FRIENDS of the TITLE V MATERNAL and CHILD HEALTH SERVICES PROGRAM

c/o Association of Maternal & Child Health Programs 1825 K Street NW Suite 250, Washington, DC 20006 Tel: 202-775-0436

March X, 2020

The Honorable Roy Blunt Chairman Senate Appropriations Subcommittee on Labor, Health and Human Services, Education & Related Agencies Washington DC 20510

The Honorable Rosa DeLauro Chair House Appropriations Subcommittee on Labor, Health and Human Services, Education & Related Agencies Washington, DC 20515 The Honorable Patty Murray Ranking Member Senate Appropriations Subcommittee on Labor, Health and Human Services, Education & Related Agencies Washington, DC 20510

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

Dear Chairman Blunt, Ranking Member Murray, Chair DeLauro, and Ranking Member Cole:

As organizations dedicated to improving the health of all women, children, and families, we strongly urge you to support at least \$715 million for the Title V Maternal and Child Health (MCH) Services Block Grant in the FY2021 Labor, Health and Human Services, Education & Related Agencies Appropriations bill.

The Title V MCH Block Grant is a cost-effective, accountable, and flexible funding source used to address the most critical, pressing, and unique needs of maternal and child health populations in each state, territory, and jurisdiction of the United States. According to data gathered by the Health Resources and Services Administration (HRSA), 91% of all pregnant women, 99% of infants, and 54% of children nationwide benefitted from a Title V-supported service in FY2018.

States and jurisdictions use the Title V MCH Block Grant to design and implement a wide range of maternal and child health programs to fit the needs of their specific populations. These programs save federal and state governments money by ensuring that people receive preventive services to avoid more-costly chronic conditions later in life. Although initiatives may vary among the states and jurisdictions, all of them work with local, state, and national partners to accomplish the following:

- Reduce infant mortality
- Assure access to quality care, especially for those with low-incomes or limited availability of care;

- Provide and ensure access to comprehensive prenatal and postnatal care to women (especially low-income and at-risk pregnant women);
- Increase the number of children who receive regular health assessments and, when indicated, diagnostic and treatment services and appropriate followup;
- Provide and ensure access to preventive and primary care services, including oral health services, for low-income children as well as rehabilitative services for children with special health care needs; and
- Implement family-centered, community-based systems of coordinated care for children with special health care needs (CSHCN).

State Title V programs are at the forefront of addressing maternal mortality and morbidity, working to identify causes of pregnancy-associated deaths and severe complications, devise plans to address those causes, and implement programs to prevent future deaths and near misses. Increased funding allotted to the Title V MCH Block Grant in FY2019 and FY2020 were important steps in equipping states to carry out this mission through the State Maternal Health Innovation program and increased investment in the Alliance for Innovation on Maternal Health (AIM) program. However, these increases still only reached a fraction of states and more support is needed to enable all states to fully realize their goals related to improved overall maternal health.

Title V MCH Block Grant programs work diligently to train the next generation of maternal and child health workforce leaders as well as address emerging issues and emergencies. This year states are also carrying out the five-year needs assessment process, which requires additional capacity and resources in order to complete a thorough assessment of, and develop strategic action plans to meet, the individual needs of their specific MCH populations. States conduct the needs assessment by thoroughly analyzing state-specific data and trends as well as engaging diverse stakeholder communities within the state in person and virtually. Each state then takes the information compiled in order to prioritize goals and appropriately allocate resources for the next 5-year period.

Our funding request for FY2021 still represents a decrease from the Title V MCH Block Grant's highest funding level of \$731 million in FY2002 and is well below the full authorization level of \$850 million. We thank you for funding the Title V MCH Block Grant at \$687.7 million in FY2020 and **urge you to provide an increase to \$715 million in FY2021, including an increase to the state formula fund,** given the increased demands being placed on the Block Grant. For additional information on MCH programs in your state, please contact Amy Haddad at the Association of Maternal & Child Health Programs at 202-266-3045 or ahaddad@amchp.org.

Sincerely,