



THE NETWORK NEWSLETTER



A Health Policy and Advocacy Update - April 2022

Thank you for your participation in the Society for Maternal-Fetal Medicine's State Liaison Network (SLN). As a part of this member-led initiative focused on state-level advocacy and implementation of state-based public health programs, we are bringing you a quarterly newsletter to share advocacy, policy, and public health updates, happenings, and actions from the Society.

If you have any questions or are interested in advocating on a certain issue at the state level, please respond directly to Helena Hernandez, Manager, State Advocacy (hhernandez@smfm.org). If you have not done so already, please update your SLN member profile with your most up to date information using this [survey](#).



SLN IN ACTION

As a part of SMFM's [new strategic plan](#), the Society will intensify our support for advocacy in state capitals across the country. Given the continuing influx of abortion care bans and restrictions in state legislatures, SMFM's [state advocacy](#) efforts will include a significant focus on protecting and expanding access to the full spectrum of reproductive health care services, including abortion and contraception care.

SMFM and our SLN members have already been opposing harmful, unscientific anti-abortion legislation that affects the care MFMs can provide for their patients. Below is a list of states and the bills that SMFM has acted on so far this year.

Florida – In February, SMFM wrote to the leadership of the Florida legislature opposing legislation that would ban most abortions after 15 weeks of gestation. This ban is similar to the Mississippi abortion ban currently under review by the Supreme Court in the *Dobbs v. Jackson Women's Health Organization* case. Unfortunately, this month Governor DeSantis signed this bill into law, and its provisions will take effect on July 1, 2022.

Idaho - In March, SMFM and an SLN member wrote to Governor Little of Idaho opposing a Texas S.B. 8 copy-cat bill that would allow certain family members to sue a medical provider for providing abortion care after 6 weeks of gestation. Unfortunately, Governor Little signed this bill into law in March.

Tennessee – In March, SMFM and members of the Tennessee SLN wrote to Tennessee lawmakers to oppose legislation that would effectively ban abortion care in the state and allow private citizens to sue anyone for performing an abortion or helping someone to get an abortion.

Arizona – In March, SMFM and members of the Arizona SLN wrote to Arizona lawmakers to oppose a 15-week abortion ban. Like the Florida ban described above, this ban is similar to the Mississippi abortion ban under review by the Supreme Court. Unfortunately, Governor Ducey signed this bill into law in March.

Missouri – In March, SMFM wrote to leaders in the Missouri legislature urging them to oppose any legislation that would restrict or ban abortion care in the state.

Puerto Rico – This month, SMFM and an SLN member in Puerto Rico wrote to Puerto Rico Senate leaders opposing a 22-week abortion ban.

SLN MEMBER REQUEST PORTAL

To better respond to SLN member requests for engagement on state-level issues, SMFM's Public Affairs team is creating a system for members to submit requests. We will be sending out more details with the submission form soon.

If you need assistance on an advocacy or public health initiative before the portal is up and running, please reach out to Helena Hernandez, Manager, State Advocacy (hhernandez@smfm.org). We can help you with letter writing, testimony, or any other requests.

FEDERAL HAPPENINGS

FEDERAL SPENDING BILL INCLUDES KEY SMFM ADVOCACY PRIORITIES

In March, President Joe Biden signed legislation that will fund government agencies through the end of fiscal year (FY) 2022. Included in the \$1.5 trillion bill are a number of provisions focused on maternal health. Notably, the bill includes the text of long-time SMFM priority, the **Maternal Health Quality Improvement Act (MHQIA)**. MHQIA will bolster the Alliance for Innovation on Maternal Health (AIM) Program, authorize new programs to train clinicians on implicit bias and culturally competent care, support a new initiative to improve postpartum care, create new rural obstetric networks, and much more. SMFM is thrilled MHQIA is now law and will lead the charge to guarantee programs are implemented effectively and equitably.

The FY 2022 spending bill also includes a small but critical provision to advance SMFM's goal of including more pregnant and lactating people in clinical trials. It will **fund the National Academies of Science, Engineering, and Medicine (NASEM) to convene a workshop to examine real and perceived liability barriers to including pregnant and lactating people in clinical trials**. This convening was a priority of the Task Force on Research Specific to Pregnant Women and Lactating Women (PRGLAC), and the recommendations from the expert convening will help guide our future work in this space.

