

April 5, 2019

Testimony of: Clare Coleman, President & CEO, National Family Planning & Reproductive Health Association

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)

Chair DeLauro, Ranking Member Cole, and Subcommittee Members:

As the chief executive officer of the National Family Planning & Reproductive Health Association (also known as NFPRHA), thank you for this opportunity to provide testimony in support of increased Title X funding in the fiscal year (FY) 2020 appropriations bill. I am deeply concerned by the administration's continued attacks on the integrity of the Title X program, as demonstrated by the devastating rule published by the administration on March 4,¹ and by the continued underfunding of the nation's only federal program dedicated to family planning and sexual health services for people who are low-income, uninsured, or underinsured. I urge Congress to use the 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 care by funding the program at \$400 million.

NFPRHA is a non-partisan 501(c)3 membership association that advances and elevates the importance of family planning in the nation's health care system and promotes and

<sup>&</sup>lt;sup>1</sup> Department of Health and Human Services. Final Rule. "Compliance with Statutory Program Integrity Requirements." *Federal Register* 84 (March 4, 2019): 7714-7791

supports the work of family planning providers and administrators, especially in the safety net. Representing more than 850 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. NFPRHA represents more than 70% of Title X grantees and more than 90% of Title X service sites.

My testimony today will focus on the Title X family planning program. Title X helps more than four million people access family planning and related health services at nearly 4,000 health centers around the country annually.<sup>2</sup> Title X-funded health centers include a diverse array of providers, such as freestanding family planning centers, Planned Parenthood affiliates, federally qualified health centers, hospitals, school- and university-based health centers, and other entities, a diversity that allows patients to seek care at the site that works best for them.

For many individuals, particularly those who have low incomes, are under- or uninsured, or are adolescents, Title X is their main access point to affordably and confidentially obtain contraception, cancer screenings, sexually transmitted disease testing and treatment, complete and medically accurate information about their sexual health and 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,<sup>3</sup>

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<sup>&</sup>lt;sup>2</sup> 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.

<sup>&</sup>lt;sup>3</sup> 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.

and in 2015 Title X-supported contraceptive services helped patients prevent an estimated 822,000 pregnancies.<sup>4</sup> 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.

Despite this compelling data, and in spite of the critical importance of equitable access to family planning services for all people, Title X has remained woefully underfunded at just over \$286 million for the past six years. 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, low-income women in the United States. 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 2017<sup>6</sup>), does not address Title X's trans and nonbinary patients, and does not include an estimate for 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,<sup>7</sup> 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

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<sup>&</sup>lt;sup>4</sup> 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.

<sup>&</sup>lt;sup>5</sup> 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.

<sup>&</sup>lt;sup>6</sup> 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.

<sup>&</sup>lt;sup>7</sup> 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.

2010<sup>8</sup> to just over four million in 2017.<sup>9</sup> NFPRHA and its members are deeply concerned about diminishing access to high-quality family planning care and urge Congress to take an initial step to reverse this devastating trend by appropriating \$400 million for Title X in FY 2020.

NFPRHA's funding request comes in the wake of a final rule from the administration that is unlawful, coercive, and dangerous for patients' health. On March 4, the administration published a final rule<sup>10</sup> that disregards medical ethics and federal guidelines in order to severely restrict the providers in the Title X network and the care that patients can receive from those remaining in the program. Despite this roadblock, I urge Congress to provide enhanced funding in FY 2020 to support the providers currently offering high-quality care across the country. This funding will allow more patients to receive evidence-based care while efforts to prevent the rule's implementation are underway outside of Congress and will powerfully demonstrate Congress' support for the Title X program in its current form.

In conclusion, thousands of providers and millions of patients are counting on Congress to stand strong against attacks on family planning and support increased public funding for the Title X program. NFPRHA looks forward to working with committee members in those efforts, and I thank you for the opportunity to testify.

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<sup>&</sup>lt;sup>8</sup> 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.

<sup>&</sup>lt;sup>9</sup> Fowler et al, "Family Planning Annual Report: 2016 National Summary."

<sup>&</sup>lt;sup>10</sup> Department of Health and Human Services. Final Rule. "Compliance with Statutory Program Integrity Requirements." *Federal Register* 84 (March 4, 2019): 7714-7791