

ONE HUNDRED FIFTEENTH CONGRESS
Congress of the United States
House of Representatives

COMMITTEE ON ENERGY AND COMMERCE

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January 29, 2018

The Honorable Alex M. Azar
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Secretary Azar,

We write to you today with serious concerns about the status of the Title X family planning program. In particular, we are greatly alarmed by the Health and Human Services (HHS) Office of Population Affairs' (OPA) unexplained multi-month delay in posting a Title X funding announcement, and by the apparent serious instability at OPA, which administers the program. The Title X program provides critical funds to organizations which ensure that all women in need have access to affordable contraceptive care.¹ The ongoing delay in posting the funding announcement creates a very serious risk that grantees will face a funding gap that will impede their ability to provide these essential services and may adversely affect the health and well-being of women and families across the nation.

According to an HHS grant opportunity posting, OPA expected to post the grant application for Title X funds by November 1, 2017, with an application due date of January 3, 2018 and an award date of April 1, 2018.² As of today, OPA still has not posted the grant application. In the past, OPA has given organizations 60 to 90 days to submit applications, and HHS will also need time to review those applications once they are received.³

¹ Department of Health and Human Services, *About Title X Grants* (www.hhs.gov/opa/title-x-family-planning/about-title-x-grants/statutes-and-regulations/index.html) (accessed Jan. 22, 2018).

² Department of Health and Human Services, Grants.gov, *Availability of funds for Title X Family Planning Grants* (Oct. 11, 2017) (PA-FPH-18-001).

³ *Trump admin delays spark fear for family planning groups over funding*, The Hill (Jan. 18, 2018).

In light of these timelines, it seems highly unlikely that OPA will be able to award grant funds by April 1, 2018. Additionally, as a result of a decision by HHS last July, all current grantees' funding ends in either March or June of this year. The grantees that rely on this funding to provide family planning and reproductive health services are therefore at risk of a funding lapse, which in turn is likely to disrupt delivery of care to adolescents and women who can least afford it.

The apparent instability at OPA and potential funding lapse is particularly troubling because repeated studies have shown that the Title X program is hugely successful. Title X was enacted in 1970 with broad bipartisan support in order to provide family planning information and services to "all those who want them but cannot afford them."⁴

In 2016, the program served four million people nationwide,⁵ and it has played a key role in the substantial decline in unintended pregnancies.⁶ For example, one study demonstrated that "services provided by clinics that received Title X funding helped women avert 822,300 unintended pregnancies in 2015, thus preventing 387,200 unplanned births and 277,800 abortions."⁷ The study further pointed out that "without the services provided by Title X-funded clinics, the U.S. unintended pregnancy rate would have been 31 percent higher and the rate among teens would have been 44 percent higher."⁸

Title X grants also save taxpayers money in the long term. For every public dollar spent on family planning services and preventive care, taxpayers save \$7.09, for a net savings of \$13.6 billion in 2010 on treatment for sexual transmitted infections, pregnancy, and related services that would have otherwise been paid for by Medicaid.⁹

Given the effectiveness of the Title X program, and its benefits to the American people, I am deeply disturbed by what appears to be inexcusable delays in the Title X grant application process.

⁴ Richard Nixon, *Statement on Signing the Family Planning Services and Population Research Act of 1970* (Dec. 26, 1970).

⁵ Department of Health and Human Services, Office of Population Affairs, *Title X Family Planning Annual Report 2016 Summary* (August 2017)).

⁶ Lawrence B. Finer, Ph. D. and Mia R. Zolna, M.P.H., *Declines in Unintended Pregnancy in the United States, 2008 – 2011*, *New England Journal of Medicine* (March 3, 2016).

⁷ Jennifer Frost et al., *Publicly Funded Contraceptive Services at U.S. Clinics, 2015*, Guttmacher Institute (April 2017).

⁸ *Id.*

⁹ Jennifer J. Frost, Adam Sonfield,, Mia Zolna and Lawrence B. Finer, *Return on Investment: A Fuller Assessment of the Benefits and Cost Savings of the US Publicly Funded Family Planning Program*, *The Milbank Quarterly*, Vol. 92, No. 4 (2014).

We therefore ask that you to respond to the following questions as soon as possible, and no later than February 12, 2018:

1. What is the status of the Title X grant application process?
 - a. When does OPA expect to make the grant applications publicly available?
 - b. How long will applicants have to complete applications?
 - c. Will OPA process applications on an expedited basis?
 - d. Does OPA expect to award grants by April 1?
 - e. If OPA will not be making grant funding available by April 1, does OPA intend to make available cost extensions for current grantees until fiscal year 2018 funding awards are distributed to ensure there is no lapse in service? Similarly, if the grant award process is delayed beyond June 30, 2018, does OPA have a contingency plan to ensure there is no lapse in service in those service areas?
 - f. How many existing Title X grantees will be affected if extensions are not provided beyond March 31, 2018? Please outline which states and territories, and the number of patients as per the most recent Family Planning Annual Report.
2. What is the reason for the substantial delay in release of the Title X grant application?
 - a. How many employees does OPA currently have assigned to the grant application process? How many employees were assigned to this process for the grants that were awarded in fiscal years 2016 and 2017?
 - b. Has OPA, or any employee of the office of OPA, consulted with outside organizations regarding the Title X grant application process?
3. On January 12, the Deputy Assistant Secretary for the Office of Population Affairs, Teresa Manning, left her post nine months after her appointment. Ms. Manning was reportedly escorted from the HHS building by security.¹⁰
 - a. What were the circumstances behind Ms. Manning's departure as director of OPA?
 - b. If Ms. Manning left voluntarily, was her departure planned? When did she give notice of her intent to resign?

¹⁰ *Anti-birth control official who led Title X departs HHS*, Politico (Jan. 12, 2018).

- c. Was Ms. Manning's departure in any way related to the delay in the Title X grant application process?
- d. Has OPA assessed the way in which a change of leadership at OPA at this critical time will impact the timing of the Title X grant awards?

Thank you in advance for your attention to this critical matter. If you have any questions, or would like to further discuss compliance with this request, please contact Christina Calce or Jacquelyn Bolen of the Democratic Committee staff at (202) 225-3641.

Sincerely,



Frank Pallone, Jr.
Ranking Member



Gene Green
Ranking Member
Subcommittee on Health



Diana DeGette
Ranking Member
Subcommittee on Oversight
and Investigations