

United States Senate

WASHINGTON, DC 20510

May 14, 2018

Alex M. Azar II
Secretary
U.S. Department of Health & Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Secretary Azar,

We are writing today in support of the Title X family planning program (Title X) and to express our strong opposition to any changes to Title X that would restrict access to affordable, high-quality and lifesaving reproductive healthcare in communities across the country.

Title X is the nation's only federal program dedicated to providing family planning services to low-income and otherwise underserved individuals. Each year, roughly four million women, men, and adolescents rely on Title X-funded health centers for basic preventive health care, including cancer screenings, birth control, sexually transmitted infection (STI) screenings, pregnancy testing, and well-woman exams. Nearly two-thirds of Title X patients have incomes at or below the federal poverty level, and 43% of patients are uninsured. In 2016, nearly 4,000 Title X-funded health centers performed 720,000 Pap tests, provided nearly one million women with breast exams, and administered 1.2 million HIV tests. Title X providers offer confidential, medically accurate, and evidence-based care, ensuring that patients receive the highest standard of medical care.

In addition to providing care to low-income, uninsured, and underinsured individuals, Title X yields critical cost savings to the American healthcare system. Every dollar invested in Title X saves more than seven dollars in Medicaid-related costs. By helping individuals obtain the preventive services they need, Title X advances the health and well-being of individuals, families and our nation as a whole while saving taxpayer dollars in the process.

In keeping with longstanding legal, ethical and medical standards of healthcare, Title X providers offer patients medically accurate counseling on and referrals for all pregnancy options—including parenting, adoption and abortion. The Title X program has never funded abortion services at its health centers. Health centers that receive Title X to provide family planning care may also separately provide abortions using non-federal funds.

In spite of the critical role that Title X-funded health centers play in promoting the health and wellbeing of millions of people, President Trump may seek to dramatically reduce the reach of Title X by reinstating the “domestic gag rule,” which was first issued under the Reagan


administration but was never fully implemented.¹ This “gag rule” would bar patients from receiving information to support their ability to make informed decisions about their own reproductive health. This means that the millions of patients who obtain care at Title X-funded health centers annually would be denied the ability to receive complete and accurate information about their medical options, including counseling on, and referrals, for abortion. On top of the ban on counseling and referrals, the “gag rule” would impose additional requirements intended to bar providers from participating in Title X that also separately provide abortion services.

Calls to reinstate these policies directly acknowledge this effort as an opportunity for President Trump to fulfill his pledge to “defund Planned Parenthood,” whose health centers remain an essential part of the family planning safety net, serving 40 percent of Title X patients. In reality, other providers of Title X-funded care would face immense challenges in attempting to absorb the patients that would lose access to care if Planned Parenthood were eliminated as a Title X-funded provider. According to recent analyses, other Title X-funded providers would have to expand their contraceptive caseloads by an average of 70 percent just to maintain access to contraceptive care at current levels.²

A “domestic gag rule” would have a devastating impact on the overall Title X network and the millions of individuals who rely on it for care. This move would disproportionately impact communities of color, the uninsured, and low-income individuals, and it could reverse progress made in critical areas. For example, unintended pregnancy rates in the U.S.—including those among teenagers—have been declining.³ We cannot threaten to reverse this progress by crippling Title X: in 2015 alone, the contraceptive services supported by Title X helped women to avoid 822,000 unintended pregnancies, which would have resulted in 387,000 unplanned births and 278,000 abortions.

We strongly oppose efforts to undermine the integrity of the Title X program and harm the millions of people who rely on it for care. Federal health policy should be evidence-based and produced with the best interests of patients in mind.

Sincerely,



Elizabeth Warren
United States Senator



Margaret Wood Hassan
United States Senator

¹ Susannah Luthi, “Trump could ban Title X funding for Planned Parenthood,” *Modern Healthcare* (April 26, 2018) (online at <http://www.modernhealthcare.com/article/20180426/NEWS/180429923>).

² Kinsey Hasstedt, “Beyond the Rhetoric: The Real-World Impact of Attacks on Planned Parenthood and Title X,” Guttmacher Institute (Aug. 2017) (online at <https://www.guttmacher.org/gpr/2017/08/beyond-rhetoric-real-world-impact-attacks-planned-parenthood-and-title-x>).

