

Title X in Indiana

IMPROVING PUBLIC HEALTH AND
SAVING TAXPAYER DOLLARS

As of September 1, 2018, the Office of Population Affairs (OPA) provided Title X service delivery grants to the Indiana Family Health Council Inc. to support access to family planning and sexual health services in Indiana. **Despite Title X's significant public health benefits for communities, funding cuts and attempts to weaken the program's high standards of care threaten the provider network.**

Title X helps ensure high-quality preventive health care to poor, low-income, and uninsured individuals who may otherwise lack access to care. Everyone deserves affordable, quality sexual and reproductive health care from the provider of their choice, regardless of their economic or insurance status.

- Of the 23,887 people served in Indiana in 2017, 94% had incomes below 250% of the federal poverty line (FPL). Furthermore, 62% of patients had incomes at or below FPL (\$12,060 for an individual that year).¹
- Nationwide, Congress appropriated just \$286.5 million in fiscal year (FY) 2019 versus \$317.5 million in FY 2010.² These cuts have impacted service providers' ability to meet the demand for family planning and sexual health services. In 2017, OPA provided \$5,020,000 to support 36 service sites across Indiana.

**Indiana's Title X providers
served
23,887 people
in 2017.**

Title X Saves Federal and State Money

Without Title X, many low-income people in Indiana would not have access to high-quality family planning services. In addition to direct clinical services, Title X supports critical needs that are not reimbursable under Medicaid and commercial insurance, such as staff salaries and training, community outreach, and public education about family planning and sexual health issues. Furthermore, patients rely on Title X's strict confidentiality protections to ensure safe access to sensitive clinical services.

In 2010, services provided at Title X health centers in Indiana saved the state and federal government **\$51,267,000**. These savings came from preventing sexually transmitted diseases (including HIV), cervical cancer, and unintended pregnancies. At a national level, savings from Title X services totaled **\$7 billion** that year.³

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

Family planning care helps patients prevent sexually transmitted diseases and plan the timing of their pregnancies, which helps them meet their educational and economic goals and, ultimately, have better health outcomes. The health centers in the Title X network offer gold-standard health care by operating in line with *Providing Quality Family Planning Services: Recommendations from Centers for Disease Control and Prevention and the US Office of Population Affairs*, which was last updated in 2017.

- In 2010, 43 of every 1,000 Indiana women ages 15-44 had an unintended pregnancy.⁴ Title X provides the sexuality education and contraceptive services and supplies that can help lower this rate.
- In 2017, there were 34,278 newly diagnosed chlamydia cases, 11,835 newly diagnosed gonorrhea cases, and 319 newly diagnosed syphilis cases in Indiana.⁵ In 2015, an estimated 11,100 Indiana residents ages 13 and above were living with HIV. Title X service sites provide critical education, testing, and outreach services to prevent the spread of these infections.⁶
- In 2017, 8% of Indiana residents were uninsured, 22% were enrolled in Medicaid or the Children's Health Insurance Program,⁷ and 12% had incomes below FPL.⁸ Title X providers are often some of only a few family planning providers that accept Medicaid.

Title X-funded health centers offer:

- Pregnancy testing and options counseling
- Contraceptive services and supplies
- Pelvic exams
- Screening for cervical and breast cancer
- Screening for high blood pressure, anemia, and diabetes
- Screening and treatment for STDs and HIV/AIDS, including linkages to HIV care
- Infertility services
- Health education
- Referrals for other health and social services

Additional cuts to, or restrictions on, the Title X provider network would harm tens of thousands of poor and low-income people and families across Indiana, in turn costing, not saving, the government money.

1. Christina Fowler, Family Planning Annual Report: 2017 national summary, RTI International (2018).

2. Office of Population Affairs. "Funding History." HHS.gov (2018).

3. Jennifer Frost et al, Return on Investment: A Fuller Assessment of the Benefits and Cost Savings of the US Publicly Funded Family Planning Program. Wiley Periodicals, Inc. (2014).

4. Kathryn Kost. Unintended Pregnancy Rates at the State Level: Estimates for 2010 and Trends Since 2002. Guttmacher Institute (2015).

5. 2017 Sexually Transmitted Diseases Surveillance. Centers for Disease Control and Prevention (2018).

6. Estimated HIV Incidence and Prevalence in the United States 2010-2015. HIV Surveillance Report. Centers for Disease Control and Prevention. (2017).

7. Health Insurance Coverage in the United States: 2017. U.S. Census Bureau (2018).

8. Total Medicaid and CHIP Enrollment: July 2017. Kaiser Family Foundation (2017).