

# **The U.S. Family Planning Program (Title X) A Preventive Health Program**

**Presented at**

**Expanding Our Experience and Expertise: Implementing Effective Teenage  
Pregnancy Prevention Programs**

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# Session Objectives

## Describe:

- Title X as a preventive health service
- Adolescent services in Title X
- History of Title X guidelines and current efforts to revise

# Need for Family Planning

- One-half of pregnancies are unintended
- Women who are young and poor had rates that are 2-3 times the national average
- Highest teen pregnancy rate in the developed world; > 700,000 teens 15-19 years get pregnant each year

# Need for Family Planning (cont.)

- There were 66 million U.S. women of reproductive age (13–44) in 2008
- 36 million women were in need of contraceptive care in 2008; that is, they were sexually active and able to become pregnant, but were not pregnant and did not wish to become pregnant.
- Of the 36 million women in need of contraceptive care in 2008:
  - 71% (12.4 million) were poor or low-income adults
  - 29% (5 million) were younger than 20 years
  - Four in 10 poor women of reproductive age have no insurance coverage

SOURCE: Frost JJ, Henshaw SK and Sonfield A, *Contraceptive needs and services: national and state data, 2008 update*, New York: Guttmacher Institute, 2010

# Title X

## Family Planning Services and Population Research Act of 1970

**PUBLIC LAW 91-572-DEC. 24, 1970**

### AN ACT

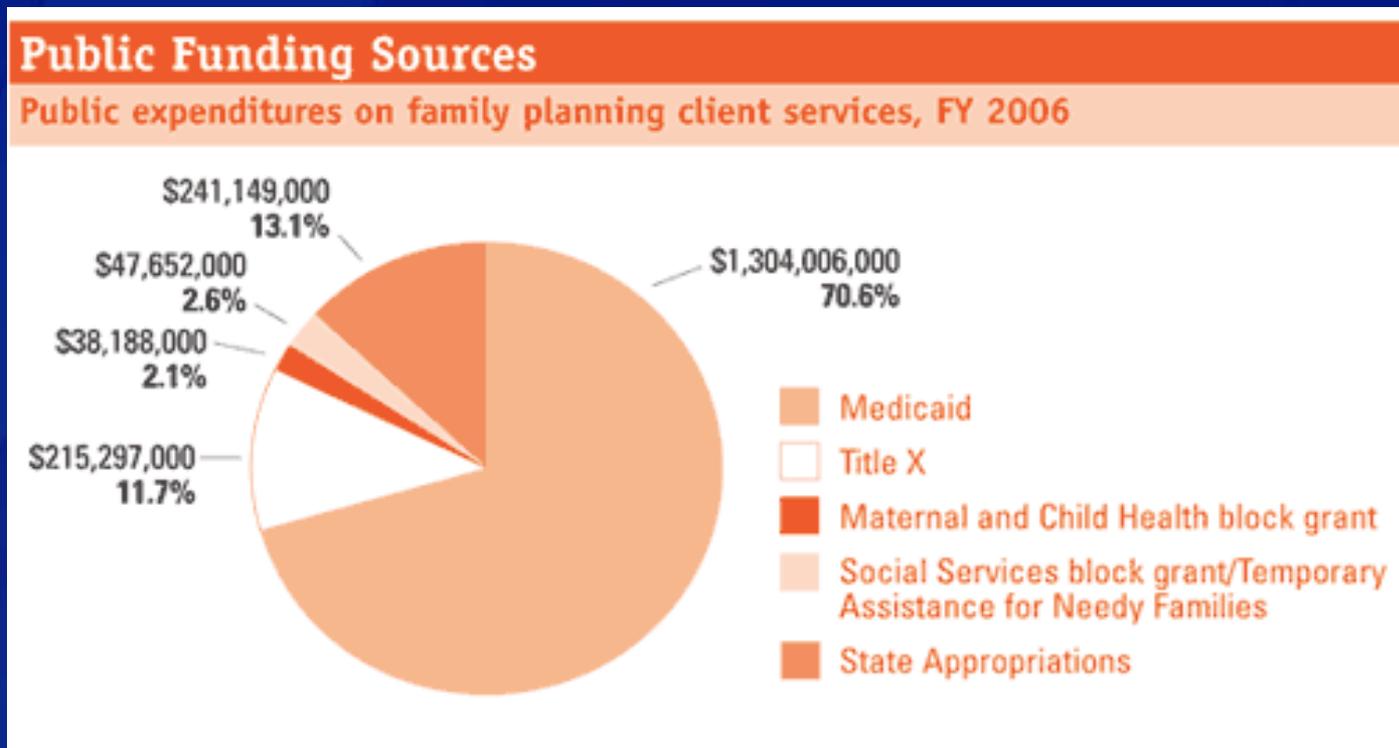
To promote public health and welfare by expanding, improving, and better coordinating the family planning services and population research activities of the Federal Government, and for other purposes.



