February 4, 2013

The Honorable Lamar Alexander  
U.S. Senate  
Washington, D.C. 20515

The Honorable Michael Bennet  
U.S. Senate  
Washington, D.C. 20515

The Honorable Anna Eshoo  
U.S. House of Representatives  
Washington, D.C. 20510

The Honorable Leonard Lance  
U.S. House of Representatives  
Washington, D.C. 20510

Dear Senators Alexander and Bennet and Representatives Eshoo and Lance,

The undersigned organizations committed to the health and wellbeing of mothers, infants, children and families strongly endorse the PREEMIE Reauthorization Act. We applaud your commitment to improving the health of our nation’s women and children and look forward to working with you to ensure swift passage of this important legislation.

Every day, one in nine infants is born premature in our nation. Preterm delivery can happen to any pregnant woman, and often no one knows why. Preterm birth is the leading cause of neonatal death, and those babies who survive are more likely to suffer from intellectual and physical disabilities. In addition to its human, emotional, and financial impact on families, preterm birth places a tremendous economic burden on our nation. A 2006 report by the Institute of Medicine found the cost associated with preterm birth in the United States was $26.2 billion annually, or $51,600 per infant born preterm. Employers, private insurers and individuals bear approximately half of the costs of health care for these infants, and another 40 percent is paid by Medicaid.

The original PREEMIE Act (P.L. 109-450) brought the first-ever national focus to prematurity prevention. The Surgeon General’s Conference on the Prevention of Preterm Birth created by the Act generated a public-private agenda to spur innovative research at the National Institutes of Health (NIH) and Centers for Disease Control and Prevention (CDC) and support evidence-based interventions to prevent preterm birth. Due to the momentum of the 2006 PREEMIE Act, we are making progress. Over the last 5 years, the preterm birth rate has declined, and now stands below 12 percent for the first time in nearly a decade. The PREEMIE Reauthorization Act will continue to fuel our progress by supporting federal research and promoting known interventions and community initiatives.

During the 112th Congress, the bill passed both the U.S. Senate and the U.S. House of Representatives with strong bipartisan support. Thank you for your continued commitment to protect and maintain the current federal preterm birth-related activities and lay the foundation for future investments. We look forward to working with you on behalf of families across the nation to advance this important legislation.

Sincerely,
American Academy of Pediatrics
American Association on Health and Disability
American College of Nurse-Midwives
American Congress of Obstetricians and Gynecologists
American Organization of Nurse Executives
American Public Health Association
American Thoracic Society
Association of Maternal and Child Health Programs
Association of State and Territorial Health Officials
Association of Women’s Health, Obstetric and Neonatal Nurses
Children’s Hospital Association
Council of Women’s and Infants' Specialty Hospitals
First Candle/SIDS Alliance
March of Dimes
National Association of County and City Health Officials
National Association of Neonatal Nurses
National Association of Nurse Practitioners
Preeclampsia Foundation
RESOLVE: The National Infertility Association
Society for Maternal-Fetal Medicine