

May 18, 2021

Representative Rosa DeLauro, Chairwoman
Representative Tom Cole, Ranking Member
House Committee on Appropriations, Subcommittee on Labor,
Health and Human Services, Education, and Related Agencies
H-307, The Capitol
Washington, DC 20515

Dear Chairwoman DeLauro and Ranking Member Cole,

The 65 below organizations represent millions of health care providers, researchers, program administrators, community advocates, and, most importantly, people who seek publicly funded family planning services. We urge you to demonstrate strong support for this essential health care by allocating a substantial increase in funding towards the \$737 million needed for the Title X family planning program within the Office of Population Affairs when writing the fiscal year 2022 (FY2022) Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS) bill.

Title X is the only federal program dedicated to providing family planning services for people with low incomes. In 2018, prior to the implementation of the Trump administration's devastating new program rules, nearly 4,000 health centers in the network served close to 4 million patients.¹ 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, HIV/AIDS education and testing, contraceptive services and supplies, pregnancy testing, and other vital health care services. These centers work with communities that face systemic barriers to accessing quality health care, including

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

people with low incomes, people with no or insufficient insurance, people of color, people who live and work in rural areas, LGBTQ people, and young people. In fact, a 2018 study found that 60% of women who received contraceptive services from a Title X-funded health center in 2016 had no other source of medical care in the prior year,² and almost two-thirds of patients at these sites have incomes at or below the federal poverty level.³

Unfortunately, Title X-supported providers cannot do this important work without federal funds, and current funding levels are woefully inadequate to meet community needs. Title X has been cut or flat-funded every year for the past decade, and the program's FY2021 allocation is just \$286.5 million. This level is well below the \$737 million that researchers from the Centers for Disease Control and Prevention, the Office of Population Affairs, and the George Washington University determined in 2016 would be needed annually just to provide family planning care to low-income women without insurance.⁴ We urge you to take a substantial step forward for family planning access and adopt that recommended figure for FY2022.

This funding increase is particularly vital given the harms the Trump administration inflicted on the program, the providers funded by it, and, most importantly, the people who seek family planning and sexual health care. On July 15, 2019, that 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. In

² Meghan Kavanaugh, "Use of Health Insurance Among Clients Seeking Contraceptive Services at Title X-Funded Facilities in 2016," Guttmacher Institute (June 2018). <https://www.guttmacher.org/journals/psrh/2018/06/use-health-insuranceamong-clients-seeking-contraceptive-services-title-x>.

³ Christina Fowler et al, "Family Planning Annual Report: 2019 National Summary," RTI International (September 2020). <https://opa.hhs.gov/sites/default/files/2020-09/title-x-fpar-2019-national-summary.pdf>.

⁴ 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.

2018, those health centers had provided 1.6 million patients with high quality, Title X-supported family planning and sexual health services.⁵ In September 2020, the Office of Population Affairs released the first federal data showing the impact of the rule, and the results were devastating: relative to 2018, Title X-funded health centers provided family planning services to 844,083 fewer patients in 2019, a staggering 21% decrease, and that was after just five months of having the rule in effect. In addition, fourteen states lost more than one-third of their patient volume. This drastic decrease translated to hundreds of thousands of fewer contraceptive services provided, more than 1 million fewer STD tests administered, and more than 250,000 fewer life-saving breast and cervical cancer screenings performed with Title X funds.⁶ The numbers for 2020 are even worse, with preliminary data showing that only 1.5 million people were able to benefit from Title X-funded services in 2020, a drop of 60% from just two years earlier.⁷ Six states – Hawaii, Maine, Oregon, Utah, Vermont, and Washington – have now had no Title X-funded services for almost two years.

Compounding these harms, a 2020 study shows the COVID-19 pandemic has led many women to want to delay or prevent pregnancy while it has simultaneously made it more difficult for people to access family planning and sexual health care, including contraception. Women of color and women with low incomes are more likely to report both findings.⁸ The

⁵ Mia Zolna Sean Finn, and Jennifer Frost, “Estimating the impact of changes in the Title X network on patient capacity,” Guttmacher Institute (February 2020). <https://www.guttmacher.org/article/2020/02/estimating-impact-changes-title-x-network-patient-capacity>.