³ Finer LB and Zolna MR. Declines in unintended pregnancy in the United States, 2008–2011. *New England Journal of Medicine*, 2016, 374 (9): 843–852. (online at <https://www.nejm.org/doi/full/10.1056/NEJMsa1506575>).



Patty Murray
United States Senator



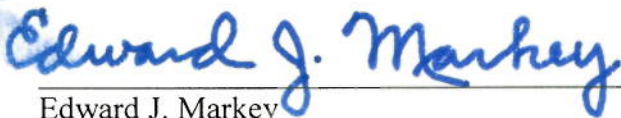
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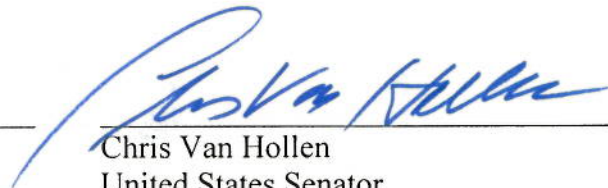
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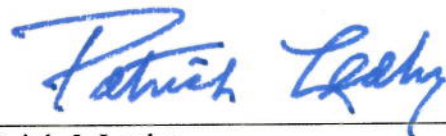
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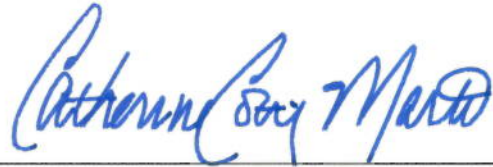
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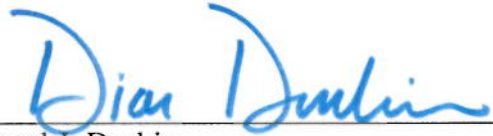
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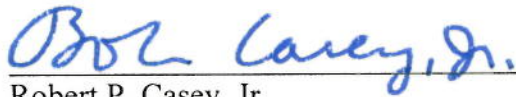
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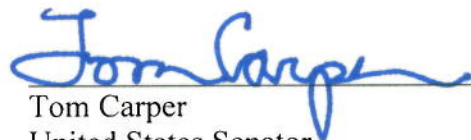
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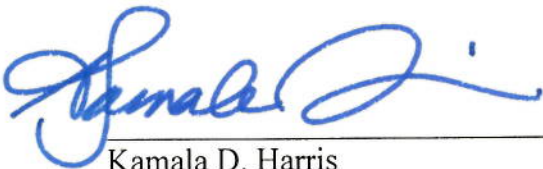
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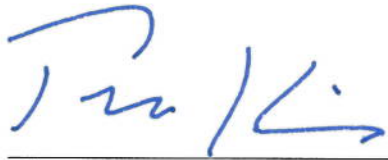
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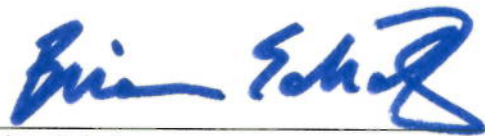
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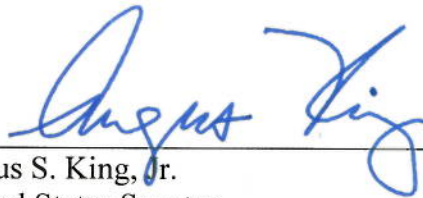
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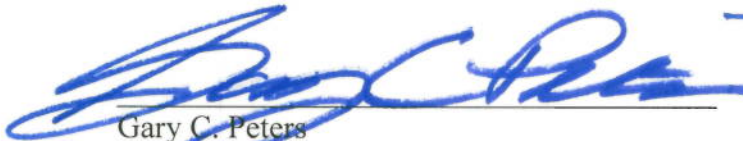
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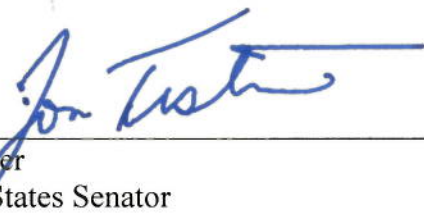
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