November 3, 2025

The Honorable Shelly Moore Capito Chair Senate Appropriations Subcommittee on Labor, Health and Human Services, Education & Related Agencies Washington DC 20510

The Honorable Robert Aderholt Chair House Appropriations Subcommittee on Labor, Health and Human Services, Education & Related Agencies Washington, DC 20515 The Honorable Tammy Baldwin Ranking Member Senate Appropriations Subcommittee on Labor, Health and Human Services, Education & Related Agencies Washington, DC 20510

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

Dear Chair Capito, Ranking Member Baldwin, Chair Aderholt, and Ranking Member DeLauro:

The undersigned 126 organizations representing public health, health professionals, academic institutions, and families are writing to express opposition to the proposed cuts to the Title V Maternal and Child Health (MCH) Services Block Grant in the fiscal year (FY) 2026 Labor, Health and Human Services, Education and Related Agencies (Labor-HHS) bills being separately considered in both chambers.

The Title V MCH Block Grant is a cost-effective, accountable, and flexible funding source to address the most critical, pressing, and unique needs of each state's maternal and child health populations. State and local health departments use the Title V MCH Block Grant to design and implement a wide range of statewide and community-level maternal and child health programs to fit the needs of their specific populations. According to data gathered by the Health Resources and Services Administration, Title V MCH Block Grant funding provided access to health care and public health services for an estimated 59 million people in FY 2023, including 94 percent of pregnant women, 98 percent of infants, and 59 percent of children nationwide.

We appreciate the committees' recognition of the work done by individual states as reflected in the proposed level funding of the state grant portion of the Title V MCH Block Grant. However, we remain deeply concerned about the proposed reductions in funding for the Special Projects of Regional and National Significance (SPRANS) portion. While the Senate recommended a \$14 million decrease for SPRANS, the House of Representatives proposed a \$46.449 million reduction. This marks the third consecutive year that the House of Representatives has proposed substantial cuts to SPRANS funding.

SPRANS works to advance MCH by supporting research, workforce development, and systems-level innovation. These grants enable health departments and universities to develop and implement researched-based interventions, expand training opportunities, and strengthen the pipeline of skilled MCH professionals. For instance, the University of Alabama at Birmingham

receives nearly \$1 million of funding through the State Maternal Health Innovation Program to support comprehensive efforts aimed at improving maternal health outcomes across the state. Similarly, the University of Wisconsin is a recipient of the Maternal and Child Health Public Health Catalyst Program, which enhances public health curricula and prepares emerging leaders in the MCH field. These targeted investments not only bolster the capacity of academic institutions to address health gaps but also foster partnerships between universities, state health agencies, and communities to drive measurable improvements in MCH outcomes nationwide.

In FY 2024, \$210.1 million in SPRANS funding supported the work of nearly 281 grantees across 59 states and jurisdictions by funding innovation, training and workforce, technical assistance, quality improvement, and other mission-critical efforts, including genetics services, newborn screening, and treatments for sickle cell disease and hemophilia. A loss of SPRANS funding could detrimentally impact MCH populations, providers, public health professionals, and trainees in a sweeping way:

- Approximately 50,000 pregnant women, mothers, and providers would lose on-demand access to expert consultation about exposures (e.g., medications, vaccinations, chemicals, herbal products, and substances of abuse) during pregnancy each year.
- Forty communities would lose funding for Healthy Tomorrows projects that increase access to care and reduce health care costs through health promotion, prevention, and early intervention.
- More than 53,500 individuals with blood conditions, including Hemophilia, Thalassemia, Hereditary Hemorrhagic Telangiectasia, and other genetic disorders, would lose access to specialized comprehensive care, increasing the likelihood of lifethreatening bleeding, severe anemia, and early death.
- More than 9,400 clinical and public health trainees would lose access to specialized undergraduate, graduate, and post-graduate MCH training, including specialized training in nutrition, public health, and care for children and youth with complex needs.
- More than 74,000 practicing clinical and public health professionals would lose access to continuing education on the aforementioned critical MCH topics.
- MCH initiatives would lose access to technical assistance that helps them more efficiently and effectively implement programs to improve the health of mothers, children, and families. For example, SPRANS funding supported the review and addition of seven new practices to the Association of Maternal & Child Health's Innovation Hub database in the spring and fall of 2025—a frequently used online platform to share effective practices and policies to improve MCH.
- A decrease in funding for the MCH Public Health Catalyst program would undermine schools of public health in building robust maternal and child health training programs, ultimately shrinking the future MCH workforce and reducing capacity to address ongoing public health challenges.
- States and jurisdictions would lose access to critical MCH data, analysis, and support.
 - O The State Systems Development Initiative (SSDI) Program supports data analysis and translation of data into action at the state and jurisdictional level. Reduced funding would negatively impact data sharing and analysis necessary for state and local public health programs and health care systems to respond to evolving

- public health information, including emergencies and emerging issues/threats.
- Many states use SSDI funds to support MCH epidemiologists or access critical data to inform program planning and action related to emergencies and emerging issues and threats. With these funds, State Title V programs also link program data to data from systems such as vital records (birth and death), Medicaid, newborn screening, and Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), etc. These data linkages provide essential information to state and local programs so they can effectively support the health and wellbeing of mothers, children, and families throughout the country.
- Maternal and child health programs in every state would be hindered from leveraging national and state data to assess the needs of families and measure their performance in serving families. For example, states have used information from research and analysis to evaluate the need for behavioral health services for children, produce reports on topics such as developmental disabilities, expand initiatives, and develop comprehensive early childhood health systems. Moreover, funding for research and analysis can inform clinical care guidelines and recommendations for maternal and pediatric populations.

