

Bolster the Nation's Infrastructure and Surveillance Efforts During COVID-19



Congressional action has been critical in protecting Americans during the 2019 novel coronavirus (COVID-19) pandemic. Public and healthcare infrastructure requires support and smart, long-term investments are critical now more than ever.



Investing in Public Health and Health Care Infrastructure

The COVID-19 pandemic has demonstrated that underfunding public health has deadly and costly consequences. Lack of supplies in national and state stockpiles, the inability to scale diagnostic testing and contact tracing, and insufficient surge capacity have extended and exacerbated this public health crisis. Boosting and sustaining investment in our nation's public health system will both prepare us for the next public health emergency and stimulate the economy.

Of this amount, **March of Dimes strongly encourages Congress to direct at least \$100 million to CDC's Emerging Threats to Moms and Babies initiative.** During public health crises such as the H1N1 pandemic and the Zika virus outbreak, additional funding provided by Congress enabled CDC to create a surveillance system to track impacted mothers and infants.

Funding Emerging Threats to Moms and Babies

The Emerging Threats to Moms and Babies initiative is a unique nationwide mother-baby linked surveillance network to monitor the virus' impact in real-time to inform clinical guidance, educate health care providers and the community, and connect families to care. Unfortunately, states were unable to sustain systems once the supplemental federal funds expired, and our nation's mothers and infants were left without a national system to monitor emerging threats and mobilize when disasters strike. Currently, CDC provides limited funding to 13 states and territories to maintain their mother-baby longitudinal linked surveillance system.

March of Dimes encourages Congress to provide at least \$100 million to CDC to reinvigorate and improve the Emerging Threats to Moms and Babies initiative. This funding will provide real-time clinical and survey data from all states and jurisdictions on the impact of COVID-19 on pregnant women and their babies, and sustained funding beyond the current crisis to ensure there is a national infrastructure to quickly identify and respond to new threats to mothers and infants.



Health Care Infrastructure

This public health emergency has shown that telehealth is critical to our nation's health care delivery system, especially in times of crisis. Unfortunately, our systems and regulations are not equipped to facilitate remote treatment, particularly for pregnant women covered by Medicaid.

A growing body of evidence suggests telehealth is an effective method to deliver care to women for both low- and high-risk pregnancies. Unfortunately, utilization of pregnancy-related telehealth remains low due, in part, to system-level barriers to implementation. Federal investment in obstetric telehealth can help surmount these barriers and build a more resilient maternity care system for our nation's mothers.

March of Dimes encourages Congress to provide \$90 million available over four years to the Health Resources and Services Administration to expand the Rural Maternity and Obstetrics Management Strategies (RMOMS) program. This existing grant program helps rural communities develop, implement, and test models to improve access to quality prenatal and postpartum care.