# Overview of Title X Family Planning Program

## Funding for Family Planning

Title X is a critical source of public funding for services, infrastructure and policy-setting, although Medicaid is the largest payer.



Source: Guttmacher, *Facts on Publicly Funded Contraceptive Services in the U.S.*, February 2009

# More Than Contraception

- Title X Family planning includes preventive health services such as cervical cancer screening, clinical breast exams, HIV & STD tests, and other services related to reproductive health and family planning
- For many, Title X is the entry point into the health care system, and more than half report it to be their usual source of health care

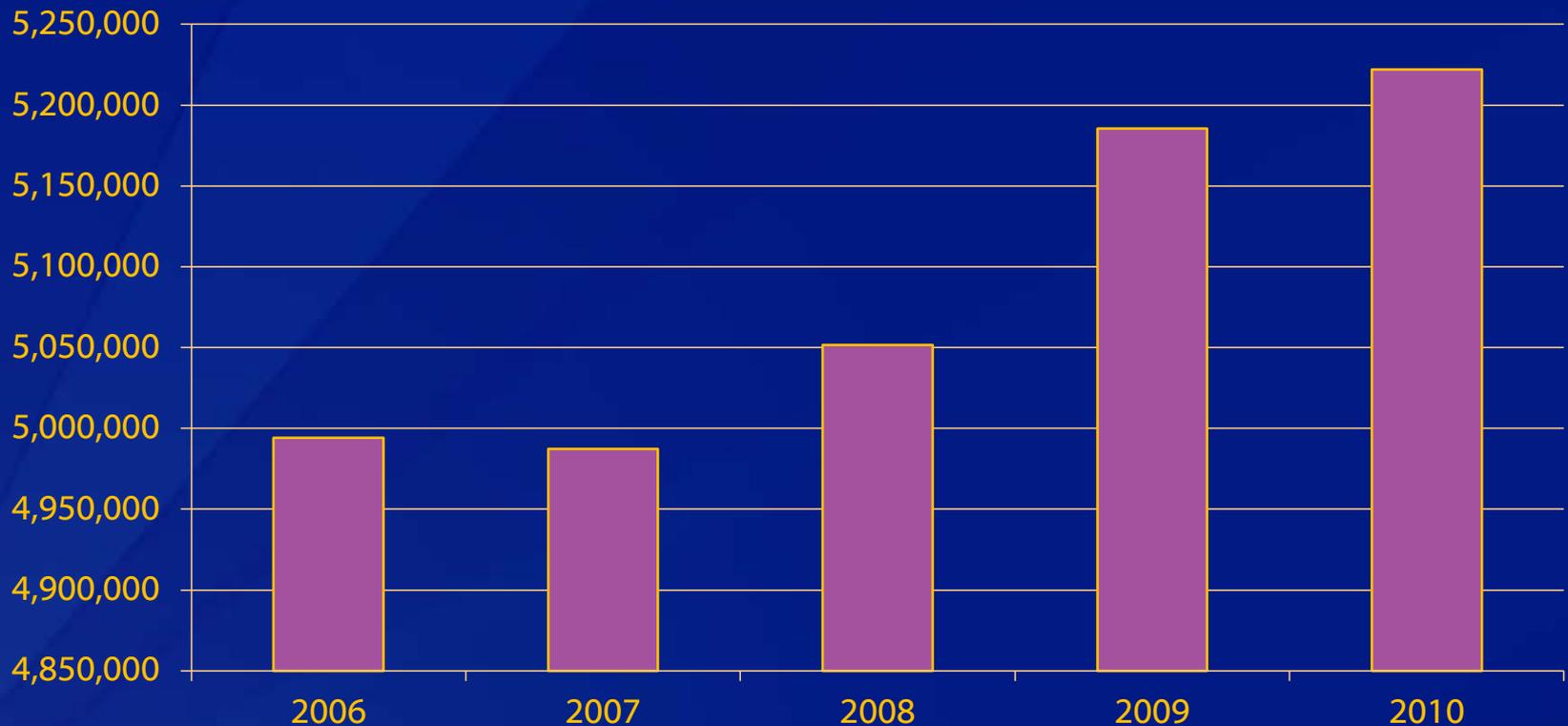


# Essential Role of Title X and Publicly Funded Family Planning

- **Publicly funded FP helps women each year avoid 1.94 million unintended pregnancies**
- **6 in 10 women who go to a FP center consider it their usual source of medical care**
- **1 in 3 women who have an HIV test or receive STI testing or treatment do so at a FP center**