We know your committees are faced with difficult decisions to keep total funding at certain spending levels. As you work to advance the FY 2026 Labor-HHS bill, we urge you to increase funding for the SPRANS portion of the Title V Maternal and Child Health Service Block Grant in order to support the vast needs of MCH populations across the country. For additional information on MCH programs in your state, please contact Sherie Lou Santos at the Association of Maternal & Child Health Programs at 202-964-2411 or SSantos@amchp.org.

Thank you for your consideration,

2 Degrees Foundation 4th Trimester Arizona African American Mayors Association Aligned HOPE Alliance for Black NICU Families American Academy of Pediatrics American Association of Birth Centers American Association on Health and Disability American College of Medical Genetics and Genomics American College of Nurse Midwives Michigan Affiliate American College of Obstetricians & Gynecologists American College of Physicians American College of Preventive Medicine American Heart Association American Nurses Association APS Foundation of America Association of Maternal & Child Health Programs Association of Public Health Nurses

Association of State and Territorial Health Officials

Association of State Public Health Nutritionists

AWHONN-Massachusetts Section

Baby Cafe USA

Birth By Queens Birth and Wellness Center

Black Midwifery Collective

Brigham and Women's Hospital

Catholic Health Association of the United States

Centering Healthcare Institute

Child and Adolescent Health Measurement Initiative

Children Now

Children's Defense Fund

Collaborative Support Services Inc. Early Childhood Action Strategy

Colorado Association of Local Public Health Officials

Comagine Health

Counseling for Reproductive Health & Healing

Division for Early Childhood of the Council for Exceptional Children (DEC)

Education Development Center

EverThrive Illinois

Every Mother Counts

Families USA

Family Connects International

FASD United

Fertile Ground Family Services, Inc

Firefly

First Focus Campaign for Children

Futures Without Violence

GLO Preemies

Hand to Hold

Hawai'i Children's Action Network Speaks

Hawai'i Maternal & Infant Health Collaborative

HealthConnect One

Healthy Birth Day, Inc.

Healthy Mothers, Healthy Babies-The Montana Coalition

Healthy Teen Network

HealthyWomen

Help Me Grow National Center

Hyperemesis Education and Research Foundation

I Be Black Girl

Illinois Perinatal Quality Collaborative

Institute for Perinatal Quality Improvement

Iowa Chapter of National Association of Nurse Practitioners

Journeys Therapy Services, PLLC

Kansas Association of Local Health Departments

Kentucky Health Departments Association

Lakeshore Foundation

Lifeline for Families Center & Lifeline for Moms program at UMass Chan Medical School

Mamaya Health

March of Dimes

Marillac St. Vincent Family Services

Maternal Mental Health Leadership Alliance

Maternity Care Coalition

Michigan Breastfeeding Network

Michigan Council for Maternal and Child Health

Mindy Levin-Lee, LCSW, CCTP

MomsRising

Mothers & Babies Perinatal Network

National Association of Councils on Developmental Disabilities

National Association of County & City Health Officials

National Association of Nurse Practitioners in Women's Health

National Association of Pediatric Nurse Practitioners

National Birth Equity Collaborative

National Family Planning & Reproductive Health Association

National Healthy Start Association

National Institute for Children's Health Quality

National League for Nursing

National Network of Public Health Institutes

NC Public Health Association

Nevada Public Health Association

NYU Grossman School of Medicine

Oklahoma Infant Transition Program, Dept of Neonatology, OU Health Sciences

PCOS Challenge: The National Polycystic Ovary Syndrome Association

Postpartum Support International

Postpartum Support International - Delaware Chapter

Postpartum Support International-Arizona Chapter

Power to Decide

Preeclampsia Foundation

Prepared to Prosper, LLC

Prevent Blindness

Prevent Child Abuse Illinois

Prevention Institute

Primo Center for Women and Children

Reproductive Freedom for All

Resilient Impact Counseling Services, LLC

Rhode Island KIDS COUNT

Sacramento Maternal Health Collaborative

School of Public Health, University of Illinois Chicago

Selah's Red Tent

Society for Maternal-Fetal Medicine

Society for Public Health Education

Speaking of Birth

Spina Bifida Association

Tagata Moana Hui Foundation

The Arc Michigan

The Children's Home Society of New Jersey

The Honeycomb House

The National Alliance to Advance Adolescent Health

The National Partnership for Women and Families

Trust for America's Health

U.S. Breastfeeding Committee

United Cerebral Palsy

University at Albany Maternal and Child Health Program

UT AAP

Voices for Virginia's Children

Washington State Association of Local Public Health Officials

Wellspring Women's Counseling

Wildflower Health

ZERO TO THREE