



# **PREEMIE Reauthorization Act**

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## **Partner Toolkit**

**HEALTHY  
MOMS.  
STRONG  
BABIES.**





# PREEMIE Reauthorization Act

On May 11<sup>th</sup>, Sen. Michael Bennet (D-CO), Sen. John Boozman (R-AR), Rep. Michael Burgess (R-TX), Rep. Anna Eshoo (D-CA), Rep. Mariannette Miller-Meeks (R-IA), Rep. Robin Kelly (D-IL), Rep. Lisa Blunt Rochester (D-DE) and Rep. Jenn Kiggans (R-VA) became our champions in the fight to reverse the dire trend reported in [March of Dimes' latest Report Card](#) and to end preventable preterm birth.

The PREEMIE Act is the only federal law dedicated to the research, prevention and treatment of preterm birth. The PREEMIE Act was first passed in 2006 (P.L. 109-450) and renewed in 2013 (P.L. 113-55) and 2018 (P.L. 115-328). The PREEMIE Act supports federal research, education, and promoting known interventions and community initiatives.

**Expiring at the end of 2023, the PREEMIE Reauthorization Act represents the federal government's commitment to preventing premature birth through:**

- Reauthorizing CDC and HRSA programs and research on preventing preterm birth and promoting healthy pregnancies
- Establishment of an HHS entity to coordinate all federal activities and programs related to preterm birth, infant mortality and other adverse birth outcomes
- Commissions a new study to assess social factors impacting preterm birth, identifying gaps in public health programs on preterm birth, recommendations on preventing preterm birth, and assessing the costs of preterm birth



# Template Key Talking Points



**HEALTHY  
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- The PREEMIE Reauthorization Act is sponsored by: Sen. Michael Bennet (D-CO), Sen. John Boozman (R-AR), Rep. Michael Burgess (R-TX), Rep. Anna Eshoo (D-CA), Rep. Mariannette Miller-Meeks (R-IA), Rep. Robin Kelly (D-IL), Rep. Lisa Blunt Rochester (D-DE) and Rep. Jen Kiggans (R-VA).
- Over 3.5 million births happen in the U.S. annually.
- Preterm birth, along with low birth weight babies, make up the second leading cause of infant deaths after birth defects. In 2021, there were 383,082 preterm births, representing 10.5% of live births.
- March of Dimes' U.S. Preterm Birth Grade for the U.S. is a D+. Our state's grade is ([check report card for grade](#)) and we need to do better for our children.
- The health consequences of preterm birth include developmental delays, chronic respiratory programs, and vision and hearing impairment. Preterm birth also has emotional and financial impact.
- Preterm-related causes account for 35.8% of infant deaths.
- Preterm birth rates are highest for Black infants (14.2%), followed by American Indian (11.6%), Hispanics (9.8%), whites (9.2%) and Asian/Pacific Islanders (8.8%).
- The annual societal economic cost (medical, education, and lost productivity) is an estimated \$25.2B.
- Rather than having one cause, preterm birth seems to be triggered by multiple, interacting biologic and environmental factors. We do know that a history of preterm birth, multiple gestations, and certain uterine and/or cervical problems are the strongest risk factors for preterm birth.
- Without access to routine, quality health care these moms and babies have an increased chance of maternal and infant mortality and morbidity, including low birth weight and preterm birth.
- March of Dimes' Maternity Care Desert Report showed that 7 million women of childbearing age live in counties without access or with limited access to maternity care. These women are giving birth to more than 500,000 babies a year and this is putting them at risk of serious health complications.

