



July 31, 2018

Valerie Huber  
Office of the Assistant Secretary for Health, Office of Population Affairs  
Attention: Family Planning  
U.S. Department of Health and Human Services  
Hubert H. Humphrey Building, Room 716G  
200 Independence Avenue SW,  
Washington, DC 20201

Submitted Electronically to: <https://www.regulations.gov/>

**Re: Family Planning Program- Title X Notice of Proposed Rulemaking (NPRM)**

Dear Administrator Huber:

Medicaid Health Plans of America (MHPA) appreciates the opportunity to comment on the Office of Population Affairs' (OPA) proposed changes to Title X, the Family Planning Program. MHPA member plans support this program and its important goal of ensuring access to family planning services for low-income populations.

MHPA is the national trade association representing 90+ private-sector health plans that contract with state Medicaid agencies in 39 states plus DC to provide comprehensive, high-quality health care to more than 24 million Medicaid enrollees in a coordinated and cost-effective way.

The Title X program provides essential funding to help maintain access to health care services for low-income individuals and families. As the preamble to the proposed regulation states, the Title X program currently supports the delivery of family planning services in almost 4,000 service sites nationally.

Our member plans partner with states, communities, and providers to ensure and improve the delivery of care to Medicaid beneficiaries. Our plans serve many of the same communities and families that receive care through centers or from providers that currently receive Title X funding. Further, MHPA member plans often contract with providers that rely on Title X funding as Title X providers are often some of the only family planning providers that accept Medicaid payments.

While we agree with the Office's stated goal that "the Title X program should help men, women, and adolescents make healthy and fully informed decisions about starting a family and determine the number and spacing of children", we are concerned that the proposed changes to the program will have negative implications for access to services for low-income populations. As OPA considers finalizing the proposed changes, MHPA and its member plans offer the following high-level comments and provide more detailed discussion on the proposed rule below:

- **Broad Title X Funding Availability is Important to Maintain a Strong Safety Net of Access to Health Care Services:** Title X complements Medicaid in maintaining the safety net infrastructure necessary to provide key health care services to low-income individuals and families. Approximately 4 million low-income Americans use services provided under Title X funding annually. Further, 80 percent of patients using Title X funded services have incomes that fall below 150 percent of the federal poverty level. MHPA is concerned that the proposed rule will erode the critical safety net structure for health care services that is supported by the Title X program.
- **The Proposed Regulation May Negatively Impact Access to Family Planning Providers and Services:** Further, we are concerned that the proposed regulation will likely reduce access to family planning services for the low-income population it is intended to help. The proposed regulation imposes new requirements on the separation of Title X funded activities from abortion related activities which will have the effect of limiting the number of centers able to accept Title X funding and provide services under this program. Additionally, the proposed changes include limiting counseling and referrals on the full array of services or care that may be available to patients which will impact information and access to care. Finally, providers may balk at a rule that they feel impinges upon their ethical duty to provide complete, accurate, and unbiased information to patients.
- **The Proposed Regulation May Have Unintended Implications on the Quality of Care for Low-Income Populations:** MHPA is concerned that the proposed regulation will have unintended, negative impacts on the quality of care available to low-income patients. Studies have demonstrated that community health center participation in Title X, is consistently associated with more comprehensive, accessible, and higher-quality family planning services.<sup>1</sup> We are concerned that the proposed regulations may reduce the quality of care and level of services currently available.

### **Specific Comments**

In general, MHPA supports the current Title X regulations which provide broader access to family planning services for low-income populations and we are concerned about the proposed changes included in the NPRM. We do not believe changes to the current regulations are necessary.

Below we offer comments on specific provisions of the proposed regulation:

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<sup>1</sup> Wood, S. F., Strasser, J., Sharac, J., Wylie, J., Tran, T.C., Rosenbaum, S., Rosenzweig, C., Sobel, L., and Salganicoff, A. (2018). *Community Health Centers and Family Planning in an Era of Policy Uncertainty*. Retrieved from <https://www.kff.org/womens-health-policy/report/community-health-centers-and-family-planning-in-an-era-of-policy-uncertainty/>

#### ***Section IV.I. Section 59.15 Maintenance of Physical and Financial Separation***

**MHPA is concerned that the new requirements for greater physical and financial separation of Title X funds from abortion related activities will reduce access.** We are concerned that these new requirements will prevent a number of clinics and providers currently serving low income populations from receiving Title X funds. For some clinics and providers that stand to lose Title X funding under the proposed regulation, the Title X funding losses would be significant and threaten their ability to continue providing services to low income populations including Medicaid beneficiaries. We are further concerned that a reduction in the number of available clinics and providers will increase demand and burden on remaining clinics or providers that may still be eligible to receive Title X funding and potentially limit access for the patient populations they are able to serve. For these reasons, MHPA is concerned that the proposed restrictions will only serve to decrease the availability of clinics and providers offering family planning services to low income individuals and families.

#### ***Section IV.H. Section 59.14 Prohibition on Referral for Abortion***

**Restricting referrals for abortion and changing requirements for nondirective pregnancy options counseling could undermine care and equity.** MHPA is concerned that the proposed changes will not permit patients to receive full and complete information on their care options and may lead to care that does not best meet the needs of the patients that the Title X program is intended to serve. Further, we believe this requirement will establish a differential in care provided to lower income women and families than would be available if they were able to afford care from providers not restricted in providing full pregnancy options counseling information. We believe this could establish a lower ‘standard’ of information and access to care for low-income women and families.

#### ***Section IV. D. Section 59.5 What Requirements Must be Met by a Family Planning Project?***

**The proposed changes to offering a broad range of family planning methods will impact access to important services and could impact care.** The proposed regulation will loosen the standards for offering a broad range of family planning methods. Under the current regulation, Title X program requirements have been shown to increase the availability of these methods and services compared to clinics that do not receive Title X funds.<sup>2</sup> We are concerned that the proposed change will limit access to a broader range of contraceptive services and other quality family planning services for low-income individuals and families.

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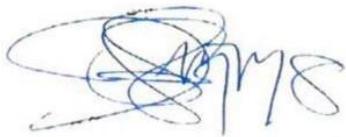
<sup>2</sup>Wood, S. F., Strasser, J., Sharac, J., Wylie, J., Tran, T.C., Rosenbaum, S., Rosenzweig, C., Sobel, L., and Salganicoff, A. (2018). *Community Health Centers and Family Planning in an Era of Policy Uncertainty*. Retrieved from <https://www.kff.org/womens-health-policy/report/community-health-centers-and-family-planning-in-an-era-of-policy-uncertainty/>

For the reasons stated above, MHPA does not believe OPA should finalize the Title X regulation as proposed in the NPRM. Before changes to the Title X regulations are made, we encourage OPA to study the implications of any proposed changes on access and quality of care for patients that receive care under this program.

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MHPA thanks OPA for the opportunity to provide feedback on the Title X proposed regulation. We look forward to working with OPA to help support this important program.

Sincerely,



Jeff Myers  
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