You can read more about these and other important provisions in the federal spending bill in [this SMFM summary](#).

WOMEN'S HEALTH PROTECTION ACT

We were disappointed that the U.S. Senate did not pass the Women's Health Protection Act (WHPA). WHPA was previously passed by the U.S. House of Representatives in the fall of 2021. The legislation would have made it a statutory right to access abortion care, provide abortion care, and end medically unnecessary bans and restrictions on abortion care, no matter where one lives. Although Congress was unable to protect an individuals' right to abortion care, SMFM will continue to advocate for policies that promote individuals' health and wellbeing and ensure that they have access to the full spectrum of reproductive health care services.

DECISION IN CASE CHALLENGING MISSISSIPPI'S 15-WEEK ABORTION BAN EXPECTED IN JUNE

SMFM continues to closely monitor the *Dobbs v. Jackson's Women's Health Organization* Supreme Court of the United States (SCOTUS) case. This past September, we submitted an [amicus brief](#) along with the Royal College of Obstetrics and Gynaecologists, the U.S. Association for the Study of Pain, and medical and scientific experts to SCOTUS in support of Jackson Women's Health Organization on fetal development. We expect a decision by SCOTUS in June this summer.

TAKE ACTION

SMFM's Public Affairs Teams shares ways to quickly take action to make a big difference for mothers and their infants!

ACT NOW TO FUND FEDERAL MATERNAL HEALTH PROGRAMS

Deadlines are fast approaching for your Member of the U.S. House of Representatives to join open Congressional sign-on letters asking for increased funding for maternal health initiatives, including the AIM program, state-based Perinatal Quality Collaboratives, Maternal Mortality Review Committees, and many others. Please take just two minutes to send an email urging your Representative to support programs to prevent maternal deaths and reduce inequities in pregnancy outcomes. [Click here to send your Representative a letter.](#)

SHARE YOUR ABORTION STORY

If you are a provider of abortion care, someone who has had an abortion, or someone who has witnessed the inequity in access to abortion care, please share your story with SMFM. Sharing your story is extremely important and necessary to destigmatize abortion care, uplift others who share a similar experience, and take back the abortion narrative.

[Use this form to share your story](#) and use your voice to advocate for the protection and expansion of abortion care across the United States.

SLN WEBINAR SERIES

UPCOMING WEBINAR: MAY 5 AT NOON ET

You are invited to the next SLN webinar, ***MFM Physicians as Advocates: Lessons from the PRH Leadership Training Academy***, on Thursday, May 5 at 12:00 pm ET. The webinar will provide an overview of the Physicians for Reproductive Health's (PRH) Leadership Training Academy (LTA), a 9-month training program designed for physicians to strengthen their leadership and advocacy skills for sexual and reproductive health services, including abortion and contraception. Researchers from the City University of New York's School of Public Health (CUNY SPH) recently completed an independent 3-year mixed methods evaluation of the program. Come learn about the program, results from the evaluation, and from an MFM who is an alumni of the LTA program and what it meant for their engagement in advocacy.

[REGISTER HERE](#)

Speakers:

- **Anita Brakman**, Senior Director for Education, Research and Training at Physicians for Reproductive Health
- **Diana Romero**, PhD, MA, Associate Professor in the Department of Community Health and Social Sciences and director of the Maternal, Child, Reproductive and Sexual Health specialization (MCRSH) at the CUNY Graduate School of Public Health and Health Policy
- **Heidi Jones**, PhD, MPH, Associate Professor in the Department of Epidemiology and Biostatistics and the Director of the Doctoral Program in Epidemiology at the CUNY

- **Leilah Zahedi-Spung**, MD, Regional Obstetrical Consultants

ARCHIVED WEBINARS

Did you miss our April 1 SLN event focused on escalating legislative and judicial threats to comprehensive reproductive health care services? No worries! You can find a recording of the lively and informative event here: <https://youtu.be/WVryrQ67kjo>.

