

# Title X

## An Introduction to the Nation's Family Planning Program

For more than 40 years, the Title X (ten) family planning program, the nation's only dedicated source of federal funding for family planning, has provided high-quality, culturally sensitive family planning services and other preventive health care to predominantly low-income, under-insured, and uninsured individuals who may otherwise lack access to health care. President Richard Nixon signed the program into law on December 24, 1970, as Public Law 91-572 with broad bipartisan support. The program's strategies set the standard for high-quality family planning care across the nation's health care delivery system.

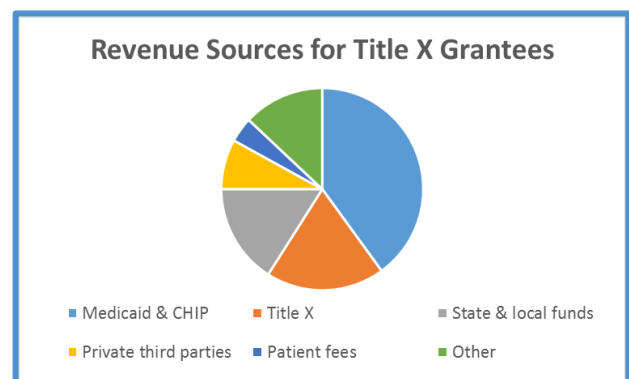
Title X funds are leveraged through its diverse network of safety-net providers to deliver high-quality, confidential services to more than 4 million low-income people across the country each year.<sup>1</sup> In addition, Title X is the only federal program that funds critical infrastructure needs not paid for under Medicaid and private insurance, such as staff salaries, health information technology, patient education, and community education.<sup>2</sup>

### How is the Program Administered?

- Similar to other federal safety-net health care programs, the Title X grant program funds are appropriated to the Health Resources Services Administration (HRSA) through the annual, discretionary appropriations process by Congress. However, the program is unique in that while it is funded through HRSA, it has been administered by the Office of Population Affairs (OPA) within the Department of Health and Human Services (HHS) since 1983.
- In 2015, OPA provided Title X grants to 91 agencies, supporting 3,951 service delivery sites.<sup>3</sup>
- State, county, and local health departments make up half of Title X service providers. Hospitals, family planning councils, Planned Parenthoods, federally qualified health centers, and other private non-profit organizations make up the rest of the Title X network.

### What Does the Provider Network Look Like?

- In 2015, 3,569 full-time equivalent health care professionals provided Title X services including nurse practitioners, physicians, physician assistants, registered nurses, counselors, and health educators.<sup>4</sup>
- By law, Title X funds are not the sole source of income for providers. In 2015, Title X grantees reported their major sources of revenue to include 40% Medicaid/CHIP, 19% Title X, 16% state and local funding, 8% private third-party payers, 4% patient fees, and 13% other funding streams.<sup>5</sup>

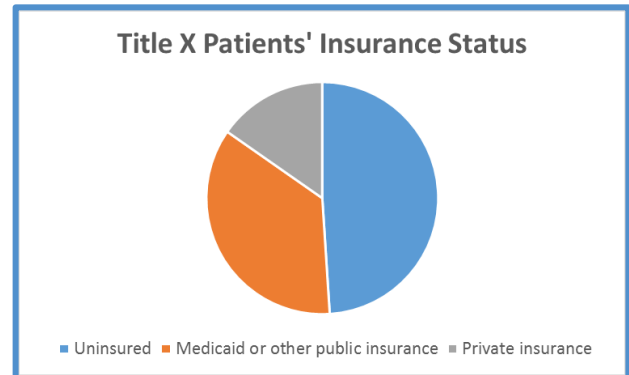


### What Services Do Health Centers Provide?

- Title X health centers provide access to contraceptive services, supplies, and information to all who need them. By law, however, priority is given to poor and low-income people.
- Title X statutorily requires that its providers preserve patients' confidentiality for the services delivered.
- Title X services include pregnancy testing; contraceptive counseling and services; pelvic exams; screening for cervical and breast cancer, high blood pressure, anemia, diabetes, and sexually transmitted diseases (STDs) and HIV/AIDS; infertility services; health education; and referrals for health and social services.
- In 2015, Title X-funded centers provided 769,800 Pap tests, 1 million breast exams, nearly 5 million STD tests, and 1.1 million confidential HIV tests.<sup>6</sup>

## Who Does Title X Serve?

- Six in ten women who obtain health care from a publicly funded family planning center consider it to be their usual source of health care.<sup>7</sup>
- In 2015 Title X-funded providers served approximately 4 million low-income women and men.<sup>8</sup>
- Sixty-six percent of Title X patients have incomes at or below the federal poverty level—meaning they earn less than \$11,770 per year. These patients receive services at no cost to them.<sup>9</sup>
- Forty-eight percent of Title X patients are uninsured, 35% have Medicaid or other public health insurance, and 15% have private insurance.<sup>10</sup> The number of uninsured patients has dropped dramatically since the passage of the Affordable Care Act and the resultant expansion of Medicaid eligibility in some states.
- Title X patients are disproportionately black and Hispanic or Latino/a, with 21% of Title X patients self-identifying as black or African American and 32% as Hispanic or Latino/a,<sup>11</sup> as compared to 13.3% and 17.6% of the nation, respectively.<sup>12</sup> Ninety percent of Title X patients are female and 10% are male; the number of male patients served by Title X has grown by 56% since 2005.<sup>13</sup>



## What are the Public Health Benefits of Title X?

- In 2014, Title X-funded health centers helped prevent approximately 904,000 unintended pregnancies, preventing 326,000 abortions and 439,000 unplanned births.<sup>14</sup>
- Title X provides significant cost savings to the federal and state governments. The Guttmacher Institute estimates that for every dollar invested in family planning, the taxpayer saves \$7.09. Services provided in Title X-supported centers alone yielded \$7 billion of the \$13.6 billion in net government savings that resulted from publicly funded family planning services in 2010.<sup>15</sup>

<sup>1</sup> Christina Fowler et al, "Family Planning Annual Report: 2015 National Summary," RTI International (August 2016). <https://www.hhs.gov/opa/sites/default/files/title-x-fpar-2015.pdf>.

<sup>2</sup> Ibid.

<sup>3</sup> Ibid.

<sup>4</sup> Ibid.

<sup>5</sup> Ibid.

<sup>6</sup> Ibid.

<sup>7</sup> Jennifer Frost, "U.S. Women's Use of Sexual and Reproductive Health Services: Trends, Sources of Care and Factors Associated with Use, 1995–2010," Guttmacher Institute (May 2013). [https://www.guttmacher.org/sites/default/files/report\\_pdf/sources-of-care-2013.pdf](https://www.guttmacher.org/sites/default/files/report_pdf/sources-of-care-2013.pdf).

<sup>8</sup> Fowler et al, "Family Planning Annual Report: 2015 National Summary."

<sup>9</sup> Poverty Guidelines, Federal Register, 45629.

<sup>10</sup> Ibid.

<sup>11</sup> Ibid.

<sup>12</sup> US Census Bureau. QuickFacts: United States. Accessed on January 5, 2017.

<sup>13</sup> Fowler et al, "Family Planning Annual Report: 2015 National Summary."

<sup>14</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>.

<sup>15</sup> Adam Sonfield, "Beyond Preventing Unplanned Pregnancy: The Broader Benefits of Publicly Funded Family Planning Services" *Guttmacher Policy Review* 17, issue 4 (2014).