



c/o National Family Planning & Reproductive Health Association
1025 Vermont Avenue NW, Suite 800, Washington, DC 20005 Phone: 202-293-3114

March 4, 2019

House Appropriations Committee
H-307, The Capitol
Washington, DC 20510

Testimony of: Family Planning Coalition, signed by **XX** organizations (listed below)

Prepared for: House Appropriations Subcommittee on Labor, Health and Human Services, and Education and Related Agencies

Concerning: Title X Family Planning Program (Department of Health and Human Services/Office of Population Affairs)

Chairwoman DeLauro, Ranking Member Cole, and Subcommittee Members:

The undersigned organizations collectively represent millions of providers, patients, administrators, researchers, and advocates who support robust federal funding of the Title X family planning program, which helps ensure that millions of individuals can obtain high-quality sexual and reproductive health services. We are deeply concerned by the administration's continued attacks on the integrity of the Title X program, as demonstrated by the devastating rule finalized by the administration this month.

We urge Congress to use the fiscal year (FY) 2020 Labor, Health and Human Services, Education, and Related Agencies appropriations bill to make a strong statement in support of Title X's high-quality, evidence-based, and patient-centered family planning care by funding the program at \$400 million.

Title X is a Critical Source of Care

Title X helps more than 4 million people access family planning and related health services at nearly 4,000 health centers around the country annually.¹ For many individuals, particularly those who have low incomes, are under- or un-insured, or are adolescents, Title X is their main access point to obtain affordable and confidential contraception, cancer screenings, sexually transmitted disease testing and treatment, complete and medically accurate information about their family planning options, and other basic care. In fact, a 2017 study found six in ten women seeking contraceptive services at a Title X health center saw no other health care providers that year.²

¹ Christina Fowler et al, "Family Planning Annual Report: 2017 National Summary," RTI International (August 2018). <https://www.hhs.gov/opa/sites/default/files/title-x-fpar-2017-national-summary.pdf>.

² Mia Zolna, Megan Kavanaugh, and Kinsey Hasstedt. "Insurance-Related Practices at Title X-Funded Family Planning Centers under the Affordable Care Act: Survey and Interview Findings." Guttmacher Institute (November 2017). <https://www.guttmacher.org/article/2017/11/insurance-related-practices-title-x-funded-family-planning-centers-under-affordable>.

The data shows that Title X makes a difference for patients. In 2015 alone, Title X–supported contraceptive services helped patients prevent an estimated 822,000 pregnancies.³ In addition to that direct clinical care, Title X supports important health center efforts that are not reimbursable under Medicaid or private insurance, including staff training and community-based sexual and reproductive health education programs. Moreover, research has shown that Title X-supported services save the federal and state governments approximately \$7 billion a year,⁴ and 75% of American adults—including 66% of Republicans, 75% of Independents, and 84% of Democrats—support the program.⁵

Title X is Severely Underfunded

In spite of the critical importance of equitable access to family planning services for all people, regardless of their income or insurance status, Title X remains woefully underfunded. In 2016, researchers from the Centers for Disease Control and Prevention, the Office of Population Affairs, and George Washington University estimated that Title X would need \$737 million annually to deliver family planning care to all uninsured women with low incomes in the United States.⁶ This estimate understates the true need for Title X, as it does not include an estimate of costs for men (who made up 12% of patients in the network in 2017⁷), gender non-binary persons, and the insured patients who rely on Title X’s confidentiality protections.

The gap between the funds appropriated and the funds needed has only grown in recent years. From 2010 to 2014 the number of women who needed publicly funded family planning services increased by one million,⁸ but Congress cut Title X’s funding by \$31 million over that period. That decrease unfortunately corresponds to dramatic decreases in the number of patients served at Title X–funded sites; the numbers dropped from 5.22 million in 2010⁹ to just over 4 million in 2017.¹⁰ **We are deeply concerned about diminishing access to high-quality family planning and urge Congress to take an initial step to reverse this devastating trend by appropriating \$400 million for Title X in FY 2020.**

Title X Patients Face Diminished Access to Affordable, Quality Health Care Under New Rule

This funding request comes in the wake of a final rule from the Trump-Pence administration that is unlawful, coercive, and dangerous for patients’ health. On February 26, the administration posted a final rule¹¹ that disregards medical ethics and evidence-based federal guidelines in

³ Jennifer Frost et al, “Publicly Funded Contraceptive Services at U.S. Clinics, 2015,” Guttmacher Institute (April 2017). <https://www.guttmacher.org/report/publicly-funded-contraceptive-services-us-clinics-2015>.

⁴ Adam Sonfield, “Beyond Preventing Unplanned Pregnancy: The Broader Benefits of Publicly Funded Family Planning Services,” *Guttmacher Policy Review* (December 2014). <https://www.guttmacher.org/gpr/2014/12/beyond-preventing-unplanned-pregnancy-broader-benefits-publicly-funded-family-planning>.

⁵ Survey Says: Birth Control Support. The National Campaign to Prevent Teen and Unplanned Pregnancy (2017). <https://thenationalcampaign.org/resource/survey-says-january-2017>.

⁶ Euna August, et al, “Projecting the Unmet Need and Costs for Contraception Services After the Affordable Care Act,” *American Journal of Public Health* (February 2016): 334-341.

⁷ Christina Fowler et al, “Family Planning Annual Report: 2017 National Summary,” RTI International (August 2018). <https://www.hhs.gov/opa/sites/default/files/title-x-fpar-2017-national-summary.pdf>.

⁸ Jennifer Frost, Lori Frohwirth and Mia Zolna, “Contraceptive Needs and Services, 2014 Update,” Guttmacher Institute (September 2016). <https://www.guttmacher.org/report/contraceptive-needs-and-services-2014-update>.

⁹ Christina Fowler et al, “Family Planning Annual Report: 2017 National Summary,” RTI International (August 2018). <https://www.hhs.gov/opa/sites/default/files/title-x-fpar-2017-national-summary.pdf>.

¹⁰ Fowler et al, “Family Planning Annual Report: 2016 National Summary.”

¹¹ Department of Health and Human Services. “Compliance with Statutory Program Integrity Requirements.” Unofficial version posted at the Public Inspection Desk of the *Federal Register* on February 26, 2019, with a posted publication date of March 4, 2019.

order to severely restrict the providers in the Title X network and the care that patients can receive from those remaining in the program. The undersigned organizations are firmly opposed to this final rule and urge Congress to provide enhanced funding in FY 2020 to support the providers currently offering high-quality, patient-centered care across the country. By increasing funding to Title X, more individuals will receive evidence-based care and Congress will powerfully demonstrate its support for the Title X program in its current form, as separate efforts to prevent the rule's implementation move ahead.

Congress has the opportunity to stand against relentless attacks on family planning and support strong public funding for the Title X family planning network. The undersigned organizations urge you to begin the expansion of family planning and related health care services with this meaningful investment in Title X.

If you have any questions or would like additional information, please contact Lauren Weiss at the National Family Planning & Reproductive Health Association at lweiss@nfprha.org or 202-293-3114 ext. 224.

Thank you for considering these requests.

Sincerely,