# PREEMIE Reauthorization Act

## Section by Section



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<b>SECTION 1. SHORT TITLE</b>	This Act may be cited as the “PREEMIE Reauthorization Act of 2023”.
<b>SECTION 2. RESEARCH RELATING TO PRETERM LABOR AND DELIVERY AND THE CARE, TREATMENT, AND OUTCOMES OF PRETERM AND LOW BIRTH WEIGHT INFANTS.</b>	<p>Reauthorizes funding for PRAMS, the Pregnancy Risk Assessment Monitoring System. It is a surveillance project of the CDC and health departments. PRAMS collects site-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy. PRAMS surveillance currently covers about 81% of all U.S. births.</p> <ol style="list-style-type: none"><li>1) Updates 42 U.S.C. 247b–4f(e) from “fiscal years 2019 through 2023” to “fiscal years 2024 through 2028”.</li><li>2) TECHNICAL CORRECTION: the PREEMIE Reauthorization Act of 2018 (Public Law 115–328; 132 Stat. 4471), section 2 of such Act is amended, in the matter preceding paragraph (1), by striking “Section 2” and inserting “Section 3”.</li></ol>
<b>SECTION 3. PUBLIC AND HEALTH CARE PROVIDER EDUCATION AND SUPPORT SERVICES.</b>	<p>Reauthorizes funding for programs to increase the availability, awareness, and use of pregnancy and post-term information services that provide evidence-based, clinical information through counselors, community outreach efforts, electronic or telephonic communication, or other appropriate means regarding causes associated with prematurity, birth defects, or health risks to a post-term infant, as well as prevention of a future preterm birth;</p> <ol style="list-style-type: none"><li>1) Inserts “(vi) screening for and treatment of chronic conditions;” into Section 399Q of the Public Health Service Act (42 U.S.C. 280g–5).</li><li>2) Updates “fiscal years 2014 through 2018” to “fiscal years 2024 through 2028”</li></ol>
<b>SECTION 4. INTERAGENCY WORKING GROUP.</b>	<p>The initiative would create an HHS entity that would align and coordinate HHS activities, and those of other departments as allowed, related to infant health.</p> <ol style="list-style-type: none"><li>1) Updates language to “Shall” from “May”</li></ol>
<b>SECTION 5. STUDY ON PRETERM BIRTHS.</b>	<p>Commissions a new study by the National Academies of Sciences, Engineering, and Medicine to better understand the:</p> <ol style="list-style-type: none"><li>1) The financial costs of premature birth to society, including long-term costs to society and families of NICU stays and post-discharge care;</li><li>2) The factors that impact pre-term birth rates;</li><li>3) Identifying gaps in public health programs that have caused increases in premature birth</li><li>4) Identifying gaps in information from States on pre-term birth;</li><li>5) And calls for an analysis of 1) research strategies to develop effective drugs, treatments, or interventions to bring at risk pregnancies to term, 2) state and other programs’ best practices with respect to reducing premature birth rates and 3) precision medicine and preventative care approaches starting early in the life course;</li><li>6) All raw data collected would be made available to researchers allowing and promoting independent research on preterm birth.</li></ol>