PARTNER OPPORTUNITIES

PHYSICIANS FOR REPRODUCTIVE HEALTH LEADERSHIP TRAINING ACADEMY

Interested in Applying to the Physicians for Reproductive Health's Leadership Training Academy? The application is now open for the Class of 2023! The application is open until May 16th, and you can apply at this link <https://prh.org/ita-application/>. If you have questions about the application or the program, please feel free to reach out to the program director, Taylor Rose Ellsworth at tellsworth@prh.org.

CDC RELEASES SEVERAL NOTICES OF FUNDING OPPORTUNITIES

The CDC has released new notice of funding opportunities (NOFOs) for coordinating and managing maternal mortality review committees, implementing statewide perinatal quality collaboratives, creating a framework to address prenatal alcohol and other substance use and fetal alcohol spectrum disorders (FASDs), and enhancing surveillance of children with FASDs. Additional details can be found below.

NOFO - PREVENTING MATERNAL MORTALITY: SUPPORTING MATERNAL MORTALITY REVIEW COMMITTEES

CDC announced the availability of funds to support agencies and organizations that coordinate and manage [Maternal Mortality Review Committees](#) (MMRCs). This NOFO aims to improve data quality to identify and characterize pregnancy-related deaths and addresses health inequities by supporting the capacity to develop and implement data-informed strategies to prevent pregnancy-related deaths and reduce disparities among disproportionately impacted populations. More information about this NOFO, also known as CDC-RFA-DP22-2211, can be found online, [here](#). The application period for this NOFO closes on **June 20, 2022 at 11:59 pm ET**.

NOFO - STATEWIDE PERINATAL QUALITY COLLABORATIVES

CDC announced the availability of funds to implement statewide [Perinatal Quality Collaboratives](#) (PQCs). This NOFO, also known as CDC-RFA-DP22-2207, can be found online, [here](#). This 5-year cooperative agreement will enhance PQC capacity to make measurable improvements in perinatal care and outcomes statewide. The application period for this NOFO closes on **June 6, 2022 at 11:59 pm ET**.

- Component A will support PQCs to rapidly conduct population-level perinatal quality improvement initiatives, with a focus on ensuring an equitable distribution of benefits. We anticipate funding about 22 PQCs.
- Component B will support the coordinating center of the National Network of Perinatal Quality Collaboratives (NNPQC) in providing technical assistance and capacity building for all PQCs in the United States to improve uptake of perinatal quality improvement initiatives nationwide.

NOFO - NATIONAL PARTNERSHIPS TO ADDRESS PRENATAL ALCOHOL USE AND OTHER SUBSTANCE USE AND FETAL ALCOHOL SPECTRUM DISORDERS

CDC announced the availability of funds to build a collaborative framework of national partner organizations that contribute to 1) reducing prenatal alcohol and other substance use, 2) improving support services and access to care, and 3) improving identification and health of children and families with fetal alcohol spectrum disorders (FASDs). More information about this NOFO, also known as CDC-RFA-DD22-2201, can be found online, [here](#). The application period for this NOFO closes on **May 2, 2022 at 11:59 pm ET**.

NOFO - I-FASD: UNDERSTANDING CLINICAL DATA AND PATHWAYS THROUGH CFARE TO INFORM SURVEILLANCE OF CHILDREN WITH FETAL ALCOHOL SPECTRUM DISORDER

CDC announced the availability of funds to enhance understanding about the feasibility of using existing healthcare records for public health surveillance of children with FASDs. This feasibility project will characterize information accessible within health-related data systems for children suspected or diagnosed with an FASD, as well as describe the referral, evaluation, and diagnosis processes. Findings will be used to inform the development of future public health surveillance activities. More information about this NOFO, also known as CDC-RFA-DD22-2202, can be found online, [here](#). The application period for this NOFO closes on **May 2, 2022 at 11:59 pm ET**.

Please share any feedback or items for future newsletters directly with Helena Hernandez, SMFM's State Advocacy Manager (hhernandez@smfm.org).

You are receiving this newsletter because you are a member of SMFM's State Liaison Network. If you'd no longer like to receive these communications, please unsubscribe below. If you'd prefer to no longer be a member of the Network, please email Anna Hall, SMFM's Advocacy and Communications Coordinator (ahall@smfm.org).

STAY CONNECTED

