March 15, 2016

Dear Chairman Blunt, Ranking Member Murray, Chairman Cole, and Ranking Member DeLauro:

As you develop Fiscal Year (FY) 2017 appropriations for the Departments of Labor, Health and Human Services, Education, and related agencies, the 61 undersigned members and associated organizations of the Family Planning Coalition respectfully request that you provide $327 million in funding for the Title X family planning program. Title X is the sole source of dedicated federal funding for family planning services for underserved populations. Strong support for the program is incredibly important given that four out of ten women who receive care at a Title X-funded health center consider it their only source of health care and six in ten women consider it their main source of care. Moreover, more than 4.1 million women and men access life-saving health care such as birth control, cancer screenings, and testing for sexually transmitted infections through Title X health centers.

The organizations listed below collectively represent millions of administrators, providers, patients, researchers, and advocates who share the common mission of supporting and protecting federal funds for critical, cost-saving programs that provide family planning services to millions of women, men and families. By restoring resources for the Title X family planning program you will help protect access to the public health safety net for millions of poor and low-income women and men in need of high-quality health services.
The President’s FY 2017 budget requested $300 million for Title X, signaling the Administration’s support for, and recognition of, the value that Title X provides to communities across the country. Even as more individuals gain health care coverage through the Affordable Care Act (ACA), the Title X health center network will continue to play an essential role in our nation’s service delivery framework. The reality is that the Title X program is fundamental to successful implementation of health care reform. Even in 2014, more than half (54%) of clients seen at Title X–funded centers remain uninsured. Title X–funded health centers provide health care access within communities for all patients regardless of payer source, and the program is a critical part of building the service delivery infrastructure needed to support increased demand. Notably, Title X–funded entities have now emerged as entry points to care and to coverage, with many system providing education and enrollment assistance in their communities.

Title X also sets the standard for quality family planning and sexual health service provision—focusing on outcomes and increasing service efficiency. In April 2014, the program issued “Providing Quality Family Planning Services – Recommendations of CDC and the U.S. Office of Population Affairs,” that outlines the most up-to-date clinical recommendations for all providers of family planning care, including Title X–funded providers, to help define patient-centered, quality care in a family planning visit. Such efforts reinforce the network’s role as centers of excellence for high-quality health care.

Unfortunately, Title X has suffered devastating budget cuts in recent fiscal years. Between FY2010–FY2014, funding for Title X was cut from $317.5 million to $286.5 million, a net difference of $31 million. Over that same four–year period, the total number of Title X patients receiving care shrunk by 1.1 million, with no indication that patients sought care elsewhere. Since that time, Title X has received no increase in service delivery dollars: it was funded at only $286.5 million in FY 2015 and 2016.

These cuts have also made it difficult for Title X to support the infrastructure necessary for modern service delivery. Traditionally, Title X health centers have been excluded from other funding sources that support the implementation of health information technology (HIT). Resources for electronic health record (EHR) implementation for Title X providers, similar to their other safety net counterparts, are necessary to help achieve the ACA goal of having a nationwide HIT infrastructure and more coordinated models of care. Increased Title X funding is essential to help address the oversight made in the HITECH ACT which made many family planning health providers ineligible for the EHR incentives.

Even as the economic outlook for many Americans continues to improve, low–income women and men are still struggling financially and are in need of affordable health care a number of states have made it more difficult for people to access family planning services. Our organizations, therefore, encourage the Committees to invest in programs that help low–income women and men access the services that help them stay healthy and that save critical taxpayers dollars. For every one dollar invested in publicly funded family planning services, over
seven dollars are saved in Medicaid costs. Additionally, services provided in Title X health centers alone yielded $5.3 billion of the $10.5 billion in total savings for publicly funded family planning in 2010. We thank you for your consideration and urge you to include at least $327 million in FY2017 for the Title X family planning program.

If you have any questions or would like additional information, please contact Burke Hays at the National Family Planning & Reproductive Health Association by email at bhays@nfphra.org or by phone at 202–293–3114 ext. 224 or Karen Stone at Planned Parenthood Federation of America by email at karen.stone@ppfa.org or by phone at 202–973–4834.

Sincerely,

30 for 30 Campaign
Academic Pediatric Association
Acria, Inc.
Advocates for Youth
AIDS Alabama
AIDS Foundation of Chicago
AIDS United
American Academy of Pediatrics
American College of Nurse-Midwives
American Congress of Obstetricians and Gynecologists
American Pediatric Society
American Psychological Association
American Public Health Association
American Sexual Health Association
American Society for Reproductive Medicine
Association of Maternal & Child Health Programs
Association of Medical School Pediatric Department Chairs
Association of Reproductive Health Professionals
Association of Women's Health, Obstetric and Neonatal Nurses
Black Women's Health Imperative
Cascade AIDS Project
Catholics for Choice to this letter
Center for Reproductive Rights
Girls Inc.
Hadassah, The Women's Zionist Organization of America, Inc.
Healthy Teen Network
HIV Medicine Association
HIV Prevention Justice Alliance
Human Rights Campaign
Institute for Science and Human Values, Inc.
League of Women Voters of the United States
