



April 16, 2010

The Honorable David R. Obey  
Chairman  
Subcommittee on Labor, HHS, Education and Related Agencies  
House Appropriations Committee  
2358B Rayburn House Office Building  
Washington, DC 20515

Dear Chairman Obey:

On behalf of The National Campaign to Prevent Teen and Unplanned Pregnancy, I would like to express appreciation for your past support of the Title X national family planning program and respectfully request that the program be included as a high funding priority in Fiscal Year 2011. Over the past 40 years, Title X has played a critical role in preventing unplanned pregnancy by offering the full range of family planning services, including counseling, contraception, and related outpatient services to approximately five million low-income and uninsured women and men through a network of more than 4,400 community-based clinics.

We appreciate your leadership in providing an increase in the amount of \$10 million for Title X in FY 2010. However, even with this increase, funding levels have been relatively stagnant for many years and have not kept pace with the need. For example, the percentage of uninsured women of reproductive age continues to rise as a result of the recession—more and more Americans are becoming increasingly reliant on Title X family planning centers not only for family planning services but for basic health care as well. In fact, 6 in 10 women who access care from a family planning health center consider it to be their usual source of health care. For these reasons and others we believe that the current level of \$317 million is insufficient. We respectfully urge you to appropriate an additional \$76.5 million in FY 2011 to continue high-quality, cost-effective family planning services that help women and men avoid unplanned pregnancy. This would be an important downpayment towards a longer-term goal of reaching at least \$700 million over the next five years.

To be sure, last month's passage of landmark health reform legislation (P.L. 111-148) with its focus on prevention, women's health, and expanded access for low-income populations to health care including family planning services will do much to help prevent unplanned pregnancy. However,

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transitioning to new ways of providing services and expanding access to programs will be complex and some provisions of the new law will not take effect for several years. There are considerable challenges associated with establishing state private insurance exchanges, moving from the Medicaid family planning waiver process to the state eligibility option for family planning services, expanding Medicaid coverage for childless adults, and developing guidelines for covered preventive services for women with cost-sharing protections and defining required basic benefits in qualified health plans. These transition challenges make access to and support for critical safety net programs, such as Title X, that much more important.

Title X helps individuals avoid early pregnancy and be more intentional about birth spacing. This vital program is credited with helping women avoid 1.94 million unplanned pregnancies in 2006, which would likely have resulted in about 860,000 unintended births and 810,000 abortions. Moreover, research suggests that for every dollar spent on publicly funded family planning clinic services, the government saves \$4.02 in public sector maternal and infant care costs.

We recognize that in this time of budget constraints resources are limited. However, as you move forward in the FY 2011 appropriations process, we sincerely hope you will give serious consideration to making a significant investment in Title X, which is a cost-effective and vitally important program. A strengthened Title X program will help reduce unplanned pregnancy and in turn make families stronger, enhance our workforce, reduce taxpayer burden, improve prospects for this generation and the next, and result in fewer abortions.

Please contact Lisa Shuger, Director of Public Policy, at 202-478-8576 or [lshuger@thenc.org](mailto:lshuger@thenc.org), for any further information regarding this request.

Respectfully,



Sarah S. Brown

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