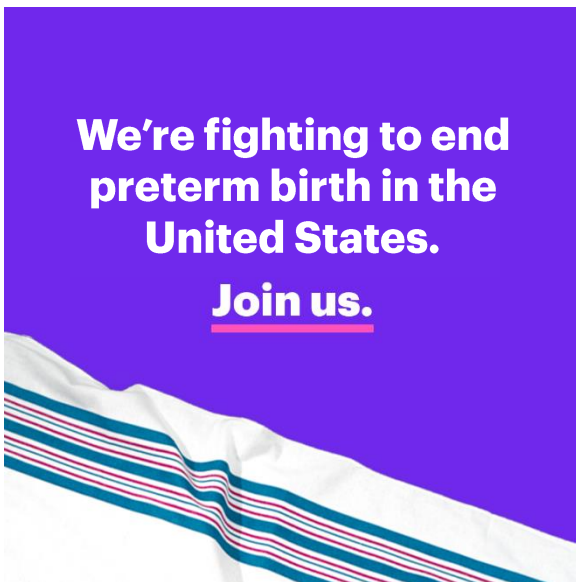
# Social Media Amplification



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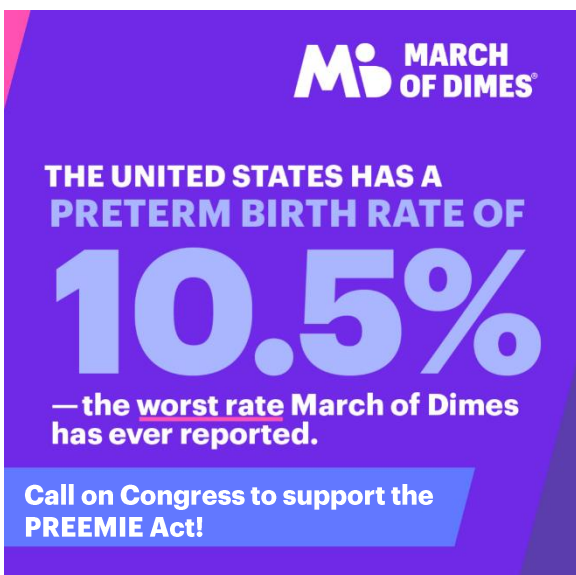
**March of Dimes has provided the following tools and resources to share information regarding the PREEMIE Act on your social channels.**

- **Hashtags:** #PREEMIEAct #BlanketChange
- **Sponsors:** @SenBooker @JohnBoozman @RepAnnaEshoo  
@michaelcburgess @RepRobinKelly @RepLBR  
@RepJenKiggans
- **Call to Action: Link:** <https://p2a.co/wxg8qin> or **text code:** "PREEMIE" to 52886.



Download social graphic

- The PREEMIE Reauthorization Act is the federal government's commitment to preventing preterm birth and its long-term consequences through funding research, support and prevention programs and coordination of government efforts. Learn more: <https://www.marchofdimes.org/preemie-act-2023>
- In addition to causing 35.8% of infant deaths, preterm birth costs society an estimated \$25.2B annually. Help us reverse these trends by supporting the PREEMIE Act today! Learn more: <https://www.marchofdimes.org/preemie-act-2023>
- Preterm birth and its complications are a leading cause of infant death in the U.S. and globally. Thank you @MOC-HANDLE for supporting the #PREEMIEAct, the only federal law dedicated to preventing and treating preterm and ensuring babies have the best possible start in life.



Download social graphic

- Preterm birth is a serious issue in our country. The PREEMIE Reauthorization Act is legislation funding federal research and programs to address the prematurity crisis. Tell your lawmakers we need to pass the PREEMIE Reauthorization Act now: <https://p2a.co/BXLUwgo>
- Did you know Black and Native American women are 62% more likely to give birth preterm than White women? Call on Congress to act by passing the #PREEMIEAct: <https://p2a.co/BXLUwgo>
- In addition to causing 35.8% of infant deaths, preterm birth costs society an estimated \$25.2B annually. Help us reverse these trends by supporting the PREEMIE Act today! Learn more: <https://www.marchofdimes.org/preemie-act-2023>

# Sample Letter of Support



**HEALTHY  
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Organization  
Address  
City, State Zip

Dear XXXXX,

On behalf of XXX Organization, I write to express our strong support for the PREEMIE Reauthorization Act of 2023 (S.XXX/H.R. XXX), vital legislation to reauthorize and expand research, education and intervention activities related to preterm birth. It was introduced on May 11, 2023 by Sen. Michael Bennet (D-CO), Sen. John Boozman (R-AR), Rep. Michael Burgess (R-TX), Rep. Anna Eshoo (D-CA), Rep. Mariannette Miller-Meeks (R-IA), Rep. Robin Kelly (D-IL), Rep. Lisa Blunt Rochester (D-DE) and Rep. Jen Kiggans (R-VA)..

U.S. preterm birth rate has steadily increased since 2014 to 10.5% in 2021, with a significant 4% increase in just one year and the highest recorded rate since 2007. This represents an increase to 383,082 preterm births. Black and Native American women are 62% more likely to have a preterm birth and their babies are twice as likely to die as compared to White women. Preterm birth also accounts for 35.8% of infant deaths in the U.S. and the annual societal economic cost (medical, education, and lost productivity) is an estimated \$25.2 billion.

Due to the lack of any cures for pregnancy complications, all practitioners and parents can do is deliver and try their best to care for babies born preterm. If they survive, babies born preterm may suffer long-term impacts such as intellectual and developmental delays, behavioral problems, neurological disorders, visual and hearing impairments, cerebral palsy, and respiratory insufficiency or intestinal insufficiency.

While many risk factors associated with preterm birth have been identified, the “biological basis for many of these risk factors and the underlying mechanisms remain poorly understood.”<sup>1</sup> This is particularly true for social and structural disparities. Additionally, there is still very little understanding of how pregnancy itself works as a baseline, impacting our understanding and ability to address preterm birth through effective prevention and treatment.