⁶ Christina Fowler et al, “Family Planning Annual Report: 2019 National Summary,” RTI International (September 2020). <https://opa.hhs.gov/sites/default/files/2020-09/title-x-fpar-2019-national-summary.pdf>.

⁷ Ensuring Access to Equitable, Affordable, Client-Centered, Quality Family Planning Services, 86 Federal Register 19812 (proposed April 15, 2021) (to be codified at 42 CFR 59).

⁸ 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/early-impacts-covid-19-pandemic-findings-2020-guttmacher-survey-reproductive-health>.

perfect storm of the Trump administration's rule and a global pandemic mean that a significant influx of funds is desperately needed to begin to rebuild the network and bring the full range of Title X services back to communities across the country as quickly as possible.

These funds will be particularly significant given the Biden administration's commitment to restore the Title X program's commitment to high-quality, client-centered, evidence-based care by fall 2021.⁹ That process is moving quickly: on April 15, HHS published a notice of proposed rulemaking, and comments were due on May 17.¹⁰

We recognize that an increase to \$737 million is substantial, and we thank you for your commitment to the program in recent appropriations cycles, as evidenced by the inclusion of critical language to bar implementation of the Trump administration's rule in the House-passed Labor-HHS bill in both FY2020 and FY2021. With a new administration supportive of family planning, we believe now is a critical opportunity to increase appropriations for the program. We are also strongly supportive of the more than 140 representatives who signed a Dear Colleague letter requesting \$512 million for the program, itself a significant step toward the needed \$737 million.

We thank you for your consideration of this request. Please contact Lauren Weiss at lweiss@nfprha.org with any questions.

Sincerely,

Advocates for Youth
AIDS Alliance for Women, Infants, Children,
Youth & Families

AIDS United
Alliance for Justice
American Academy of Pediatrics

⁹ Office of Population Affairs, "Title X Statutes, Regulations, and Legislative Mandates," US Department of Health and Human Services (March 2021). <https://opa.hhs.gov/grant-programs/title-x-service-grants/title-x-statutes-regulations-and-legislative-mandates>.

¹⁰ Ensuring Access to Equitable, Affordable, Client-Centered, Quality Family Planning Services, 86 Federal Register 19812 (proposed April 15, 2021) (to be codified at 42 CFR 59).

American Atheists
American College of Obstetricians and Gynecologists
American Public Health Association
American Sexual Health Association
American Society for Reproductive Medicine (ASRM)
Association of Nurses in AIDS Care
Association of Schools and Programs of Public Health
Black AIDS Institute
Cascade AIDS Project
Catholics for Choice
Center for Biological Diversity
Center for Reproductive Rights
Endocrine Society
Guttmacher Institute
Healthy Teen Network
HIV + Hepatitis Policy Institute
HIV Medicine Association
Ibis Reproductive Health
If/When/How: Lawyering for Reproductive Justice
In Our Own Voice: National Black Women's Reproductive Justice Agenda
International Women's Health Coalition
Ipas
Jacobs Institute of Women's Health
Jewish Women International
March of Dimes
Medical Students for Choice
NARAL Pro-Choice America
NASTAD
National Asian Pacific American Women's Forum (NAPAWF)
National Association of County and City Health Officials
National Black Women's HIV/AIDS Network
National Center for Lesbian Rights
National Coalition of STD Directors
National Council of Jewish Women
National Family Planning & Reproductive Health Association

National Latina Institute for Reproductive Justice
National Medical Association
National Organization for Women
National Partnership for Women & Families
National Women's Health Network
National Women's Law Center
Nurses for Sexual and Reproductive Health
PAI
People For the American Way
Physicians for Reproductive Health
Planned Parenthood Federation of America
Population Connection Action Fund
Population Institute
Power to Decide
Religious Coalition for Reproductive Choice
Reproductive Health Access Project
SIECUS: Sex Ed for Social Change
Society for Maternal-Fetal Medicine
The AIDS Institute
The American Society for Reproductive Medicine
The Well Project
Treatment Action Group
Union for Reform Judaism
URGE: Unite for Reproductive & Gender Equity
Women of Reform Judaism