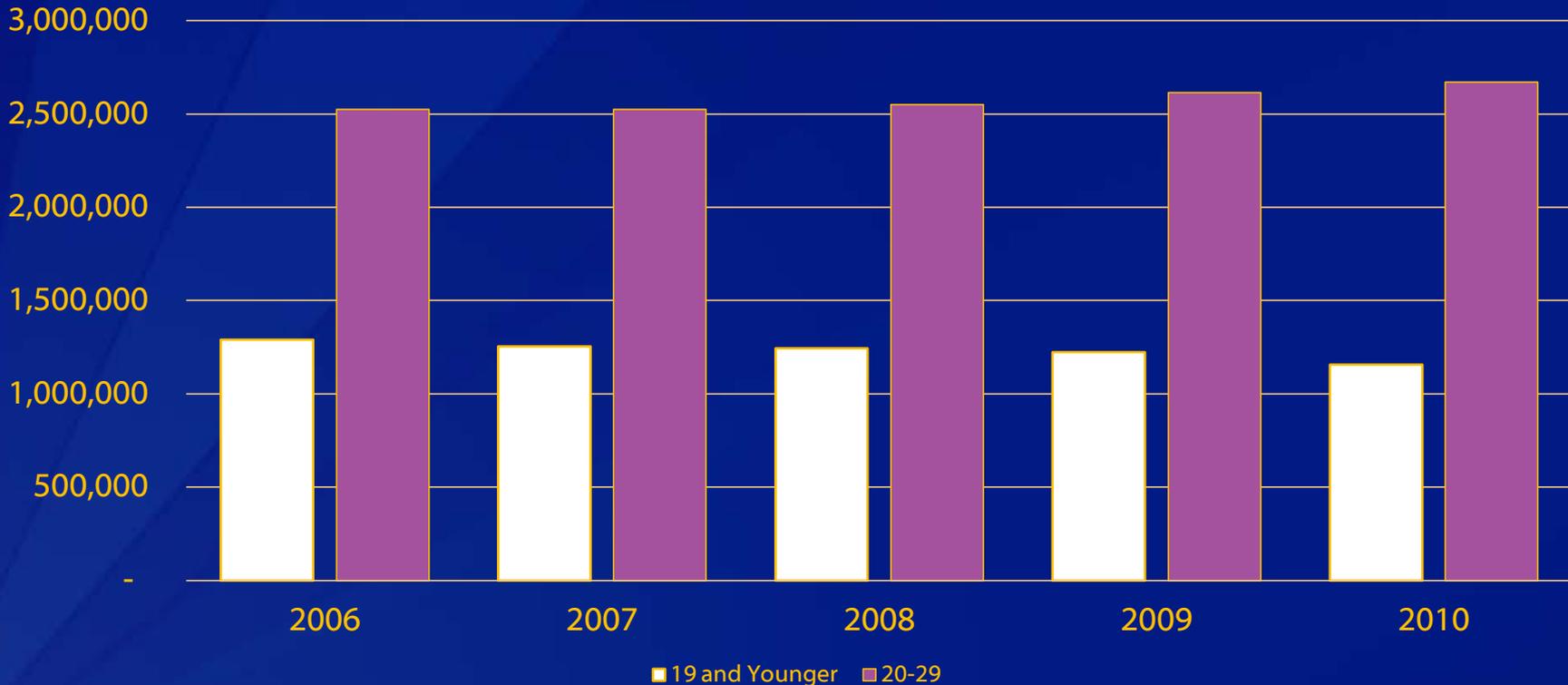
# Overview of Title X Family Planning Program

## Total Clients Served: 2006-2010



# Overview of Title X Family Planning Program

Title X clients are disproportionately young  
In 2010: 22% (1,156,376) of all Title X clients were teens;  
51% (2,672,832) were 20-29



# Primary Contraceptive Method Use (Females)\*

- 2% Sterilization
- 5% IUD/IUS
- 1% Hormonal Implant
- 13% Hormonal Injection
- 35% Oral contraceptive
- 2% Contraceptive patch
- 4% Vaginal ring
- 2% Abstinence
- 5% Other method or method unknown
- 16% Male condom
- 13% No method (8% seeking pregnancy; 5% “other reason”)

