April 8, 2021

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

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

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

As you develop the Labor, Health and Human Services, Education and Related Agencies appropriations legislation for Fiscal Year 2022 (FY22), **we urge you to provide $100 million for the Surveillance for Emerging Threats to Mothers and Babies Network (SET-NET) at the Centers for Disease Control and Prevention (CDC)**. This funding would enable SET-NET to scale nationally and serve as the nationwide preparedness and response network the United States needs to protect pregnant individuals and infants from emerging public health threats. Further, we recommend that you include the following bill report language:

> *Surveillance for Emerging Threats to Mothers and Babies Network*.— The committee includes $100,000,000 to expand CDC's Surveillance for Emerging Threats to Mother and Babies Network (SET-NET)'s funded entities to all U.S. States, the District of Columbia, U.S. territories, and tribal entities. The program supports CDC's collaboration with State, tribal, territorial, and local health departments to monitor the impact of emerging health threats, including COVID-19, on pregnant people and their babies and inform public health and clinical decision-making to improve the health of pregnant people and infants.

The United States continues to grapple with ongoing public health emergencies that put our most vulnerable populations, including pregnant individuals and infants, at risk. SET-NET is an innovative data collection system that links maternal exposures during pregnancy to health outcomes for babies. Building on a mom-baby linked data collection approach developed in response to the Zika outbreak, SET-NET leverages existing data sources to enable CDC and health departments to detect the impact of new and emerging health threats on pregnant individuals and their babies. Findings from SET-NET help parents, health care providers, public

health professionals, and policymakers take action to save lives, reduce risk, and improve the health of pregnant individuals and infants.

In FY21, SET-NET provided support to 29 state, local, and territorial health departments to monitor the impact on pregnant individuals and their babies of exposure to Zika, syphilis, hepatitis C, or COVID-19. With sufficient funding, SET-NET could expand to support 64 state, local, and territorial health departments as they collect, analyze, and report data on existing and emerging threats to pregnant individuals and their babies, from Zika, to COVID, and even environmental hazards like lead or perfluouroalkyl substances (PFAS).

As a result of the public health data infrastructure built by SET-NET, and with some emergency COVID funding, funded sites were able to rapidly adapt their surveillance systems to collect data to answer questions about the health effects of COVID-19 exposure on pregnant individuals and their babies. The latest published findings from SET-NET data showed that pregnant people with COVID-19 may be at increased risk of having a preterm infant compared to pregnant people without COVID-19. There are still unanswered questions about the impact of COVID-19 during pregnancy that data from SET-NET entities will continue to inform.

Thank you for your consideration of this request to provide **$100 million for SET-NET in FY22** to fully fund our national preparedness and response network focused on pregnant individuals and infants. Investing in this sustainable framework for rapid, evidence-based data collection can ensure that the United States is prepared to meet the unique needs of pregnant individuals and infants in response to a wide range of public health threats.

Sincerely,

American Academy of Family Physicians
American Academy of Pediatrics
American College of Clinical Pharmacy
American College of Nurse-Midwives
American College of Obstetricians and Gynecologists
American Nurses Association
American Public Health Association
American Society for Reproductive Medicine
Association of Maternal & Child Health Programs
Association of Public Health Laboratories
Association of Schools and Programs of Public Health
Association of State and Territorial Health Officials
Association of State Public Health Nutritionists
Association of University Centers on Disabilities
Big Cities Health Coalition
Center for Health Equity, University of California, San Francisco
Children's Environmental Health Network
Commissioned Officers Association of the U.S. Public Health Service, Inc. (COA)
Every Mother Counts
Families USA

First Focus Campaign for Children
Healthy Mothers, Healthy Babies Coalition of Georgia
March of Dimes
National Association for Children's Behavioral Health
National Association of County and City Health Officials
National Association of Nurse Practitioners in Women's Health
National Association of Pediatric Nurse Practitioners
National Association of State Emergency Medical Services Officials
National Birth Defects Prevention Network
National League for Nursing
National Network of Public Health Institutes
National WIC Association
Nurse-Family Partnership
Organization of Teratology Information Specialists
Society for Birth Defects Research and Prevention
Society for Maternal-Fetal Medicine
Society for Women's Health Research
Trust for America's Health