

118TH CONGRESS
1ST SESSION

S. 2978

To authorize funding for the establishment and implementation of infant mortality pilot programs in standard metropolitan statistical areas with high rates of infant mortality, and for other purposes.

IN THE SENATE OF THE UNITED STATES

SEPTEMBER 28 (legislative day, SEPTEMBER 22), 2023

Mr. VAN HOLLEN introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To authorize funding for the establishment and implementation of infant mortality pilot programs in standard metropolitan statistical areas with high rates of infant mortality, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Nationally Enhancing
5 the Well-being of Babies through Outreach and Research
6 Now Act” or the “NEWBORN Act”.

1 **SEC. 2. INFANT MORTALITY PILOT PROGRAMS.**

2 Section 330H of the Public Health Service Act (42
3 U.S.C. 254c-8) is amended—

4 (1) by redesignating subsections (e) and (f) as
5 subsections (f) and (g), respectively;

6 (2) by inserting after subsection (d) the fol-
7 lowing:

8 “(e) INFANT MORTALITY PILOT PROGRAMS.—

9 “(1) IN GENERAL.—The Secretary shall award
10 grants to eligible entities to establish, implement,
11 and oversee infant mortality pilot programs.

12 “(2) PERIOD OF A GRANT.—The period of a
13 grant under this subsection shall be not more than
14 5 years.

15 “(3) PREFERENCE.—In awarding grants under
16 this subsection, the Secretary shall give preference
17 to—

18 “(A) eligible entities proposing to serve
19 any of the 50 counties or groups of counties
20 with the highest rates of infant mortality in the
21 United States, based on the most recent 3 years
22 of available data, as determined by the Sec-
23 retary; and

24 “(B) eligible entities the proposed infant
25 mortality pilot program of which would ad-
26 dress—

1 “(i) birth defects;

2 “(ii) preterm birth and low birth
3 weight;

4 “(iii) sudden infant death;

5 “(iv) maternal pregnancy complica-
6 tions; or

7 “(v) injuries to infants.

8 “(4) USE OF FUNDS.—An infant mortality pilot
9 program carried out using a grant under this sub-
10 section may—

11 “(A) include the development of a plan
12 that identifies the individual needs of each com-
13 munity to be served and strategies to address
14 those needs;

15 “(B) provide outreach to at-risk mothers
16 through programs deemed appropriate by the
17 Administrator;

18 “(C) develop and implement standardized
19 systems for improved access, utilization, and
20 quality of social, educational, and clinical serv-
21 ices to promote healthy pregnancies, full-term
22 births, and healthy infancies delivered to women
23 and their infants, such as—

24 “(i) counseling on infant care, feed-
25 ing, and parenting;

1 “(ii) postpartum care;

2 “(iii) prevention of premature deliv-
3 ery; and

4 “(iv) additional counseling for at-risk
5 mothers, including smoking cessation pro-
6 grams, drug treatment programs, alcohol
7 treatment programs, nutrition and physical
8 activity programs, postpartum depression
9 and domestic violence programs, social and
10 psychological services, dental care, and
11 parenting programs;

12 “(D) establish a rural outreach program to
13 provide care to at-risk mothers in rural areas;

14 “(E) establish a regional public education
15 campaign, including a campaign to—

16 “(i) prevent preterm births; and

17 “(ii) provide education to the public
18 about infant mortality;

19 “(F) provide for any other activities, pro-
20 grams, or strategies, as identified by the plan
21 under subparagraph (A); and

22 “(G) coordinate efforts between—

23 “(i) the health department of each
24 county or other eligible entity to be served

1 through the infant mortality pilot program;
2 and

3 “(ii) existing entities that work to re-
4 duce the rate of infant mortality within the
5 area of any such county or other eligible
6 entity.

7 “(5) LIMITATION.—Of the funds received
8 through a grant under this subsection for a fiscal
9 year, an eligible entity shall not use more than 10
10 percent for program evaluation.

11 “(6) REPORTS ON PILOT PROGRAMS.—

12 “(A) IN GENERAL.—Not later than 1 year
13 after receiving a grant, and annually thereafter
14 for the duration of the grant period, each eligi-
15 ble entity that receives a grant under paragraph
16 (1) shall submit a report to the Secretary that
17 details the infant mortality pilot program car-
18 ried out using the grant.

19 “(B) CONTENTS OF REPORT.—The reports
20 required under subparagraph (A) shall include
21 information such as the methodology of, and
22 outcomes and statistics from, the infant mor-
23 tality pilot program carried out using the grant.

24 “(C) EVALUATION.—The Secretary shall
25 use the reports required under subparagraph

1 (A) to evaluate, and conduct statistical research
2 on, infant mortality pilot programs carried out
3 using grants under this subsection.

4 “(7) DEFINITIONS.—In this subsection:

5 “(A) ELIGIBLE ENTITY.—The term ‘eligi-
6 ble entity’ means—

7 “(i) a county, city, or territorial
8 health department;

9 “(ii) the health department of an In-
10 dian tribe, a tribal organization, or an
11 Urban Indian organization, as such terms
12 are defined in section 4 of the Indian
13 Health Care Improvement Act; or

14 “(iii) in the case of a State with a
15 centralized health department, the State
16 health department.

17 “(B) SECRETARY.—The term ‘Secretary’
18 means the Secretary, acting through the Ad-
19 ministrator of the Health Resources and Serv-
20 ices Administration.”;

21 (3) in subsection (f), as so redesignated—

22 (A) in paragraph (1)—

23 (i) in the heading, by striking “AU-
24 THORIZATION OF APPROPRIATIONS” and

1 inserting “HEALTHY START INITIATIVE”;

2 and

3 (ii) by inserting “(other than sub-
4 section (e))” after “carrying out this sec-
5 tion”;

6 (B) by redesignating paragraph (2) as
7 paragraph (3);

8 (C) by inserting after paragraph (1) the
9 following:

10 “(2) INFANT MORTALITY PILOT PROGRAMS.—

11 There is authorized to be appropriated \$10,000,000
12 for each of fiscal years 2023 through 2027 to carry
13 out subsection (e).”; and

14 (D) in paragraph (3)(A), as so redesign-
15 ated, by striking “the program under this sec-
16 tion” and inserting “the program under sub-
17 section (a)”; and

18 (4) in each of paragraphs (2) and (3)(B) of
19 subsection (g), as so redesignated, by striking “sub-
20 section (e)(2)(B)” and inserting “subsection
21 (f)(3)(B)”.

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