July 24, 2020

The Honorable Nancy Pelosi
House Speaker
H-232, The Capitol
Washington, DC 20515

The Honorable Kevin McCarthy
House Minority Leader
H-204, The Capitol
Washington, DC 20515

The Honorable Mitch McConnell
Senate Majority Leader
S-230, The Capitol
Washington, DC 20510

The Honorable Chuck Schumer
Senate Minority Leader
S-221, The Capitol
Washington, DC 20510

Dear Speaker Pelosi, Leader McCarthy, Leader McConnell, and Leader Schumer:

On behalf of the undersigned organizations dedicated to the health and well-being of mothers, infants and families, we write today to urge you to invest in our nation’s surveillance infrastructure to monitor the impact of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2 or “the coronavirus”) and the 2019 coronavirus disease (COVID-19) on maternal and infant health. Currently, there is insufficient data on COVID-19’s impact on mothers and infants. This lack of data affects the quality of care women and infants receive, creates anxiety and confusion for expecting and new mothers, and hinders response efforts for this vulnerable population. To fill this gap in data, we again urge Congress to include $100 million for the Centers for Disease Control and Prevention’s (CDC) Surveillance for Emerging Threats to Moms and Babies initiative in the next COVID-19 response package.

Too often, our nation’s investment in its public health infrastructure surges in times of crisis only to be underfunded when the evident threat has passed. This boom and bust cycle has left this nation without modern data systems to monitor the nation’s health in real-time and inform the provision of scarce public health resources. For instance, supplemental funding provided during the Zika outbreak allowed CDC to create the Surveillance for Emerging Threats to Moms and Babies initiative, 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 mobilize when the coronavirus struck. Currently, CDC is providing modest support to only 13 states and jurisdictions to do this important work.

This has left us with an incomplete picture of how best to care for mothers and babies with confirmed or suspected coronavirus infection. In the Morbidity and Mortality Weekly Report released June 26th, the CDC finally provided data to assess the prevalence and severity of COVID-19 among pregnant women. The CDC found that expectant mothers with the virus had a 50% higher chance of being admitted to intensive care and 70% higher chance of being intubated than nonpregnant women in their childbearing years. However, these findings the CDC reported on have limitations, as the pregnancy status was missing for three quarters of
women of reproductive age with SARS-CoV-2 infection and among COVID-19 cases in female patients crucial information was missing such as known pregnancy status, data on race/ethnicity, symptoms, underlying conditions, and outcomes.\textsuperscript{ii} This paucity of data hinders the ability of health care providers to make evidence-based care decisions for pregnant women.

Furthermore, the potential for vertical transmission from mom to baby in all stages of pregnancy remains unclear.\textsuperscript{iii} Data on the risk of preterm birth remains inconclusive.\textsuperscript{iv} While children appear to have less severe disease than adults, young infants with COVID-19 could be more vulnerable to infection.\textsuperscript{v} Congress needs to provide robust funding to study the impact COVID-19 has on in utero.

To address these serious knowledge gaps, we ask Congress to immediately provide at least $100 million to CDC to reinvigorate and expand the \textit{Surveillance for Emerging Threats to Moms and Babies} initiative to provide real-time clinical and survey data from all 50 states, territories and jurisdictions on the impact of COVID-19 on pregnant women and their babies. This will enable CDC to develop detailed guidance for health care providers on the care of pregnant women and infants, improve evidence-based communications to this at-risk population, and allow CDC to identify any long-term impacts on infant development. Further, Congress must sustain this level of funding beyond the current crisis to ensure we have a national infrastructure to quickly identify and respond to any new health threats that emerge to mothers and infants.

We thank you for the unprecedented investments you have made in recent months to blunt the impact of COVID-19 on the nation’s health and well-being. We ask that you ensure the next COVID-19 response package includes investments in the \textit{Surveillance for Emerging Threats to Moms and Babies} initiative to ensure we are comprehensively monitoring and responding to the impact on the health of moms and babies. Please direct questions to Deema Tarazi, Deputy Director, Federal Affairs of Public Health, March of Dimes (dtarazi@marchofdimes.org).

Sincerely,
AIDS Alliance for Women, Infants, Children, Youth & Families
American Academy of Family Physicians
American Academy of Pediatrics
American College of Clinical Pharmacy
American College of Obstetricians and Gynecologists
American Organization for Nursing Leadership
American Public Health Association
Arc of Illinois
Association of Maternal & Child Health Programs
Association of University Centers on Disabilities (AUCD)
Association of Women’s Health, Obstetric and Neonatal Nurses
Brooklyn Perinatal Network, Inc.
Center for Reproductive Rights
Every Mother Counts
Families USA
Family Voices
First Focus Campaign for Children
Florida Chapter of American Academy of Pediatrics, Inc.
HealthyWomen
Johnson & Johnson
Liftoff Western New York
March of Dimes
Mom Congress
MomsRising
National Association of County and City Health Officials
National Association of Nurse Practitioners in Women's Health
National Association of Pediatric Nurse Practitioners
National Birth Defects Prevention Network
National League for Nursing
National Nurse-Led Care Consortium
National WIC Association
Nurse-Family Partnership
Preeclampsia Foundation
Prevent Blindness
Society for Maternal-Fetal Medicine
Society for Public Health Education
ZERO TO THREE

CC:
The Honorable Richard Shelby, Chairman, Senate Committee on Appropriations
The Honorable Patrick Leahy, Vice Chairman, Senate Committee on Appropriations
The Honorable Nita Lowey, Chairwoman, House Committee on Appropriations
The Honorable Kay Granger, Ranking Member, House Committee on Appropriations
The Honorable Roy Blunt, Chairman, Senate Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies
The Honorable Patty Murray, Ranking Member, Senate Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies
The Honorable Rosa DeLauro, Chairwoman, House Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies
The Honorable Tom Cole, Ranking Member, House Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies

1 https://www.cdc.gov/mmwr/volumes/69/wr/pdfs/mm6925a1-H.pdf
There is a report of a proven case of transplacental transmission of SARS-CoV-2 from a pregnant woman affected by COVID-19 during late pregnancy to her offspring, but other cases of potential perinatal transmission present several unaddressed issues. 

https://www.nature.com/articles/s41467-020-17436-6#Sec5