

October 28, 2024

The Honorable Robin Kelly
U.S. House of Representatives
2329 Rayburn House Office Building
Washington, DC 20515

The Honorable Michael Burgess, MD
U.S. House of Representatives
2161 Rayburn House Office Building
Washington, DC 20515

The Honorable Lisa Blunt Rochester
U.S. House of Representatives
1724 Longworth House Office Building
Washington, DC 20515

The Honorable Mariannette Miller-Meeks, MD
U.S. House of Representatives
1034 Longworth House Office Building
Washington, DC 20515

The Honorable Jen Kiggans
U.S. House of Representatives
1037 Longworth House Office Building
Washington, DC 20515

Dear Representatives Kelly, Blunt Rochester, Kiggans, Burgess, and Miller-Meeks:

On behalf of the physician and medical student members of the American Medical Association (AMA), I want to express our support for H.R. 3226, the “Prematurity Research Expansion and Education for Mothers who deliver Infants Early Act” (or the “PREEMIE Reauthorization Act of 2023”). This bipartisan legislation would reauthorize the PREEMIE Act until 2028, which would allow the Centers for Disease Control and Prevention to continue research and data collection on infants who are born prematurely and enable the Health Resources and Services Administration to continue programs that are aimed at improving treatment and outcomes for infants who are born early. The bill would also establish a study to examine the factors that lead to preterm birth and work to identify effective prevention and treatment options.

The AMA is deeply concerned about the high rates of maternal and infant morbidity and mortality in our country. Racial and ethnic differences exist not only in maternal mortality and morbidity rates but also in preterm birth rates. In 2022, preterm births affected about one out of every 10 infants born in the United States with Black women experiencing preterm births at a rate that was about 50 percent higher (14.6 percent) than white (9.4 percent) or Hispanic women (10.1 percent).¹ Babies that are born too early (especially before 32 weeks) can experience lifelong complications and have higher rates of death and disability. For example, in 2021, preterm birth and low birth weight accounted for about 14.8 percent of infant deaths (deaths before 1 year of age) and many babies who survived had breathing problems, feeding difficulties, cerebral palsy, developmental delay, vision problems, and hearing problems.²

¹ <https://www.cdc.gov/maternal-infant-health/preterm-birth/index.html#:~:text=Unless%20there%20is%20a%20medical,before%201%20year%20of%20age>), last viewed on October 8, 2024.

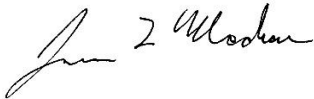
² *Id.*

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The AMA believes that the PREEMIE Reauthorization Act of 2023 would help improve infant health outcomes across the United States. By continuing these vital programs that enable physicians to have additional knowledge and resources about how to best care for preterm infants, the United States can help to create better care for both mothers and newborns.

The AMA is committed to tackling the issues surrounding maternal mortality and morbidity and working with Congress to find solutions to improve maternal and infant health outcomes nationwide. We appreciate your leadership on this critical issue and look forward to working with you to advance H.R. 3226.

Sincerely,

A handwritten signature in black ink, appearing to read "Jim L. Madara". The signature is written in a cursive, flowing style.

James L. Madara, MD