June 23, 2021

Senator Patty Murray, Chairwoman Senator Roy Blunt, Ranking Member Subcommittee on Labor, Health and Human Services, Education and Related Agencies Committee on Appropriations United States Senate, SD-131 Washington, DC 20510

<u>Organization</u>: Family Planning Coalition, on behalf of 68 national organizations <u>Subcommittee</u>: Labor, Health and Human Services, Education and Related Agencies <u>Department</u>: Health and Human Services

Dear Chairwoman Murray and Ranking Member Blunt,

The 68 below organizations represent millions of health care providers, researchers, program administrators, community advocates, and, most importantly, people who seek publicly funded family planning services. We urge you to demonstrate strong support for this essential health care by allocating a substantial increase in funding towards the \$737 million needed for the Title X family planning program within the Office of Population Affairs when writing the fiscal year 2022 (FY2022) Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS) bill.

Title X is the only federal program dedicated to providing family planning services for people with low incomes. In 2018, prior to the implementation of the Trump administration's devastating new program rules, nearly 4,000 health centers in the network served close to 4 million patients.¹ Title X-funded health centers are lifelines in their communities, providing high-quality reproductive and sexual health care, including cancer screenings, testing and treatment for sexually transmitted infections, HIV/AIDS education and testing, contraceptive services and supplies, pregnancy testing, and other vital health care services. These centers work with communities that face systemic barriers to accessing quality health care, including people with low incomes, people with no or insufficient insurance, people of color, people who live and work in rural areas, LGBTQ people, and young people. In fact, a 2018 study found that 60% of women who received contraceptive services from a Title X-funded health center in 2016 had no other source of medical care in the prior year, ² and almost two-thirds of patients at these sites have incomes at or below the federal poverty level.³

¹ Christina Fowler et al, "Family Planning Annual Report: 2018 National Summary," RTI International (August 2019). <u>https://www.hhs.gov/opa/sites/default/files/title-x-fpar-2018-national-summary.pdf.</u>

² Meghan Kavanaugh, "Use of Health Insurance Among Clients Seeking Contraceptive Services at Title X-Funded Facilities in 2016," Guttmacher Institute (June 2018). https://www.guttmacher.org/journals/psrh/2018/06/use-health-insuranceamong-clients-seeking-contraceptive-services-title-x.

³ Christina Fowler et al, "Family Planning Annual Report: 2019 National Summary," RTI International (September 2020). <u>https://opa.hhs.gov/sites/default/files/2020-09/title-x-fpar-2019-national-summary.pdf</u>.

Unfortunately, Title X-supported providers cannot do this important work without federal funds, and current funding levels are woefully inadequate to meet community needs. Title X has been cut or flat-funded every year for the past decade, and the program's FY2021 allocation is just \$286.5 million. This level is well below the \$737 million that researchers from the Centers for Disease Control and Prevention, the Office of Population Affairs, and the George Washington University determined in 2016 would be needed annually just to provide family planning care to low-income women without insurance.⁴ We urge you to take a substantial step forward for family planning access and adopt that recommended figure for FY2022.

This funding increase is particularly vital given the harms the Trump administration inflicted on the program, the providers funded by it, and, most importantly, the people who seek family planning and sexual health care. On July 15, 2019, that administration's new regulations for Title X went into effect, and the impact was felt almost immediately: by fall 2019, approximately 1,000 health centers across 33 states had withdrawn from the program. In 2018, those health centers had provided 1.6 million patients with high quality, Title X-supported family planning and sexual health services.⁵ In September 2020, the Office of Population Affairs released the first federal data showing the impact of the rule, and the results were devastating: relative to 2018, Title X-funded health centers provided family planning services to 844,083 fewer patients in 2019, a staggering 21% decrease, and that was after just five months of having the rule in effect. In addition, fourteen states lost more than one-third of their patient volume. This drastic decrease translated to hundreds of thousands of fewer contraceptive services provided, more than 1 million fewer STD tests administered, and more than 250,000 fewer life-saving breast and cervical cancer screenings performed with Title X funds.⁶ The numbers for 2020 are even worse, with preliminary data showing that only 1.5 million people were able to benefit from Title X-funded services in 2020, a drop of 60% from just two years earlier.⁷ Six states – Hawaii, Maine, Oregon, Utah, Vermont, and Washington - have now had no Title X-funded services for almost two years.

Compounding these harms, a 2020 study shows the COVID-19 pandemic has led many women to want to delay or prevent pregnancy while it has simultaneously made it more difficult for people to access family planning and sexual health care, including contraception. Women of color and women with low incomes are more likely to report both findings. ⁸ The perfect storm of the Trump administration's rule and a global pandemic mean that a significant influx of funds

⁴ 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.

