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March 29, 2017

The Honorable Mitch McConnell
Majority Leader
317 Russell Senate Office Building
Washington, DC 20510

The Honorable Charles Schumer
Minority Leader
322 Hart Senate Office Building
Washington, DC 20510

Oppose H.J. Res. 43 to Overturn the HHS Rule on the Title X Family Planning Program

Dear Senator McConnell and Senator Schumer:

On behalf of The Leadership Conference on Civil and Human Rights, a coalition charged by its diverse membership of more than 210 national organizations to promote and protect the civil and human rights of all persons in the United States, we write to strongly oppose H.J. Res. 43, which would overturn the U.S. Department of Health and Human Services (HHS) final ruleⁱ updating the regulations governing the Title X family planning program. This critical rule clarifies and reinforces the longstanding requirement that health care providers may not be excluded from the program for reasons unrelated to their qualifications to perform Title X-funded services.

The Title X family planning program is a vital source of family planning and related preventive care for low-income, uninsured, and young people across the country. Every year, more than four million individuals access life-saving care such as birth control, cancer screenings, and testing for sexually transmitted infections (STIs) including HIV at Title X-funded health centers.ⁱⁱ Seventy-five percent of Planned Parenthood patients are at or below 150 percent of the federal poverty level and half of their health centers are located in rural or underserved areas.ⁱⁱⁱ People of color comprise forty percent of Planned Parenthood patients.^{iv}

Title X cannot succeed unless states and other Title X grantees include providers that are extensively qualified to furnish the range of Title X-funded services according to national standards of care. This task becomes all but impossible if experienced, reputable reproductive health care providers are arbitrarily barred from fair consideration. Yet, an increasing number of states have tried to block trusted reproductive health care providers from participating in Title X. To date, at least 14 states have taken official action to target and exclude otherwise eligible providers from the program.^v Other states have threatened to follow suit. Mounting evidence shows that the exclusion of reproductive health care providers from publicly funded health programs harms health outcomes, widens disparities, and erects new barriers to care.^{vi} When the very providers that are best suited



to deliver Title X-funded services are targeted for exclusion based on factors wholly unrelated to the program's objectives, federal health care resources are poorly and inefficiently distributed and care is less likely to reach individuals in need.

Title X patients deserve the opportunity to obtain high-quality reproductive health care from the providers that are best equipped to provide it. We strongly support HHS's rule reinforcing that grantees must design their provider networks based only on the ability to provide care to Title X patients in an effective manner.

We strongly urge you to oppose H.J.Res.43, which would overturn this important rule and embolden states to attempt to block women from getting family planning and other preventive care at highly qualified providers. If you have any questions, please contact June Zeitlin, Director of Human Rights Policy, at 202-263-2852 or zeitlin@civilrights.org.

Sincerely,

Wade Henderson
President & CEO

Nancy Zirkin
Executive Vice President

ⁱ Compliance With Title X Requirements by Project Recipients in Selecting Subrecipients, 81 Fed. Reg. 91852 (Dec. 19, 2016) (amending 42 C.F.R. part 59).

ⁱⁱ Fowler et al., "Family Planning Annual Report: 2015 National Summary," RTI International, (Aug. 2016), available at <http://www.hhs.gov/opa/pdfs/title-x-fpar-2015.pdf>.

ⁱⁱⁱ Planned Parenthood, The Urgent Need for Planned Parenthood Health Centers (Dec. 7, 2016), available at https://www.plannedparenthood.org/files/4314/8183/5009/20161207_Defunding_fs_d01_1.pdf

^{iv} Planned Parenthood, This is Who We Are, (July 11, 2016), available at https://www.plannedparenthood.org/files/6814/6833/9709/20160711_FS_General_d1.pdf

^v E.g., AZ, AR, CO, FL, IN, KS, MI, NH, NC, OH, OK, TN, TX, WI.

^{vi} 4 See, e.g., Stephenson et al., "Effect of Removal of Planned Parenthood from the Texas Women's Health Program," New England Journal of Medicine, (March 2016), available at <http://www.nejm.org/doi/full/10.1056/NEJMsa1511902>; Lu, Yao and Slusky, David, Jason Gershkoff, "The Impact of Family Planning Funding Cuts on Preventive Care," Princeton Center for Health and Wellbeing Working Paper, (May 20, 2014), available at <http://ssrn.com/abstract=2442148>; Texas Policy Evaluation Project, Research Brief: Barriers to Family Planning Access in Texas, (May 2015), available at http://www.utexas.edu/cola/orgs/txpep/_files/pdf/TxPEP-ResearchBrief_Barriers-to-Family-Planning-Access-in-Texas_May2015.pdf.