The PREEMIE Act will help reduce preterm birth, prevent newborn death and disability caused by preterm birth, expand research into the causes of preterm birth, and promote the development, availability, and uses of evidence-based standards of care for pregnant women.

Among the programs authorized by the PREEMIE Act is CDC’s highly successful Pregnancy Risk Assessment Monitoring System (PRAMS). PRAMS collects site-specific, population-based data tracking maternal attitudes and experiences before, during, and shortly after pregnancy on 81% of births and is used by researchers and state, territory, and local governments to plan and review programs and policies aimed at reducing health problems among mothers and infants. This legislation will also provide for a new study on the costs, impact of non-medical factors, gaps in public health programs that lead to prematurity, and calls for HHS recommendations to prevent preterm birth.

We look forward to working with you this year to advance this critical legislation. For more information, please contact NAME/Title/Contact.

Sincerely,

<sup>1</sup>Rubens C, Sadovsky Y, LMuglia L, et al. Prevention of preterm birth: Harnessing science to address the global epidemic. *Science Translational Medicine*. 2014; 6(262):262sr5. doi: 10.1126/scitranslmed.3009871.

# Sample Call to Action Text (Pg1)



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## Call-to-Action to Pass the PREEMIE Act:

The U.S. is experiencing a preterm birth crisis, with rates at a 15-year high. Preterm birth affects more than 1 in 10 babies, and its complications are a leading cause of infant death.

The PREEMIE Reauthorization Act is the federal government's commitment to preventing preterm birth and its long-term consequences through funding research, support and prevention programs and coordination of government efforts. This legislation is an essential tool to tackle the crisis and provide better health outcomes for babies and families.

Send a message to your federal lawmakers asking them to support the PREEMIE Reauthorization Act and turn the tide of this crisis today.

## Letter to Lawmakers Co-sponsoring the PREEMIE Act:

As a constituent and advocate for infant health, thank you for working to protect our nation's babies and working to end preterm birth by co-sponsoring the PREEMIE Reauthorization Act of 2023!

The need for this legislation is clearer now than ever before, and we know that funding, programs and attention directed towards ending preterm birth can help to reverse this health crisis. Your support of this legislation shows that we are moving in the right direction to end preterm birth in the U.S.

Thank you for your leadership on this issue!

Regards,

# Sample Call to Action Text (Pg2)



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## Letter to Lawmakers NOT Cosponsoring the PREEMIE Act:

As a constituent and advocate for infant health, I urge you to renew the federal government's commitment to ending preterm birth by supporting the bipartisan PREEMIE Reauthorization Act of 2023.

Preterm birth is far too common in the U.S. and unfortunately its frequency is increasing. In 2021, there were more than 383,000 preterm births in the U.S. representing a 15-year high rate.

Fortunately, the PREEMIE Reauthorization Act contains policies to address this crisis. Last reauthorized in 2018, the legislation would:

- Renew the Centers for Disease Control and Prevention's research and programs on preterm birth.
- Reauthorize the Health Resources and Services Administration's activities to promote health pregnancies and prevent preterm birth.
- Establish an entity in the Department of Health and Human Services to coordinate all federal activities and programs related to preterm birth, infant mortality and other adverse birth outcomes.
- Provide for a new study on the costs of preterm birth, social factors that impact preterm birth, gaps in public health programs that lead to prematurity, best practices across the nation, and recommendations on ways to prevent preterm birth.

We can, and must, do more to provide resources and protections for our nation's babies. I urge you to join us in working to end this crisis by supporting the PREEMIE Reauthorization Act today. Thank you for your time and consideration to my request!

Regards,



## **Electronic Resources:**

[March of Dimes PREEMIE Reauthorization Act Webpage](#)

[PREEMIE Reauthorization Act Bill Text](#)

[March of Dimes PREEMIE Advocacy Campaign](#)

[March of Dimes 2022 Report Card](#)

[Sample letter of support](#)

[PREEMIE issue brief](#)

[Social Press Kit](#)

[Sharable Social Graphic 1](#)

[Sharable Social Graphic 2](#)

