

IMPACTS OF THE DOMESTIC GAG RULE

MILLIONS OF PEOPLE LOSING ACCESS TO CARE

What is Title X and the Domestic Gag Rule?

For 50 years, the Title X Family Planning Program has provided federal funding to a network of health centers around the country that provide free or low-cost birth control and related services to millions of people annually who have low incomes.

In August 2019, the Trump Administration undermined the ability of the Title X program to continue providing quality care by enforcing the “domestic gag rule.” Put simply, the domestic gag rule forces health centers that receive Title X funds to make an impossible choice. These centers must now decide between two options: accept funds to support their patients who might not otherwise be able to afford family planning care or withhold some information from patients about abortion services. This includes not mentioning that abortion is one of three legal options available to those who are pregnant—or even where they can access abortion services. Notably, Title X funds have never paid for abortions, this rule focuses on disallowing health providers from providing their patients information about their legal medical options. In the face of these challenges, family planning providers are doing their best to provide high quality services to their patients and fill gaps left in the wake of the disruption caused by the rule.

The rule is opposed by the American Medical Association (AMA)¹ and 19 other national health groups² because it violates medical ethics by denying patients information about all their legal health options. The AMA, joined by the National Family Planning & Reproductive Health Association (NFPRHA) and Essential Access Health, a Title X grantee in California, have led a petition to the Supreme Court asking for review of the domestic gag rule. While the outcome of that appeal is not yet known, the damage has been done.

Alarming Numbers of Health Centers are Impacted³

The upheaval to the safety net caused by the domestic gag rule is evolving. Based on the best available information, as of October 16, 2020:

- Eighteen Title X grantees have exited the Title X program, representing nearly 23% of all grantees.
- Planned Parenthood, which previously served over 40% of all Title X patients, has exited the Title X program.
- In 2019, health centers served more than 800,000 (21%) fewer patients compared to 2018.⁴
- Six states—HI, ME, OR, UT, VT, and WA—are no longer receiving any Title X grants, as all grantees in those states exited the program.
- An additional 10 states are losing some Title X grants.
- An additional 18 states are losing individual Title X clinics and it’s unclear whether or not grantees in those states can find other clinics to replace them.
- HHS has redistributed the returned Title X money primarily to organizations that it already funds. It is unclear how long, if ever, it will take for these redistributed funds to fill the gaps left by grantees and clinics who exited the program.

People Most in Need Are Paying the Price

The domestic gag rule's impact on birth control access is nothing short of catastrophic for people living on limited incomes. It means that people who have long relied on the program may have higher out of pocket costs for health care and contraception because clinics will no longer have funds to support them. People already counting every penny and struggling amidst a pandemic may need to travel longer distances to clinics offering services, take more time off work if employed, or pay for additional child care costs.

- Already, more than 8.8 million women in 380 counties across the nation are at risk of losing affordable access to the birth control they need because the clinic they depend on has lost its Title X funding.
- To date, more than 900 clinics have been forced out of the program.
- Since the rule began to be enforced in August 2019, stories of increased costs, shorter hours, and fewer services being offered have flooded in.

"On Wednesday, Jessica DeLong walked into the Planned Parenthood in Minneapolis for birth control and was told she'd have to pay \$200 instead of her usual \$30 sliding scale fee. She didn't have it, and told the clinic she'd come back next week after she got paid."⁵

"We're already seeing patients forego services," [said] Byron Clarke, the Chief Operating Officer of the Utah Navajo Health Service... "It hits hardest on people who are already considering whether they can afford the gas money to drive to see us."⁶

"For now, Washington's Title X-supported clinics are being funded from state coffers. Based on predictions by the state's health department, Washington projects it can maintain its current level of service until March 2020. After that, they're going to start considering reducing eligibility or narrowing the list of Title X-eligible services, which currently includes mammograms and testing for sexually transmitted infections."^{7, 8}

If that's not bad enough, the pandemic has profoundly changed the health and economic livelihood of people who depend on Title X clinics.

