NCBDDD activities funded in FY 2020, the Surveillance for Emerging Threats to Mothers and Babies Initiative and work to improve neonatal abstinence syndrome (NAS) surveillance. The Emerging Threats Initiative enables select states and jurisdictions to continue important work begun during the Zika virus response to identify and address new threats to mothers and infants. Currently, NCBDDD is working to utilize this infrastructure to monitor the impact of COVID-19 on moms and babies. NCBDDD’s efforts to improve NAS surveillance are vital to addressing the opioid epidemic’s short- and long-term impact on infants.

**Newborn Screening:** March of Dimes urges funding of $29.7 million for CDC’s Newborn Screening Quality Assurance Program (NSQAP) and $31 million for the Health Resources and Services Administration’s (HRSA) Heritable Disorders program, which play critical roles in assisting states in the adoption of additional screenings, educating providers and consumers, and ensuring coordinated follow-up care. These amounts are equal to the authorized levels in the *Newborn Screening Save Lives Reauthorization Act of 2019* (H.R. 2507), which unanimously passed the U.S. House of Representatives in July 2019. HRSA’s Heritable Disorders program also supports the work of the Advisory Committee on Heritable Disorders in Newborns and Children (ACHDNC), which provides recommendations to the HHS Secretary for conditions to be included in the Recommended Uniform Screening Panel (RUSP). In recent years, the ACHDNC has added four new conditions to the RUSP, bringing the total number of recommended screens to 35. New
funding for NSQAP and the Heritable Disorders program is crucial to ensure states have adequate funds and support to implement screening for these new additions to the RUSP.

**Grants for Maternal Depression Screening and Treatment:** Research shows that up to one in seven pregnant women or new mothers experience some sort of maternity-related depression, yet only about 15 percent of those affected receive treatment. The *21st Century Cures Act* sought to address this gap by authorizing grants to states to improve screening for and treatment of maternal depression in pregnant and postpartum women. March of Dimes appreciates that Congress provided funding for this innovative grant program in FY 2020 and urges the Committee to provide $8 million for the programs in FY 2021.

**Funding to Promote Optimal Birth Spacing and Improved Birth Outcomes:** Research shows that appropriate birth spacing – waiting at least 18 months between pregnancies – can dramatically reduce the risk of poor birth outcomes. Additionally, we know that the youngest mothers have some of the worst birth outcomes. We can mitigate these risk factors by ensuring women have access to evidence-based counseling and education prior to pregnancy and access to all forms of contraception approved by the Food and Drug Administration. To support these important goals, March of Dimes recommends funding of $400 million for Title X Family Planning Program and $110 million for the Teen Pregnancy Prevention Program administered by the Office of the Assistant Secretary for Health.

**Conclusion:** March of Dimes looks forward to working with appropriators and all Members of Congress to secure the resources needed to improve our nation’s health. Federal public health programs are essential to preventing preterm birth, ending preventable maternal deaths, and addressing the opioid epidemic’s impact on mother, infants and families.