⁵ Mia Zolna Sean Finn, and Jennifer Frost, "Estimating the impact of changes in the Title X network on patient capacity," Guttmacher Institute (February 2020). <u>https://www.guttmacher.org/article/2020/02/estimating-impact-changes-title-x-network-patient-capacity</u>.

⁶ Christina Fowler et al, "Family Planning Annual Report: 2019 National Summary," RTI International (September 2020). <u>https://opa.hhs.gov/sites/default/files/2020-09/title-x-fpar-2019-national-summary.pdf</u>.

⁷ Ensuring Access to Equitable, Affordable, Client-Centered, Quality Family Planning Services, 86 Federal Register 19812 (proposed April 15, 2021) (to be codified at 42 CFR 59).

⁸ Lindberg LD et al, "Early Impacts of the COVID-19 Pandemic: Findings from the 2020 Guttmacher Survey of Reproductive Health Experiences," Guttmacher Institute (June 2020). <u>https://www.guttmacher.org/report/early-impacts-covid-19-pandemic-findings-2020-guttmacher-survey-reproductive-health</u>.

is desperately needed to begin to rebuild the network and bring the full range of Title X services back to communities across the country as quickly as possible.

These funds will be particularly significant given the Biden administration's commitment to restore the Title X program's commitment to high-quality, client-centered, evidence-based care by fall 2021.⁹ That process is moving quickly: on April 15, HHS published a notice of proposed rulemaking, and comments were due on May 17.¹⁰

We recognize that an increase to \$737 million is substantial. With a new administration supportive of family planning, we believe now is a critical opportunity to increase appropriations for the program. We are also strongly supportive of a currently circulating Senate Dear Colleague letter requesting \$512 million for the program, itself a significant step toward the needed \$737 million.

We thank you for your consideration of this request. Please contact Lauren Weiss at the National Family Planning & Reproductive Health Association with any questions – her contact information in below the list of signatories.

Advocates for Youth AIDS Alliance for Women, Infants, Children, Youth & Families AIDS United Alliance for Justice American Academy of Pediatrics American Atheists American College of Obstetricians and Gynecologists American Public Health Association American Sexual Health Association American Society for Reproductive Medicine (ASRM) Association of Nurses in AIDS Care Association of Schools and Programs of Public Health Black AIDS Institute Cascade AIDS Project Catholics for Choice Center for Biological Diversity Center for Reproductive Rights

Endocrine Society Guttmacher Institute Healthy Teen Network HIV + Hepatitis Policy Institute **HIV Medicine Association** Ibis Reproductive Health If/When/How: Lawyering for Reproductive Justice In Our Own Voice: National Black Women's **Reproductive Justice Agenda** International Women's Health Coalition lpas Jacobs Institute of Women's Health Jewish Women International March of Dimes Medical Students for Choice NARAL Pro-Choice America NASTAD National Abortion Federation National Asian Pacific American Women's Forum (NAPAWF)

⁹ Office of Population Affairs, "Title X Statutes, Regulations, and Legislative Mandates," US Department of Health and Human Services (March 2021). <u>https://opa.hhs.gov/grant-programs/title-x-service-grants/title-x-statutes-</u> <u>regulations-and-legislative-mandates</u>.

¹⁰ Ensuring Access to Equitable, Affordable, Client-Centered, Quality Family Planning Services, 86 Federal Register 19812 (proposed April 15, 2021) (to be codified at 42 CFR 59).

National Association of County and City **Health Officials** National Association of Nurse Practitioners in Women's Health National Black Women's HIV/AIDS Network National Center for Lesbian Rights National Coalition of STD Directors National Council of Jewish Women National Family Planning & Reproductive Health Association National Health Law Program (NHeLP) National Latina Institute for Reproductive Justice National Medical Association National Organization for Women National Partnership for Women & Families National Women's Health Network National Women's Law Center Nurses for Sexual and Reproductive Health PAI

People For the American Way Physicians for Reproductive Health Planned Parenthood Federation of America **Population Connection Action Fund Population Institute** Power to Decide **Religious Coalition for Reproductive Choice Reproductive Health Access Project** SIECUS: Sex Ed for Social Change Society for Maternal-Fetal Medicine The AIDS Institute The American Society for Reproductive Medicine The Well Project Treatment Action Group Union for Reform Judaism URGE: Unite for Reproductive & Gender Equity Women of Reform Judaism

For more information, please contact: Lauren Weiss Director, Policy & Communications National Family Planning & Reproductive Health Association 1025 Vermont Ave NW, Suite 800 Washington, DC 20005 202-417-4867 Iweiss@nfprha.org