

May 10, 2022

Representative Rosa DeLauro, Chairwoman

Representative Tom Cole, Ranking Member

Subcommittee on Labor, Health and Human Services, Education and Related Agencies

House Committee on Appropriations

H-307 The Capitol

Washington, DC 20515

Dear Chairwoman DeLauro and Ranking Member Cole:

As President & CEO of the National Family Planning & Reproductive Health Association (NFPRHA), I thank you for this opportunity to provide testimony in support of **a fiscal year (FY) 2023 appropriation of \$737 million for the Title X family planning program (Office of Population Affairs, funded within the Health Resources and Services Administration account)**. We are grateful for Chairwoman DeLauro's longtime leadership in advocating for family planning, including proposing a game-changing \$400 million for Title X in the FY 2022 bill, and urge you to take at least this substantial step forward in this year's bill.

NFPRHA is a non-partisan, non-profit membership association that supports the work of family planning providers and administrators, especially in the safety net. NFPRHA membership includes more than 1,000 entities that operate or fund more than 3,500 health centers that deliver high-quality family planning education and preventive care to millions of people every year in the United States. As a leading expert in publicly funded family planning, NFPRHA conducts and participates in research; provides subject matter expertise to policymakers, 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. Currently, more than 80% of all Title X grantees are NFPRHA members.

Title X is the only federal program dedicated to providing family planning services for people with low incomes. 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, contraceptive services and supplies, pregnancy testing, and other essential health care services. These centers offer care to people who often face severe structural barriers to accessing quality health care, such as people with low incomes, people who are un- or under-insured, people of color, people who live and work in rural areas, and LGBTQ people. Prior to the implementation of the Trump administration's devastating program rules in 2019, nearly 4,000 health centers in the Title X network served close to 4 million patients annually.¹ In addition, six in ten women who used Title X-funded health centers in 2016 said that provider was their only source of health care for the entire year.²

For FY 2022, Title X is funded at \$286.5 million, well below the \$500 million proposed in the Senate bill and the \$737 million that researchers from the Centers for Disease Control and Prevention, the Office of Population Affairs (OPA), and the George Washington University determined in 2016 would be needed annually just to provide family planning care to low-income women without insurance.³ **We respectfully request that the Senate match that federally recommended level of funding, \$737 million, for the Title X program in FY23.**

That funding level would allow the program to rebuild from crises experienced in recent years

¹ Christina Fowler et al, "Family Planning Annual Report: 2018 National Summary," RTI International (August 2019). <https://opa.hhs.gov/sites/default/files/2020-07/title-x-fpar-2018-national-summary.pdf>.

² Meghan Kavanaugh, "Use of Health Insurance Among Clients Seeking Contraceptive Services at Title X-Funded Facilities in 2016," Guttmacher Institute (June 2018).

³ 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.

and expand to reach millions more Americans. We also note that this recommendation, based on the number of women in need, is a significant under-estimate of the true need, as the program now serves more than 100,000 men and nonbinary individuals each year.

An influx of funds is particularly important given the continued impacts that recovery from the Trump administration's 2019 program rule and the COVID-19 pandemic are having on the program, the providers funded by it, and most importantly the patients for whom Title X sites serve as critical, and sometimes their only, points of access to care. On July 15, 2019, the Trump 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, including all of the health centers in six states. Then, in March 2020, family planning providers, like all frontline health care workers, needed to adapt overnight to the realities of serving under-resourced communities during a global pandemic.

In September 2021, OPA released the first federal data showing the impact of the rule and COVID-19, and the results were devastating: relative to 2018, Title X-funded health centers provided family planning services to 2.4 million fewer patients in 2020, a staggering 61% decrease over just two years. This drastic decrease translated to millions of fewer contraceptive services provided, more than 4.3 million fewer STI and HIV tests administered, and more than 800,000 fewer lifesaving breast and cervical cancer screenings performed with Title X funds. OPA attributed 63% of the decrease in patients served to the 2019 rule and 37% to the pandemic.⁴ Compounding these challenges in accessing Title X-funded services, a 2020 study showed the COVID-19 pandemic has led many women to want to delay or prevent pregnancy

⁴ Christina Fowler, Julia Gable, and Beth Lasater, "Family Planning Annual Report: 2020 National Summary," RTI International (September 2021). <https://opa.hhs.gov/sites/default/files/2021-09/title-x-fpar-2020-national-summary-sep-2021.pdf>.

while it has simultaneously made it more difficult for people to access family planning and sexual health care, including contraception.⁵ Women of color and women with low incomes were more likely to report both findings.

The Biden-Harris administration has made significant progress toward restoring the Title X program, including finalizing a new rule in October 2021,⁶ distributing \$6.6 million in Title X funds to communities with a dire need for family planning services in January 2022,⁷ and distributing \$256.6 million for Title X projects across the country just last month.⁸ However, the administration was unable to fund many qualified applicants, and under-funded dozens more, due to insufficient funds. While a small number of past grantees received additional funds in May 2022, it is clear that current funding of \$286.5 million annually is simply insufficient to meet the needs of providers and patients across the country. Without additional funds, grantees and subrecipients are at significant risk of reducing service availability, laying off frontline health care workers, and even closing health centers.

With a significant increase in funds in FY23, OPA can make real progress toward rebuilding the Title X program and serving more people in need of these critical services. We thank you for your consideration of this request and look forward to working with you

⁵ 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). <https://www.guttmacher.org/report/earlyimpacts-covid-19-pandemic-findings-2020-guttmacher-survey-reproductive-health>.

⁶ HHS Press Office, “HHS Issues Final Regulation Aimed at Ensuring Access to Equitable, Affordable, Client-Centered, Quality Family Planning Services,” US Department of Health and Human Services (October 4, 2021). <https://www.hhs.gov/about/news/2021/10/04/hhs-issues-final-regulation-aimed-at-ensuring-access-to-equitable-affordable-client-centered-quality-family-planning-services.html>

⁷ ASH Media, “HHS Awards \$6.6 Million to Address Increased Need for Title X Family Planning Services,” US Department of Health and Human Services (January 21, 2022). <https://www.hhs.gov/about/news/2022/01/21/hhs-awards-6.6-million-address-increased-need-for-title-x-family-planning-services.html>.

⁸ ASH Media, “HHS Awards \$256.6 Million to Expand and Restore Access to Equitable and Affordable Title X Family Planning Services Nationwide,” US Department of Health and Human Services (March 30, 2022). <https://www.hhs.gov/about/news/2022/03/30/hhs-awards-256-million-to-expand-restore-access-to-equitable-affordable-title-x-family-planning-services-nationwide.html>.

throughout the FY23 appropriations process. If you have questions about this request, please contact Lauren Weiss, Director, Policy & Communications, at lweiss@nfphra.org or 202-417-4867.

Sincerely,

A handwritten signature in cursive script that reads "Clare M. Coleman". The signature is written in black ink and is positioned above the printed name.

Clare Coleman