\*2010 FPAR

# Title X & Standard of Care

- Another key role for Title X has been to set the standard of care for family planning service delivery
- Recent effort to update the Title X program guidelines led to current guidelines

# Background on Current Title X Guidelines



# Title X Program Guidelines

- Original guidelines established in 1970 following the enactment of Public Health Service Act 42 U.S.C. 300 authorizing the establishment of the Title X program
- Current guidelines were updated in 1980 and in 2001
- Address largely legal and regulatory requirements of Title X program

# Purpose of the Title X Program Guidelines

- To assist *current and prospective grantees* in understanding and utilizing the family planning service grants program:
  - Grant application and award process
  - Project management & administration
  - Financial management
  - Clinic management and clinical service requirements
- Although primary target audience of the guidelines is Title X grantees, these guidelines serve as a “standard of care” for other stakeholders

# Why Revise the Current Title X Program Guidelines?

- Current structure organizes all content--legal, administrative, and clinical expectations into one comprehensive document
- Current guidance on clinical practices does not meet current nationally recognized standards of care and in some instances are too prescriptive or restrictive
- Current guidance does not incorporate evidence-based standards of care and best practices
- Current structure does not allow for timely updates and revisions based on medical, technological, and other advancements

# What approach is being used to revise the guidelines?

- Expert Work Group providing individual feedback throughout the process
- Systematic literature reviews of relevant evidence
- Compilation of clinical care recommendations
- Technical panels of experts reviewing the evidence and providing feedback

# Expert Work Group

- Institute of Medicine
- CMS/Medicaid
- ACOG
- PPFA
- HRSA
- ARHP
- CHC's
- Academics
- FP providers
- NFPRHA
- SFPA
- FPCA

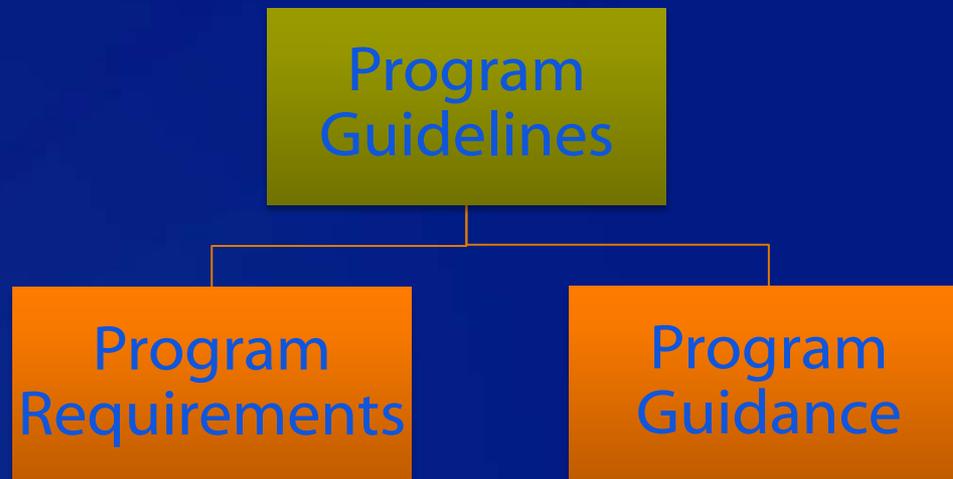
# Two parts to the guidelines under development

## 1) Program Requirements:

Defines program requirements for grantees funded under the Title X program – primarily statutory and regulatory.

## 2) Program Guidance:

Recommends how to provide family planning services in an evidence-based manner



# Conceptual Framework

- Improved **QUALITY** of care → improved RH outcomes
- Quality care is safe, effective, client-centered, timely/accessible, efficient and equitable (IOM 2001)
- It also addresses choice of methods, information given to clients, technical competence, interpersonal relations, mechanisms to encourage continuity (Bruce 1990, Becker 2007)

# Family Planning Services

A constellation of services that include:

- Contraceptive services
- Pregnancy diagnosis & counseling
- How to get pregnant
- Basic infertility services
- Preconception health
- STI screening & treatment

# Priority Topics

## Systematic literature reviews

- Counseling & education
- Community outreach & education
- Adolescent services
- Quality improvement

## Clinical care recommendations

- Women's preventive health care
- Men's reproductive health care

# Summary

- Medicaid covers the majority of family planning services for low income individuals, but Title X funds support the infrastructure needed to provide quality care.
- Title X has historically defined the standard of care for family planning services.
- The new guidelines will build on this history to set guidelines for all providers nationwide.