National **Family Planning** & Reproductive Health Association

November 20, 2017

Center for Faith-Based and Neighborhood Partnerships Office of Intergovernmental and External Affairs US Department of Health and Human Services Hubert H. Humphrey Building 200 Independence Avenue SW Washington, DC 20201

Attn: RFI Regarding Faith-Based Organizations, HHS-9928-RFI

The National Family Planning & Reproductive Health Association (NFPRHA) is pleased to provide comments on the US Department of Health and Human Services' (HHS) request for information, "Removing Barriers for Religious and Faith-Based Organizations To Participate in HHS Programs and Receive Public Funding," HHS-9928-RFI.

NFPRHA is a national membership organization representing the nation's publicly funded family planning providers, including nurse practitioners, nurses, administrators, and other key health care professionals. NFPRHA's members operate or fund a network of more than 3,500 health centers and service sites that provide high-quality family planning and other preventive health services to millions of low-income, uninsured, or underinsured individuals in 50 states and the District of Columbia. Services are provided through state, county, and local health departments as well as hospitals, family planning councils, Planned Parenthoods, federally qualified health centers and other private nonprofit organizations.

NFPRHA respects the historical role that faith-based organizations have played, and continue to play, in providing an array of important services to people and communities in need of health care, education, social services, and other charitable services in the United States. Indeed, some of NFPRHA's members are faith-based organizations themselves, and across the nation NFPRHA's members work closely with faith-based organizations to serve the diverse and wide-ranging health, social, and economic needs of the patients they serve.

However, NFPRHA is concerned that the focus and premise of HHS' RFI regarding faith-based organizations is both flawed and misplaced. Rather than discussing on the needs of the patients and individuals served by HHS' programs, the RFI is exclusively focused on soliciting information to quantify and address the presumed regulatory and programmatic barriers to the inclusion of more faith-based organizations in HHS programs.

The RFI misses the mark in two important ways. First, the RFI ignores the reality that many faith-based organizations have objections to essential health services that are the foundation of longstanding, critical HHS programs. In the arena of health care, and particularly family planning and sexual health, HHS-funded programs cannot achieve their fundamental objectives if grantees, providers, and contractors refuse to provide essential services, such as contraception, or discriminate against patient populations, including LGBTQ people.

Second, the RFI fails to consider the needs of the entities currently participating in already overburdened and underfunded HHS programs. HHS should be examining how to improve patient access to the essential health care services funded through HHS programs, which would include examining the barriers current health care providers face in meeting the needs of their patients through these programs.

NFPRHA urges HHS to prioritize the needs of the beneficiaries of HHS programs and the health care providers that already serve them at the forefront of any consideration of achieving HHS' "mission of improving Americans' health and well-being."

NFPRHA appreciates the opportunity to comment on HHS' RFI regarding faith-based organizations. If you require additional information about the issues raised in these comments, please contact Robin Summers at <u>rsummers@nfprha.org</u> or 202-552-0150.

Sincerely,

Cleve M. Ce

Clare Coleman President & CEO