

Title X in Indiana Improving Public Health and Saving Taxpayer Dollars

Between FY2005 – FY2015, funding for Title X was cut by \$150 million – 10% in ten fiscal years.

Title X Served 30,797 Indiana Residents in 2015

The Indiana Family Health Council is the sole Title X grantee in Indiana, ⁱ supporting 36 Title X-funded health centers across the state including federally qualified health centers, Planned Parenthoods, and other private non-profits.ⁱⁱ The Title X network served 28,471 women and 2,326 men, for a total of 30,797 residents of Indiana in 2015.ⁱⁱⁱ

Title X provides high-quality family planning services and other preventive health care to low-income and uninsured individuals who may otherwise lack access to health care.

- Of the 30,797 patients served, **70%** had incomes at or below 100% of the federal poverty level (FPL), ^{iv} *meaning they earned \$11,770 a year or less.* ^v
- **Ninety-six percent** of Title X patients in Indiana *earned less than \$29,425* ^{vi} a year (250% of the FPL).^{vii}

Title X Saves Indiana's Taxpayer Dollars

Title X supports critical infrastructure needs that are not reimbursable under Medicaid and commercial insurance, such as staff salaries, individual patient education, community-level outreach, and public education about family planning, women's health, and sexual health issues. Without Title X, access to high-quality family planning services for low-income Indiana residents would not be possible.

- The average cost of a Medicaid-funded birth is \$10,460.^{viii} In 2010, births resulting from unintended pregnancies cost Indiana's taxpayers \$375.9 million.^{ix}
- The Title X program helps alleviate the costs of unintended pregnancy through contraception, counseling, and other services.^x

For more information, please contact the National Family Planning & Reproductive Health Association at (202) 293-3114 or visit www.nationalfamilyplanning.org.

Title X is Essential to Improving Public Health and Saving Taxpayer Dollars in Indiana

Cutting funding for family planning services will lead to more unintended pregnancies and higher health care costs in Indiana. Family planning helps women and families plan the timing and spacing of their pregnancies, which results in better educational attainment and economic security; these, in turn, are linked to better health outcomes for women, men, and families.

- Family planning services at Indiana's Title X-funded health centers helped prevent 7,400 unintended pregnancies in 2014, which would likely have resulted in 3,600 unintended births and 2,700 abortions.^{xi}
- Without publicly funded family planning, the number of unintended pregnancies in Indiana would be 13% higher.^{xii}
- Title X-funded services produce significant cost savings to the federal and state governments; services provided at Title X-supported sites in Indiana accounted for nearly \$51.3 million in such savings in 2010 alone.^{xiii}

Indiana's Title X-funded health centers provide a wide range of services:

- Pregnancy testing
- Contraceptive services
- Pelvic exams
- Screening for cervical and breast cancer
- Screening for high blood pressure, anemia, and diabetes
- Screening for STDs and HIV/AIDS
- Infertility services
- Health education
- Referrals for other health and social services

Additional cuts to Title X funding—especially in the current economy—would harm tens of thousands of low-income and poor families throughout Indiana, in turn costing, not saving, the federal government money.

ⁱ Department of Health and Human Services. *Title X Family Planning Directory of Grantees*. August 2016. Accessed December 1, 2016. <http://www.hhs.gov/opa/sites/default/files/title-x-directory-grantees.pdf>.

ⁱⁱ "Impact of Title X Funding Cuts in Indiana." National Family Planning and Reproductive Health Association. Last modified September 2016. Accessed December 1, 2016. http://www.nationalfamilyplanning.org/file/Indiana_ImpactMap_FactSheet_R7.pdf.

ⁱⁱⁱ Department of Health and Human Services Office of Population Affairs. *Title X Family Planning Annual Report 2015 National Summary*. August 2016. Accessed December 1, 2016. <http://www.hhs.gov/opa/sites/default/files/title-x-fpar-2015.pdf>.

^{iv} *Ibid.*

^v Department of Health and Human Services Office of the Assistant Secretary for Planning and Evaluation. "2015 Poverty Guidelines." Last modified September 3, 2015. Accessed December 1, 2016. <https://aspe.hhs.gov/2015-poverty-guidelines>.

^{vi} *Title X Family Planning Annual Report 2015 National Summary*.

^{vii} "2015 Poverty Guidelines."

^{viii} "Guttmacher Institute Data Center." *Guttmacher Institute*. <https://data.guttmacher.org/states/table?dataset=data>.

^{ix} *Ibid.*

^x Guttmacher Institute, *Contraceptive Needs and Services, 2010*, accessed September 15, 2015, <https://www.guttmacher.org/pubs/win/contraceptive-needs-2013.pdf>.

^{xi} Guttmacher Institute Data Center.

^{xii} Guttmacher Institute. "State Facts on Publicly Funded Family Planning Services: Indiana." Guttmacher. Last modified September 2016. Accessed December 1, 2016. <https://www.guttmacher.org/fact-sheet/state-facts-publicly-funded-family-planning-services-indiana>.

^{xiii} Guttmacher Institute Data Center.

For more information, please contact the National Family Planning & Reproductive Health Association at (202) 293-3114 or visit www.nationalfamilyplanning.org.