

April 3, 2019

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

The Honorable Patty Murray
Ranking Member
Senate Appropriates Subcommittee on
Labor, Health and Human Services,
Education & Related Agencies
Washington, DC 20510

Dear Chairman Blunt and Ranking Member Murray:

The National Nurse-Led Care Consortium (NNCC) is a 501(c)(3) nonprofit public health organization that advances all forms of nurse-led care through policy development, technical assistance, and innovative programming. The nurse-led care philosophy puts patients at the center of care and identifies the social determinants of health to treat people, not symptoms. Our goal is to support and empower nurses to improve care, lower costs, and take on leadership roles.

NNCC supports robust funding for programs that improve maternal-child health nationwide, including the Maternal and Child Health (MCH) Services Block Grant, authorized by Title V of the Social Security Act. **NNCC joins the Association of Maternal & Child Health Programs in its call for Congress to fund the Title V Maternal and Child Health (MCH) Services Block Grant at \$698 million for FY 2020.**

The Title V MCH Services Block Grant is the only federal program devoted to improving the health of all women, children and families. In FY 2017, 86% of all pregnant women, 99% of infants, and 55% of children nationwide benefitted from a Title V-supported service.¹ The flexibility of the MCH Block Grant enables states to tailor approaches that meet the needs of their MCH populations through evidence-based strategies.

While the MCH Services Block Grant program funds many initiatives of great importance to mothers and children nationwide, NNCC wishes to highlight its positive impact on three areas in particular:

- 1) Ensuring Safe and Healthy Living Environments for Families;
- 2) Addressing the Maternal Mortality Crisis; and
- 3) Supporting Evidence-based Maternal-Child Home Visiting for High-Risk Families.

¹ U.S. Health Resources and Services Administration (HRSA) (2019, Jan.). Title V Maternal and Child Health Services Block Grant Program. Retrieved from: <https://mchb.hrsa.gov/maternal-child-health-initiatives/title-v-maternal-and-child-health-services-block-grant-program>

1) Ensuring Safe and Healthy Living Environments for Families

From its home office in Philadelphia, NNCC builds innovative public health programs to serve as national models. Since 2016, NNCC has implemented a Title V MCH Services Block Grant project (funded via the Pennsylvania Department of Health) to implement the Safe and Healthy Homes Program (SHHP). This program serves the MCH population in Southeastern Pennsylvania, specifically Philadelphia and Delaware counties.

The program's overall goal is to prevent illness and injury caused by home health and safety hazards, such as fire and fall hazards, asthma triggers, and lead paint. Through SHHP, families receive comprehensive primary prevention home assessments, along with relevant education, interventions, and resources to improve home health and safety. Through December 2018, NNCC and our partners have visited over 685 families across Philadelphia and Delaware Counties, distributed supplies to address 3,378 health and safety hazards, and installed features to prevent home injuries for 45 families.

Title V MCH Services Block Grant funding is crucial to continue supporting families in creating safe and healthy living environments for children to thrive.

2) Addressing the Maternal Mortality Crisis

More women in the United States die from pregnancy-related complications than in any other developed country. Aspects of this trend appear to be fueled by the opioid epidemic.² Maternal deaths have tragic physical, emotional and socio-economic impact on children, families and our communities.

Pennsylvania statistics reflect these trends, with the statewide maternal mortality rate doubling since 1994.³ In Philadelphia (Pennsylvania's largest city), the maternal mortality rate is far above the national average.⁴ Over the last eight years, there were at least 155 maternal deaths. Three in 10 were directly related to pregnancy – and over half of these caused by cardiovascular conditions or cardiomyopathy, hemorrhage or infection.⁵ Racial disparity in maternal health outcomes are stark and persistent. Non-Hispanic black women experience maternal deaths at a rate three to four times that of non-Hispanic white women.⁶

The Title V MCH Services Block Grant is critical to reversing these alarming trends and improving the quality of care for mothers and babies. Title V supports state-based teams to conduct maternal mortality and morbidity surveillance, including maternal mortality review, and translate those findings into action.

In Pennsylvania, the creation of a maternal mortality review committee in 2018 was a first step to

² Gemmill, A., Kiang, M.V. & Alexander, M.J. (2019). Trends in pregnancy-associated mortality involving opioids in the United States, 2007-2016. *American Journal of Obstetrics & Gynecology*, 220(1), 115-116. doi: 10.1016/j.ajog.2018.09.028

³ Hamill, S.D. (2018, Jun. 18). Why has Pennsylvania's maternal death rate doubled in 20 years? A new committee will look at past cases. *Pittsburgh Post-Gazette*.

⁴ Philadelphia Department of Public Health (2015). Maternal Mortality in Philadelphia: 2010-2012. Retrieved from: <https://www.phila.gov/media/20180418095805/MMR-2010-12-Report-final-060115.pdf>

⁵ Philadelphia Department of Public Health Maternal Mortality Review Committee. Preliminary statistics, 2019.

⁶ Philadelphia Department of Public Health (2015). Maternal Mortality in Philadelphia: 2010-2012. Retrieved from: <https://www.phila.gov/media/20180418095805/MMR-2010-12-Report-final-060115.pdf>

address the issue of increasing statewide maternal mortality. The committee is tasked with developing programs, policies, recommendations and strategies based on data to prevent maternal deaths. This type of coordination and surveillance work is crucial to reversing maternal mortality trends.

3) Supporting Evidence-Based Maternal Child Home Visiting for High-Risk Clients

Two of NNCC's most successful programs are the Philadelphia Nurse-Family Partnership (Philadelphia NFP) and the Mabel Morris Family Home Visit Program (MM-Parents as Teachers), evidence-based early childhood initiatives serving low-income women and children. Our goals include: better pregnancy outcomes; improved child health and development; increased school readiness; and greater economic self-sufficiency for families. Since inception, Philadelphia NFP and MM-PAT have served over 4,800 families.

The Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) funds home visiting programs for at-risk families such as NFP and PAT. Title V federal-state partnerships complement these efforts by supporting systems integration, quality, and accountability. For instance, Title V MCH Services Block Grants support Children with Special Health Care Needs (CSHCN) programs, which help build community capacity to deliver enabling services such as care coordination, transportation, and nutrition counseling. These services are crucial to the families we serve through evidence-based home visiting, especially those with complex needs.

In closing, NNCC strongly supports all programs and policies working toward reducing MCH health disparities, improving maternal and child health and preventing maternal deaths - including the Title V MCH Services Block Grant Program.

Investment in vulnerable families and children saves lives and will pay dividends for decades to come, in the form of avoided disease, increased school readiness, and disability prevention. NNCC is committed to improving the health and wellbeing of mothers and babies in Pennsylvania and throughout the nation. If you or your colleagues would like additional information, or would like to meet any of our nurses or clients, please feel free to contact me at shexem@ncc.us or 215-731-7148.

Sincerely,

A handwritten signature in cursive script that reads "Sarah Hexem Hubbard".

Sarah Hexem Hubbard, Esq.
Executive Director