

February 3, 2017

The Honorable Mitch McConnell
Senate Majority Leader
S-230, U.S. Capitol Building
Washington, DC 20510

The Honorable Paul Ryan
Speaker of the House of Representatives
H-232, U.S. Capitol Building
Washington, DC 20515

The Honorable Charles Schumer
Senate Minority Leader
S-221, U.S. Capitol Building
Washington, DC 20510

The Honorable Nancy Pelosi
Minority Leader, House of Representatives
H- 204, U.S. Capitol Building
Washington, DC 20515

Dear Leader McConnell, Speaker Ryan, Leader Schumer and Leader Pelosi:

As organizations representing health care and public health professionals and the people they serve across the country, we strongly oppose any effort to prevent Planned Parenthood health centers from participating in federal health programs, including Medicaid and the Title X family planning program. Any proposal to exclude Planned Parenthood from public health programs will severely curtail women's access to essential health care services, including family planning, well-woman exams, breast and cervical cancers screenings, and HIV testing and counseling. At a time when there is much uncertainty about the future of affordable health care in our country, it is dangerous to cut off access to the life-saving preventive care that Planned Parenthood provides to some of our nation's most vulnerable patients.

Planned Parenthood health centers play a crucial role in improving the health and lives of people across the country. In fact, 2.5 million women, men and young people rely on Planned Parenthood for health care every year. For many women, Planned Parenthood is their only source of care—offering basic preventive services that are fundamental to women's health and well-being. More than 50% of Planned Parenthood health centers are in areas with health professional shortages, rural or medically underserved areas. In 2014 alone, Planned Parenthood health centers provided nearly 400,000 cervical cancer screenings and more than 360,000 breast exams. Additionally, Planned Parenthood provides contraceptive services for over 2 million patients and more than 4 million tests and treatments for sexually transmitted infections, including HIV. These services improve women's health, prevent an estimated 579,000 unintended pregnancies, and decrease infant mortality.

Policies that would exclude Planned Parenthood from public health funding would hurt millions of patients and undermine health care access in communities across the country. Limiting access to Planned Parenthood's approximately 650 health care centers across the country would prevent patients from having timely access to basic preventive health care services. Approximately 60 percent of Planned Parenthood patients access care through Medicaid and Title X, in addition to those who rely on other essential programs, including maternal and child health programs and Centers for Disease and Prevention (CDC) breast and cervical cancer screening programs. In some states, Planned Parenthood is the only provider participating in Title X, and more than 50 percent of Planned Parenthood health centers are located in a medically underserved or health professional shortage area. Because federal law already requires health care providers to demonstrate that no federal funds are used for abortion,

prohibitions on funding for preventive care at Planned Parenthood health centers will only devastate access to these life-saving services.

In addition to limiting patients access to health care, defunding Planned Parenthood is not cost effective. The Congressional Budget Office (CBO) estimates that approximately 390,000 women would lose access and up to 650,000 patients could face reduced access to preventive health care within a year should Congress act to block all Medicaid patients from receiving care at Planned Parenthood health centers.¹ The CBO also projects that excluding Planned Parenthood health centers from receiving reimbursement through the Medicaid program would result in a net cost to taxpayers of \$130 million over 10 years because of the increase in unintended pregnancies without the contraceptive care provided by Planned Parenthood.² Other publicly funded health centers would not be able to compensate for the loss of affordable family planning and reproductive health care services provided by Planned Parenthood.^{3,4}

Every day, we see the harmful impact that unequal access to health care has on women and communities across the country, and we therefore strongly support policies that improve access to affordable, quality health care. Policies that would deny Planned Parenthood public health funds only serve to cut millions off from critical preventive care, and we strongly oppose any effort to do so. We also recognize this as part of a broader effort to undermine access to safe, legal abortion and curtail access to other reproductive health care by limiting the ability of abortion providers to participate in public health programs.

Sincerely,

American Academy of Pediatrics
American College of Nurse-Midwives
American Congress of Obstetricians and Gynecologists
American Medical Student Association
American Medical Women's Association (AMWA)
American Nurses Association
American Psychological Association
American Public Health Association
American Society for Reproductive Medicine
Association of Reproductive Health Professionals
Doctors for America
GLMA: Health Professionals Advancing LGBT Equality

¹ CBO. (2015, September 16). "Cost Estimate: H.R. 3134 Defund Planned Parenthood Act of 2015." Washington, DC: CBO, <https://www.cbo.gov/sites/default/files/114th-congress-2015-2016/costestimate/hr3134.pdf>

² Letter from Keith Hall, Director of CBO, to Representative Kevin McCarthy, Majority Leader, U.S. House of Representatives. (2015, September 22). [Online] <https://www.cbo.gov/sites/default/files/114th-congress-2015-2016/costestimate/ltrpermanentdefundplannedparenthood.pdf>

³ Efforts in Texas to restrict participation in the state's family planning program resulted in women losing access to essential preventive services. Surveys of organizations that received family planning funding found 54% fewer clients served than in the previous period. White, Kari, PhD MPH, et. al. The Impact of Reproductive Health Legislation on Family Planning Clinic Services in Texas. *American Journal of Public Health*, Vol. 105, No. 5 (May 2015).

⁴ Rosenbaum, Sara. Planned Parenthood, Community Health Centers, And Women's Health: Getting The Facts Right. *Health Affairs Blog*. September 2, 2015.

Midwest Access Project
The National Alliance to Advance Adolescent Health
National Family Planning & Reproductive Health Association
National Medical Association
National Physicians Alliance
North American Society for Pediatric and Adolescent Gynecology (NASPAG)
Nurse Practitioners in Women's Health
Nursing Students for Sexual & Reproductive Health
Physicians for Reproductive Health
Society for Adolescent Health and Medicine
Society for Maternal-Fetal Medicine
Society of Family Planning