

National  
**Family Planning**  
& Reproductive Health Association

November 30, 2020

Marc Garufi, Chief, Public Health Branch, Health Programs  
Hester Grippando, Program Examiner  
Cassie Boles, Program Examiner  
Office of Management and Budget  
725 17th St NW  
Washington, DC 20503

RE: Title X Family Planning Program in the FY 2022 President's Budget

Dear Marc, Hester, and Cassie:

I hope you and your loved ones are safe and healthy in these very challenging times.

I am writing today on behalf of the National Family Planning & Reproductive Health Association (NFPRHA) to urge you to include strong support for sexual and reproductive health care, and in particular, the Title X family planning program, in the fiscal year (FY) 2022 president's budget. The president's budget serves an important signal for the administration's priorities, and inclusion of \$954 million for Title X in the FY 2022 budget would act as a key, early step toward achieving President-elect Biden's pledge to "expand access to high-quality, affordable health care for all women."<sup>1</sup>

NFPRHA is a non-partisan membership association that advances and elevates the importance of family planning in the nation's health care system and promotes and supports the work of family planning providers and administrators, especially in the safety net. Representing more than 1,000 members that operate or fund more than 3,500 health centers in the United States, NFPRHA conducts and participates in research; provides educational subject matter expertise to policy makers, health care providers, and the public; and offers its members capacity-building support aimed at maximizing their effectiveness and financial sustainability as providers of essential health care. Prior to the grantee shifts caused by the 2019 Title X rule, NFPRHA represented more than 75% of service

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<sup>1</sup> "The Biden Agenda for Women." (2020). <https://joebiden.com/womens-agenda/>.

grantees and more than 90% of service sites participating in the federal family planning program.

NFPRHA requests that the FY 2022 budget include \$954 million for the Title X family planning program, an increase of \$667.5 million from FY 2020 final appropriations levels and from the FY 2021 president's budget. This funding is desperately needed to rebuild the Title X network from the destruction wrought by the Trump administration's 2019 program rule. That regulation has led more than 1,000 service sites to withdraw from the program and left six states<sup>2</sup> without a single Title X provider. Restoring the program to integrity is essential for the millions of Americans who need access to publicly funded family planning services and supplies.

This request is based on the latest federal research on Title X – in 2016, the Centers for Disease Control and Prevention and the Office of Population Affairs (OPA) found that the program would need annual appropriations of \$737 million just to serve women in need of Title X-supported services.<sup>3</sup> That figure, however, is in 2016 dollars, and does not account for men, who now make up 13% of Title X's patient population.<sup>4</sup> After adjusting for medical inflation and that proportion of male patients, NFPRHA arrived at \$954 million as the true annual need for funding.

Title X has been flat-funded at \$286,479,000 since FY 2014, down from a high of \$317,491,000 million in FY 2010 and despite the House of Representatives voting to appropriate \$400 million for the program in FY 2020.<sup>5</sup> Since that high point, Title X has seen a substantial decrease in patients served, from 5,224,862 in 2010<sup>6</sup> to 3,095,666 in 2019<sup>7</sup> (a 41% decrease). The challenges of decreased funding have been compounded by the 2019 program rule—providers funded by the program served 844,083 fewer patients just from 2018 to 2019,<sup>8</sup> and the rule was only in effect for the last five months of 2019. In light of

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<sup>2</sup> Those states are Hawaii, Maine, Oregon, Utah, Vermont, and Washington.

<sup>3</sup> Euna August et al, "Projecting the Unmet Need and Costs for contraception Services After the Affordable Care Act," *American Journal of Public Health* 106:2 (February 2016). doi: 10.2105/ AJPH.2015.302928.

<sup>4</sup> Fowler, 2020.

<sup>5</sup> US Congress. House. *Labor, Health and Human Services, Education, Defense, State, Foreign Operations, and Energy and Water Development Appropriations Act, 2020*. HR 2740. 116<sup>th</sup> Congress, 1<sup>st</sup> session. <https://www.congress.gov/bill/116th-congress/house-bill/2740>.

<sup>6</sup> Christina Fowler et al., "Family Planning Annual Report: 2010 National Summary," RTI International (September 2011). <https://opa.hhs.gov/sites/default/files/2020-07/fpar-2010-national-summary.pdf>.

<sup>7</sup> Christina Fowler et al, "Family Planning Annual Report: 2019 National Summary," Office of Population Affairs (September 2020). <https://opa.hhs.gov/sites/default/files/2020-09/title-x-fpar-2019-national-summary.pdf>.

<sup>8</sup> Christina Fowler et al., "Family Planning Annual Report: 2018 National Summary," RTI International (September 2019). <https://www.hhs.gov/opa/sites/default/files/title-x-fpar-2018-national-summary.pdf>.

these concerning trends, and in particular during a global pandemic that has increased many people's desire to prevent pregnancy,<sup>9</sup> it is time to prioritize family planning in the budget with this substantial increase.

This ask comes with the understanding that President-elect Biden will act quickly to rescind the 2019 rule, as he promised to do on the campaign trail. Following the rescission of the rule, OPA will need funds to make the program whole, including supporting grantees that remained in the program but lost providers and health centers that now will seek re-entry as well as funding for the areas of the country where grantees withdrew from Title X rather than comply with the rule. Each of these longstanding Title X providers are critical parts of the family planning safety net, and they are in need of federal funding as soon as possible. In addition, with the substantial increase NFPRHA is proposing, OPA could support thousands of new providers to offer critical preventive care to millions of additional patients and enhance Title X to meet today's patient needs, from building out telehealth infrastructure to offering the latest medical technologies, such as pre-exposure prophylaxis for HIV, to ensuring that as many sites as possible have all forms of contraception available for patients at all times.

I look forward to working with you to support access to Title X family planning care and the family planning network throughout the Biden administration. If you have any questions or would like to be connected to any current or withdrawn Title X grantees, please contact Lauren Weiss, Director, Advocacy & Communications, at [lweiss@nfprha.org](mailto:lweiss@nfprha.org) or 202-417-4867.

Sincerely,

A handwritten signature in dark ink, appearing to read "Clare M. Coleman", with a stylized flourish at the end.

Clare Coleman  
President & CEO

CC: Martha Coven, head, OMB agency review team

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<sup>9</sup> Laura Lindberg et al, "Early Impacts of the COVID-19 Pandemic: Findings from the 2020 Guttmacher Survey of Reproductive Health Experiences," Guttmacher Institute (June 2020).  
<https://www.guttmacher.org/report/early-impacts-covid-19-pandemic-findings-2020-guttmacher-survey-reproductive-health>.