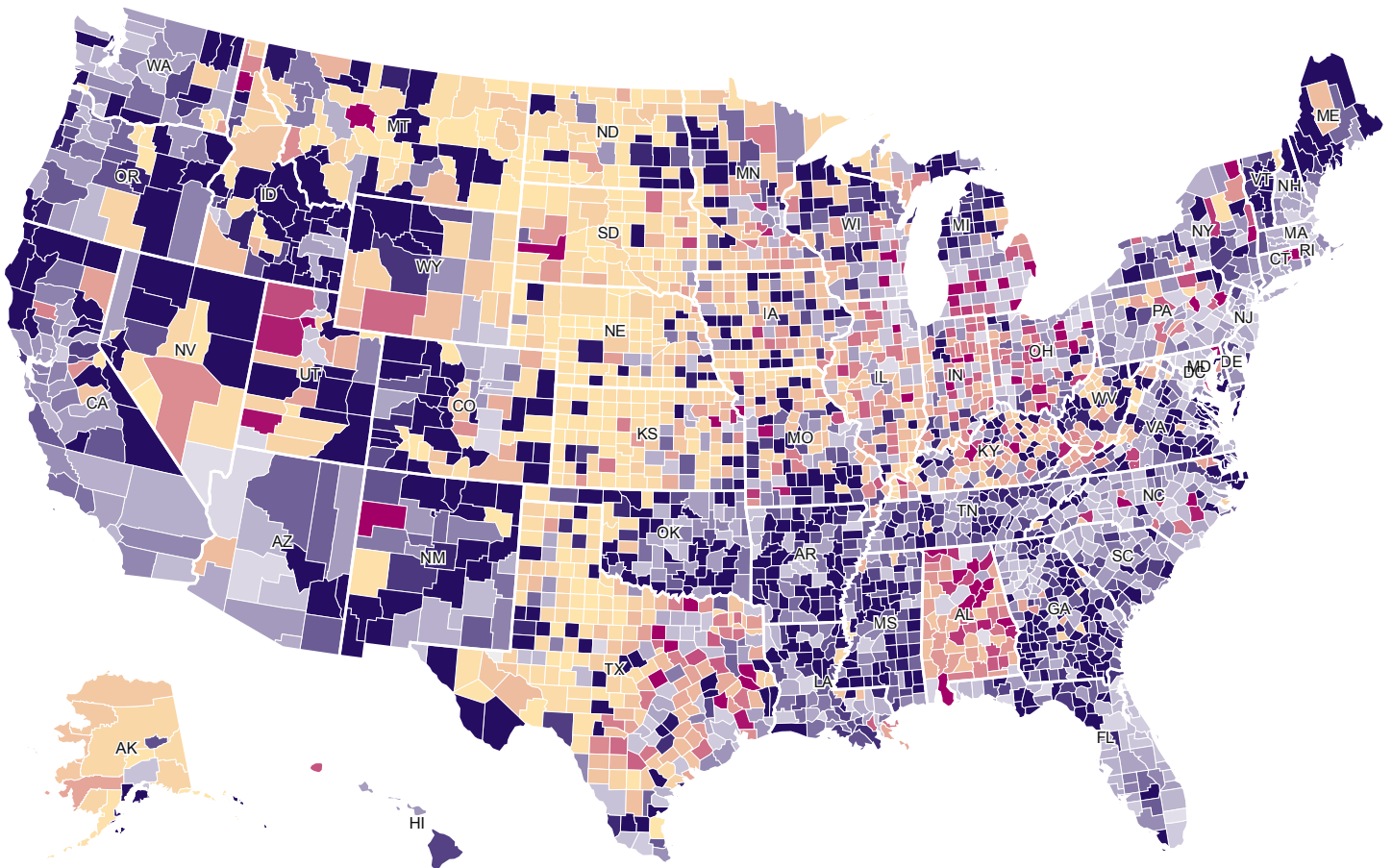
This puts even more pressure on them and on an already strained public health safety net, including Title X clinics and providers who are doing their valiant best to respond to COVID while keeping patients safe as they seek basic services such as birth control.

Title X Health Centers Are Critical to High-Quality Birth Control Access

It is not only those who receive services directly paid for by Title X who are losing access to birth control. Title X funds are critical to keeping clinic doors open for thousands of clinics that also serve patients who have insurance, such as Medicaid and Affordable Care Act plans.

All this comes at a time when 1.5 million women in need of publicly funded contraception live in counties with no health center offering the full range of birth control methods.⁹

HEALTH CENTERS OFFERING THE FULL RANGE OF BIRTH CONTROL METHODS by state and county



UNITED STATES

19,399,020 women in need live in contraceptive deserts

1,510,370 women in need live in counties without access to a single health center that provides the full range of methods

Data from: U.S. Census Bureau, Guttmacher Institute, Center for Disease and Prevention, Federal Communications Commission, and a compilation of data about health centers managed by Power to Decide.

*Health centers that provide the full range of methods are those that offer IUDs, implants, and most other FDA-approved methods such as birth control pills, the shot, the ring, the patch, cervical caps, diaphragms and emergency contraception on site.

Endnotes

- 1 Statement from the American Medical Association “We cannot let changes to Title X put women’s health at risk” March 5, 2019. Retrieved on September 4, 2019 from <https://www.ama-assn.org/about/leadership/we-cannot-let-changes-title-x-put-women-s-health-risk>
- 2 Statement from 19 health care provider groups “The final Title X regulation disregards expert opinion and evidence-based practices” February 26, 2019. Retrieved on September 4, 2019 from <https://www.acog.org/About-https://www.acog.org/en/News/News%20Releases/2019/02/The%20Final%20Title%20X%20Regulation%20Disregards%20Expert%20Opinion%20and%20Evidence-Based%20Practices>
- 3 Data and calculations from Power to Decide, details available upon request.
- 4 Fowler, C. I., Gable, J., Lasater, B., & Asman, K. (2020, September). Family Planning Annual Report: 2019 National Summary. Washington, DC: Office of Population Affairs, Office of the Assistant Secretary for Health, Department of Health and Human Services. Retrieved on October 6, 2020 from <https://opa.hhs.gov/sites/default/files/2020-09/title-x-fpar-2019-national-summary.pdf>
- 5 Cha, Ariana Eunjung and Regan, Sheila “Patients face higher fees and longer waits after Planned Parenthood quits federal program” The Washington Post, August 24, 2019. Retrieved on September 3, 2019 from <https://www.washingtonpost.com/business/2019/08/24/patients-face-higher-fees-longer-waits-after-planned-parenthood-quits-federal-program/>
- 6 Ollstein, Alice Miranda and Rouben, Rachel “Family planning clinics watch their safety-nets vanish” Politico, September 1, 2019. Retrieved on September 3, 2019 from <https://www.politico.com/story/2019/09/01/family-planning-trump-abortion-1479239>
- 7 Pinchin, Karen “With Planned Parenthood out of Title X, clinics face ‘a terrible choice’” Frontline, August 27, 2019. Retrieved on September 3, 2019 from <https://www.pbs.org/wgbh/frontline/article/with-planned-parenthood-out-of-title-x-clinics-face-a-terrible-choice/>
- 8 The Washington State FY 2020 supplemental budget proposal does not appropriate additional funds and notes sufficient funds were provided in the 2019-2021 biennium budget to cover these services.
- 9 Power to Decide, Contraceptive Deserts Map, 2019. Retrieved on September 3, 2019 from <https://powertodecide.org/what-we-do/access/access-birth-control>